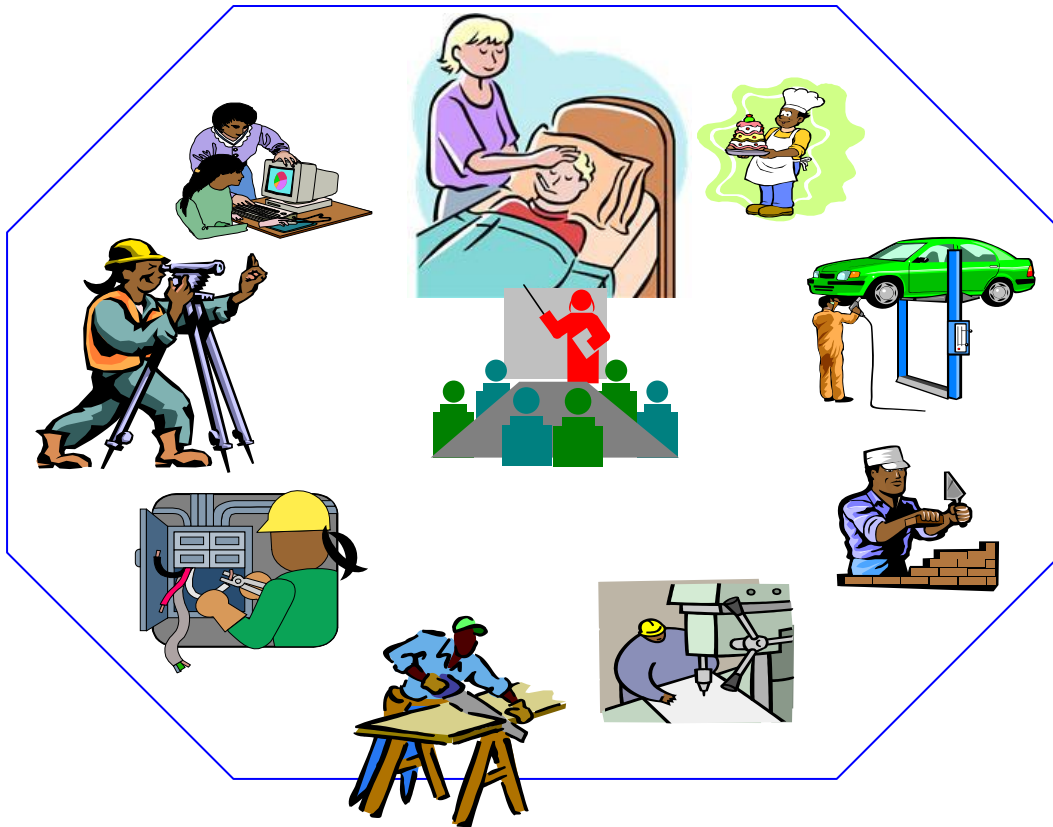# Health Extension Service L –IV

## Based on Jan, 2018 V4 OS and June, 2018 V1 Curriculum

**Module Title:  Managing Community Health Service**

**LG Code: HLT HES4 M01    LO1-LO3-LG-1-LG3**

**TTLM Code: HLT HES4 M01 TTLM 0221V1**

Feb 2021

Bishoftu,          Ethiopia

# Contents

## LO1. Follow organizational guidelines understand health policy and service delivery system

| Instruction Sheet-1 | Learning Guide #-1 |
|---|---|

This learning guide is developed to provide you the necessary information regarding the following content coverage and topics –

o            Definition of terms
o            Historical development of Ethiopian health policy and services
o            Organization of health service delivery
o            Concepts of primary healthcare
o            Primary healthcare in Ethiopia
o            Health Service Extension Program
o            Achievements of the Ethiopian Health Extension Program
o            Development of the Health Extension Program

This guide will also assist you to attain the learning outcome stated in the cover page. Specifically, upon completion of this Learning Guide, **you will be able to –**

o   Definition of terms
o   Historical development of Ethiopian health policy and services
o   Organization of health service delivery
o   Concepts of primary healthcare
o   Primary healthcare in Ethiopia
o   Health Service Extension Program
o   Achievements of the Ethiopian Health Extension Program
o   Development of the Health Extension Program

**Learning Instructions:**

1.   Read the specific objectives of this Learning Guide.

2.  Follow the instructions described below 3 to 6.

3.  Read the information written in the information "Sheet 1, Sheet 2, Sheet 3 and Sheet 4,---"in page ---, ---, --- and **---** respectively.

4.  Accomplish the "Self-check 1, Self-check t 2, Self-check 3 and Self-check 4" ,---" **in** page ---, ---, --- and ---respectively

5. If you earned a satisfactory evaluation from the "Self-check" proceed to "Operation

| Information Sheet-1 | Definition of terms |
|---|---|

## 1.1 Defining terminology

1.1.1 Health care – is the total societal effort, undertaken in the private and public sectors, focused on pursuing/improving health

1.1.2 **Health services** – are specific activities undertaken to maintain or improve health or to prevent decrements of health Can be preventive, promotive, curative or rehabilitative in nature

1.1.3 **Health service organization**: Organizational structures within which health services are delivered directly to consumers.

1.1.4 **Health systems** Are formally linked HSOs, possibly including financial arrangements, joined together to provide more coordinated & comprehensive health services

1.1.5 Community packages were packages that were given for every community members

1.1.6 Vertical health program are centralized, non- integrated and disease specific health programs

1.1.7 **Effectiveness**, it is how well an organization, or a person in an organization is meeting their goal

1.1.8 **Efficiency**, is a measure of how well the health sector is using its resource to achieve that goal

1.1.9 Equity; it is a matter of distributing resources as well as service for all segment of the population equally

1.1.10 Team spirit; it is creating an atmosphere of mutual trust and understanding between members of a team

1.1.11 **Division of labor;** it is an act of distributing work, among all member of the team in equal manner

1.1.12 **Planning**; it is forecasting and thinking about things that you want to happen in the future and then working to achieve that

| Self-Check -1 | Matching question |
|---|---|

**Directions:** Answer all the questions listed below. Use the Answer sheet provided in the next page:

Match the following ethical principles (under column A) to their meaning(column B)

| A | B |
|---|---|
| 1. Equity; | A) an act of distributing work |
| 2. Team spirit; | B)an act of assigning duties, |
| 3. Division of labor | C),equally distribution of resources |
| 4. Planning; | D) forecasting and thinking about things |
| 5. Organizing; | E) understanding between members of a team |

*Note:* **Satisfactory rating - 5 points**　　　**Unsatisfactory - below 4 points**

Answer Sheet

Name: _____　　　　　Date: _____

1. ___
2. ___
3. ___
4. ___
5. __

| Score = _____ |
|---|
| Rating: _____ |

| **Information Sheet-2** | Historical development of Ethiopian health policy and services |
|---|---|

## 2.1. Historical development of health service in Ethiopia

Ethiopian health service will be working and developed over previous years.

The challenges through the process brought the development and application of primary health care in rural part.

Ethiopia is a country with 83%(2007),population census report) of its population living in rural areas and about nearly 80% of the disease of that affect its population are communicable disease that can easily prevented through the change of behavioral practices.

. During the past fifteen years, the Federal Ministry of Health has built an impressive frame work for improving the health for all, including maternal and neonatal health.

This has included a wide range of different strategies like making pregnancy safer, reproductive health strategy, adolescent and youth reproductive health strategy and the revised abortion law.

There are also strategies on free service for key maternal and child health services, the training and deployment of health extension workers for promotion of institutional delivery and Emergency surgery officers at primary hospital to manage obstetric and other surgical procedures

2.1.2. History of Public Health

- Why history of public health?
- ☐ To learn from the past experiences
- ☐ To understand the present situation
- ☐ To forecast the future conditions
- ☐ To recognize the dynamic transition in social, economic and political factors and their implication on human health.

### 2.1.2. Health policy in Ethiopia

The first health policy in Ethiopia was developed in 1993 and mainly focuses on prevention and control of this communicable disease.

Prevention and promotion components of healthcare that can resolve most of the health problems of the population were given more attention by the new health policy and the main features of this policy include a focus on decentralization, expanding the PHC system, and encouraging partnerships as well as the participation of the whole community in health activities. The strategy of the policy has been to expand healthcare delivery at the grass roots level through the implementation of the Health Service Extension Program (HSEP). The primary aim of the HSEP approach is to bring health service delivery to the rural community at family level where such a big percentage of the total population lives.

2.1.3 . Policy Development Advocate for community needs and issues, Prioritize health needs, Plan and develop policies

| Self-Check -2 | Witten test |
|---|---|

Directions:  Answer all the questions listed below. Use the Answer sheet provided in the next page:

1) About nearly 80% of the disease of that affect Ethiopian population are------------ that can easily prevented through the change of behavioral practices (3pt).

a)non communicable     b)communicable   c) a and b

2) The first health policy in Ethiopia was developed in 1993 and mainly focuses on_____ of this communicable disease

a)prevention          b)control        c)curative      d) ''a'' and'' b''

Note: Satisfactory rating - 3 points          Unsatisfactory - below 3 points

Score = _____

Rating: _____

Answer     sheet

Name: _____          Date: _____

**Short Answer Questions**

    1._____
    2._____

| Information Sheet-3 | Organizational structure of health service delivery |
|---|---|

## 3.1 Organizational structure of health service delivery

In order to reach the large segment of the population and provide health services for the community, so far Ethiopia was used three different organizational structures (tiers). The first was six tier system, the second was four tier system and the current was called three tier system. Which is organized in to: level one is a Woreda/District health system comprised of a primary hospital (to cover 60,000- 100,000 people), health centers (1/15,000-25,000 population) and their satellite Health Posts (1/3,000-5,000 population) connected to each other by a referral system.

The primary hospital, health center and health posts form a Primary Health Care Unit (PHCU). Level two is a General Hospital covering a population of 1-1.5 million people; and level three is a Specialized Hospital covering a population of 3.5-5 million people

.
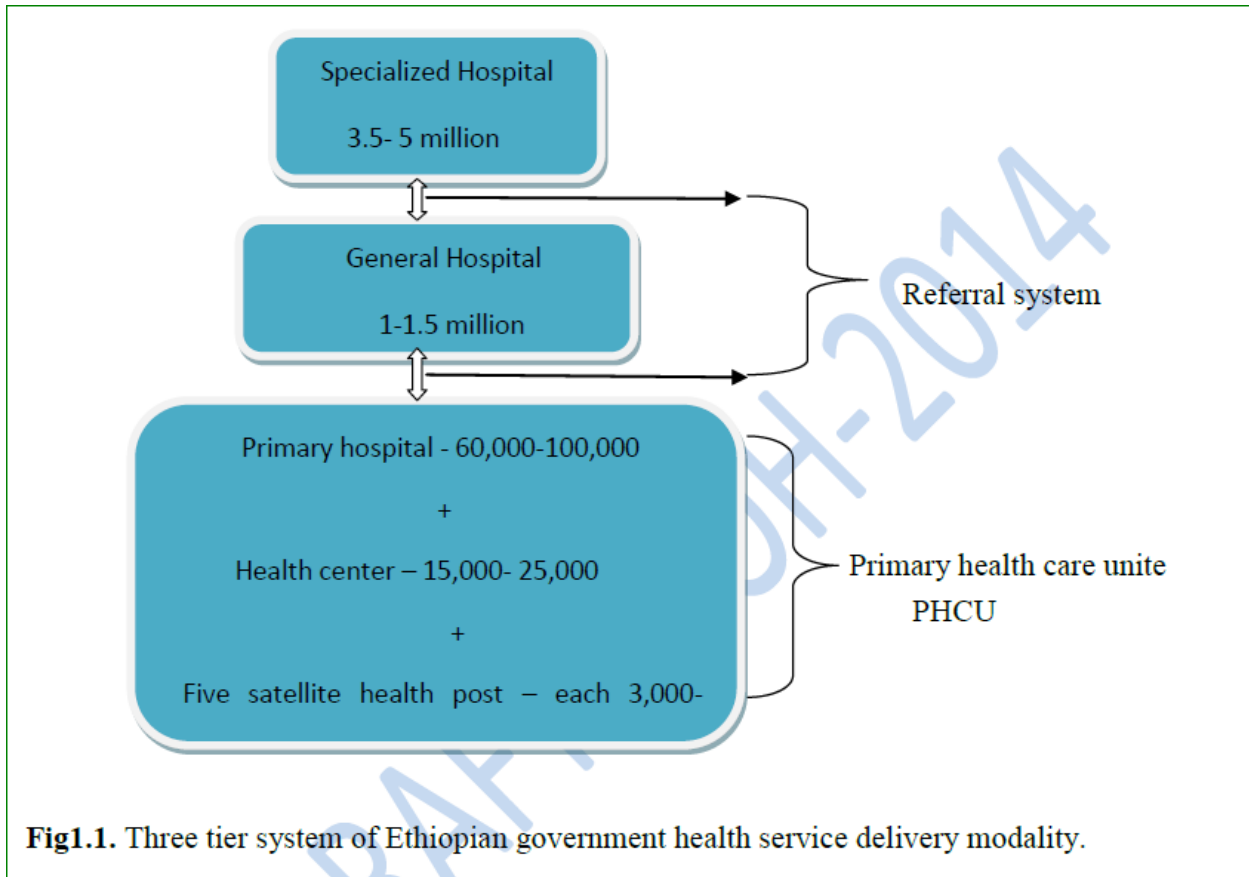


**Fig1.1.** Three tier system of Ethiopian government health service delivery modality.

The bottom structure of health service delivery is networked as one health center with five satellite health post. There is one person from the health center who is deployed as a supervisor of health extension under the five health posts. The five satellite health posts were mainly accountable for the cluster health center.

The promotive and curative health service in more integrated and complete manner. The compiled health service report will be sent for the woreda through the cluster health center. The cluster health center head and its management are accountable for the accuracy and completeness of the report sent from the cluster

Fig 1.2 Networking of cluster health center with its five satellite health post
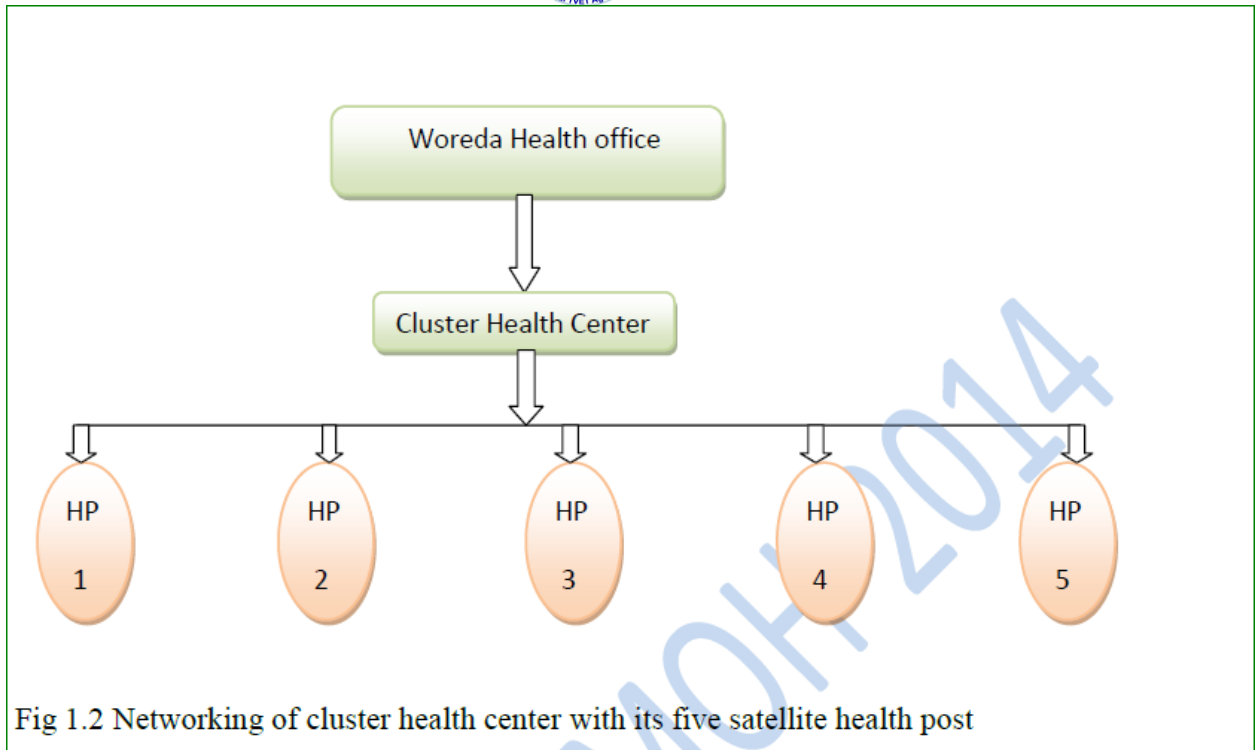
The referral system was also managed in such a way that the satellite health post were refer their client for further service for their cluster health center and if the case is also above the ability of the health center then the case will be referred to the primary hospital. The net working was illustrated by figure 1.2 above.

Fig1.3. Referral system at rural part of Ethiopia (photo; Mohammed Hussein, 2012)

| Self-check-3 | Written test |
|---|---|

Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page:

1-The current Ethiopian organizational structures is ___tier system **(3pt)**.

a)Four          b) three     c) six

2- The bottom structure of health service delivery is networked as one health center with ---- satellite health post

a) Four          b) three     c) five

3 -one health post serving at list about ----population

a) 3000-5000   b) 60,000-100,000   3) 15,000-25,000

Note: Satisfactory rating - 3 points          Unsatisfactory - below 3 points

Score = _____

Rating: _____

Answer     sheet

Name: _____          Date: _____

**Short Answer Questions**

1._____

2._____

3._____

| **Information Sheet-4** | **Primary health care** |
|---|---|

## 4.1    concept of Primary health care

Primary health care (PHC) is a term given to the essential health care that is universally accessible to individuals and is acceptable to them with fulfilling certain principles. Often, as in Ethiopia, this level of health care is free for people living in rural part. Primary health care gained the world's attention after the 1978 International conference on PHC held at ALMA ATA. After the declaration many countries have started to follow the approaches of PHC to reach rural communities where most of the health problem exists. As you know the main problem of our country is to give attention to alleviate the problem of communicable disease the PHC focuses on disease prevention and health promotion. It is the type of health care delivery, can be described as —by the people, of the people and for the people‖. This means it involves the community to solve the communities' health problem by using resources generated by the people themselves.

Ethiopia is one of the countries in the world which has adopted PHC as a national strategy since 1976. This strategy focuses on fair access to health services by all people throughout the country, with special attention on prevention and control of common disease, self- reliance and community participation.

## 4.2 .Principles of primary health care

4.2.1 **Accessibility** (equal distribution): this is the first and most important key to PHC. Healthcare services must be equally shared by all the people of the community irrespective of their race, creed or economic status.

4.2.2 **Community participation**: this includes meaningful involvement of the community in planning, implementing and maintaining their health services. Through the involvement of the community, maximum utilization of local resources, such as manpower, money and materials, can be utilized to fulfill the goals of PHC.

4.2.3 **Health promotion**: involves all the important issues of health education, nutrition, sanitation, maternal and child health, and prevention and control of endemic diseases. Through health promotion individuals and families build an understanding of the determinants of health and develop skills to improve and maintain their health and wellbeing.

4.2.4 **Appropriate technology**: technology that is scientifically sound, adaptable to local needs, and acceptable to those who apply it and for whom it is used.

4.2.5 **Inter-sectorial collaboration**: to be able to improve the health of local people the PHC program needs not only the health sector, but also the involvement of other sectors, like agriculture, education and housing.

## 4.3   Elements of Primary Health Care

4.3.1 Education on health problems and how to prevent and control them.

4.3.2. Development of effective food supply and proper nutrition.

4.3.3. Maternal and child healthcare, including family planning.

4.3.4. Adequate and safe water supply and basic sanitation.

4.3.5. Immunization against major infectious diseases.

4.3.6. Local endemic diseases control.

4.3.7. Appropriate treatment of common diseases and injuries

### 4.3. Primary Health Care in Ethiopia

Ethiopia is one of the countries in the world which has adopted PHC as a national strategy since 1976. This strategy focuses on fair access to health services by all people throughout the country, with special emphasis on prevention and the control of common diseases, self-reliance and community participation. Since this time the concept of Health Posts (Figure 1.3) and the development of rural health services has been further developed. The government of that time started to construct Health Posts, train Traditional Birth Attendants (TBA) and Community Health Agents (CHA), and assign them to Health Posts. However, this was not sustained due to factors such as insufficient managerial support, lack of in-service training, lack of remuneration and

mainly due to centralized health service management and the shift to vertical health program.



Figure 1.3 More than 14,000 Health Posts have been constructed as part of the HSEP program.(Photo: Ali Wyllie)

Vertical health program are centralized, non-integrated and diseases pecifichealth programmers. They are designed to tackle single diseases, such as malaria. Although vertical program used to be popular, it is now widely thought that they are not very effective and may even undermine the rest of the health services by using too many resources. In late 1997, the Federal

Ministry of Health in Ethiopia started to decentralize the health delivery system from Regional to woreda and kebele level, while still maintaining the vertical health program approach. This approach has not brought the required health outcomes. A new initiative, the Health Service Extension Program (HSEP), was therefore launched in 2003 together with the Health Sector Development Program II (HSDP II). This new

initiative will be discussed in detail in the next section of this study session.

Directions:  Answer all the questions listed below. Use the Answer sheet provided in the next page:

1 _____ is the first and most important key to PHC services that must be equally shared by all the people of the community irrespective of their race, creed or economic status.(**5pt)**

a)Health promotion          b)    Appropriate technology   c)  Accessibility

2. PHC is the lowest level of essential health care that is provided to the majority of the population of Ethiopia at a cost that the country and the community can afford.

A) TRUE                    B)FALSE

3. The Health Service Extension Program (HSEP) is an innovative community-based program

A)  TRUE                   B)FALSE

Note: Satisfactory rating - 5points       Unsatisfactory - below 5 points

Score= _____

Rating: _____

Answer    sheet

Name: _____          Date: _____

**Short Answer Questions**

1._____

2_____

_

3_____

| Information Sheet-5 | Health service extension program |
|---|---|

## 5.1. Health service extension program

Health Service Extension Program (HSEP) was a tool developed to effectively implement primary health care unites in Ethiopia. It is an innovative, community- based program that was first introduced in Ethiopia in 2003.

This program was launched after realizing that the basic health services were not reaching the majority of the population at grass root level. The objective of HSEP is to improve equitable access to mainly preventive health service through community based services by applying the five principles of primary health care

The principle behind this program is to make the community produce their health by themselves. Since 2003 over 14,000 Health Post constructions and 30,000 female health extension workers (two in each health post) were deployed and trained in each kebeles

The health service extension program is so an approach by which health services will bring to the house hold level. It has been designed to provide 16-18 packages under four main topics. These packages have been developed to tackle the main health problems of the country, so that we can achieve the Millennium Development Goals by the year 2015(2008EFY).



Fig1.3. Health post (photo by Mohammed Hussein, 2012)

## 5.2 . Health Extension Packages

5.2.1. Disease Prevention and Control.

- ➢ . TB, HIV/AIDS and other STI prevention and control.
- ➢ Malaria prevention and control.
- ➢ First aid and emergency measures.

5.2.2. Family Health Service.

- ➢ Maternal and child health.
- ➢ Family planning.
- ➢ Immunization.
- ➢ Adolescent reproductive health.
- ➢ Nutrition.

5.2.3. Hygiene and Environmental Sanitation.

- ➢ . Excreta disposal.
- ➢ Solid and liquid waste disposal.
- ➢ Water supply and safety measures.
- ➢ Food hygiene and safety measures.
- ➢ Healthy home environment.
- ➢ Control of insects and rodents.
- ➢ . Personal hygiene.

5.2.4. Health Education and Communication. It is a cross cutting package used across the above package implementation

The above health extension packages were approached to the community in two modalities. The first modality is model family package which you have learned the implementation strategy and training of model family concepts in health education and community mobilization module

**5.3 Model family package** is a modality in which health extension workers identify and train model families.

The selection of model family is criteria based. Model families have been involved in other development work; they are accepted by the community as early adopters and they the credibility which comes from having adopted health practices and become role model by implementing all the packages above and graduated. As a role model, graduated model families help in diffusing health messages.

This leads to the adoption of improved health practices and behaviors'by the community. The second modalities were community packages. Community packages were packages that were given for every community members. These are packages like immunization, health information dissemination, etc. This community packages were implemented by using modern and traditional association like Idir, mahber, ekub, schools

| Self-check-5 | Written test |
|---|---|

**Directions:   Answer all the questions listed below. Use the Answer sheet provided in the next page**:

1-_____ is an innovative, community- based program that was first introduced in Ethiopia in 2003.(5)pt

A )WHO program       B) Health extension program     C)  Health policy program

2. From Health Extension Packages which one is included under Family Health?

   a) TB, HIV/AIDS and other STI prevention and control.

   b) Malaria prevention and control.

   c) First aid and emergency measures

   d) Maternal and child health

Note: Satisfactory rating - 5points        Unsatisfactory - below 5 points

Score = _____

Rating: _____

Answer    sheet

Name: _____          Date: _____

**Short Answer Questions**

1._____

2._____

| **Information sheet -6** | **Achievements of the Ethiopian Health Extension Program** |
|---|---|

6.1   Introduction:

The HES enabled Ethiopian to achieve significant important in maternal and child health, communicable disease, hygiene and sanitation knowledge and health care seeking. Implementation and evaluation of a health program is a central component of health care management or function .The HES has been learning organization that adapt itself to community demand .

6.2. Ethiopian Health Extension Program Achievements

The HSEP has had government support and commitment at all levels, from Federal to kebele administration, from the start. Because of this it has delivered significant improvements in the health status of the people

Achievements and health outcomes of HSEP until the year 2010

1) 34,382 female Health Extension Workers have been trained and deployed to date

2) 14,192 Health Posts have been constructed so far

3)35.2 million insecticide-treated bed nets (ITNs) have been distributed to families in rural areas

4)Under five years old mortality has decreased from 160 per 1,000 live births in 2000, to 109 per 1,000 live births in 2010

5)Infant mortality in the first year of life has decreased from 77 deaths per 1000 live births in 2005 to 67 deaths per 1,000 live births in 2009

6) The Maternal Mortality Ratio has decreased from 673 to 470 per 100,000 live births

7) There has been a decrease in malaria epidemics and a decrease in malaria-related deaths

8) Antenatal coverage has increased from 30% in 2002 to 71% in 2010

9) Increased childhood immunization rates. DPT3 (a measure of health service utilization as well as childhood immunization) coverageincreased from 38% in 2000 to 86% in 2010

10)A total of 9,979,706 Model Households have been trained and graduated by 2010

11) Latrine coverage increased from 60% in 2009 to 74% in 2010

12) Contraceptive usage rate increased from 56% in 2009 to 62% in 2010

13) HIV/AIDS-related deaths have been decreasing

**Numbers** 4, 5, 6, 7 and 13 are all positive health outcomes. These statistics show that the health of people in Ethiopia has been improving since the introduction of the HSEP. All th e other statistics show the work that has been done within the HSEP to establish new services and put in place effective preventive measures.

Many elements of the HSEP have been a success and the health of the population has been steadily improving because of the establishment of so many Health Posts and the work of thousands of Health Extension Workers.

There have been some particular successes within the program including:

- . Model families
- . Community packages
- . Interventions at Health Post level.

Ethiopian has made substantial progress in improving health outcome during the last decade and is on track to achieve some of the health millennium development goal innovative strategy to improve house hold behavior and coverage of basic health care service contribute to Ethiopians achievement and the health extension program remaining the core of such innovation and provide model for countries struggling to improve health out come in a resource constrained setting.

The programs rest on an accelerated expansion of basic health infrastructure and local human resource with required skills to scale up delivery of high impact intervention focusing on improving the supply of and demand for a well-defined package essential promotive, preventing and curative health services.

6.**3. Implementation**

is putting a program or plan in to action or doing the work. What is to be implemented will be depends on the plan. Once a program has been planned and marketed, it must

be implemented. Implementation —consists of initiating the activity, providing assistance to it and to its participant, problem-solving issues that may arise, and reporting on progress.‖ To accomplish all of this, one has to select the most appropriate implementation strategy and see that any special concerns associated with implementation are handled properly. Factors that facilitate implementation

### 6.4. challenge of HES program in Ethiopia

In spite   of the successes, the program is currently facing challenges that remain to be addressed. These challenges are related to productivity and efficiency of health extension workers, working and living conditions of HEWS, capacity of health post and social determinants of health.

| Self-check-6 | Written test/True, False |
|---|---|

Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page:

1 The HES enabled Ethiopian to achieve significant important only in maternal and child health.(3pt)

A True                              B False

2 These challenges are related to productivity and efficiency of health extension workers, working and living conditions of HEWS, capacity of health post and social determinants of health.

A True                              B False

Note: Satisfactory rating - 3points          Unsatisfactory - below 3 points

Score= _____

Rating: _____

Answer    sheet

Name: _____          Date: _____

**Short Answer Questions**

1._____

2._____

| Information sheet -7 | Development of the Health Extension Program |
| --- | --- |

## 7.1 Development of the Health Extension Program

Despite the improvements in health outcomes achieved through the implementation of HSEP there are still challenges and problems that limit progress in the healthcare services in rural Ethiopia. The significant improvements in health outcomes throughout Ethiopia and now in this section you will learn about some of the gaps that are apparent and the measures that are being taken to further improve the services.

According to the Federal Ministry of Health's Health Sector Development III Performance Evaluation Report, there are problems with reading and writing skills amongst some Health Extension Workers, particularly those recruited in pastoralist and semi-pastoralist areas.

There have also been requests from the rural community for more curative services to be provided at Health Post level.

A lack of in-service training has also been noted. These and other factors have urged the government to improve the knowledge and skills of Health Extension Workers at least to the level that enables them to provide safe and competent preventive and health promotion activities, as well as basic curative services. For this to be realised, these cost-effective blended learning training modules have been created. This module-based training helps you to get your education without having to leave your workplace.

Furthermore, this type of learning makes it possible to train significant numbers of Health Extension Workers at the same time.

| Self-check-7 | Written test/True/false |
|---|---|

Directions:  Answer all the questions listed below. Use the Answer sheet provided in the next page

1-Despite the improvements in health outcomes achieved through the implementation of HSEP there are still challenges and problems that limit progress in the healthcare services in rural Ethiopia.**(3pt)**

2-According to the Federal Ministry of Health's Health Sector Development III Performance Evaluation Report, there are  noproblems with reading and writing skills amongst Health Extension Workers.

Note: Satisfactory rating – 3points          Unsatisfactory - below 3 points

Score = _____

Rating: _____

Answer    sheet

Name: _____          Date: _____

**Short Answer Questions**

1._____

2._____

**8.1 definition** of organizational resource: all assets that is available to a firm for use during the production process.

**8.1.1The basic organization resource**

  8.1.2. Human: the employees that works for a business

  8.1.3. Monetary resource: the money invested by the upper management in buying goods and service for the corporation

  8.1.4. Capital: the machinery used to produce product.

Organizational resources are combined, used, and transformed in to finished product during the production process .

## 8.2 The top resource management

1) understand which resources are in short supply and focus on them
2) Agree on common approach to prioritizing work across shared resource
3) Embrace d/nt ways of working across the organization and resource
4) Realize resource management is an ongoing process
5) Manage work and resource uses

## 8.3 Managing organizational resource

It is the ability to understand and effectively manage organizational resource (exa.people materials ,assets, budget. This is demonstrated through measurement, planning and control of resource to maximize result

8.4 **Importance of managing resource**

Effectively managing resource management helps improve insight in to resource availability as well improving timeline.

A good resource management strategy include knowing which resources are available where their time already be allocated and how productive resource is in certain

scenarios .With right resource management strategy ,companies can reduce cost and improve productivity.

### 8.4.1 Resources in health care organization?

Health care resources are defined as all materials, personnel, facilities, funds, and anything else that can be used for providing health care services. Health care has long been a limited resource for which there has been an unlimited demand; everyone needs health care.

### 8.4.2 Human resource management in health care organization?

Human resource managers in the healthcare industry are responsible for many issues including employee retention, legal matters, and staff recruitment. ... For example, human resource managers are involved in managing disputes between workers, management, and labor and firing and hiring worker

| Self-check-8 | **Written test** |
|---|---|

Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page

1- All assets those are available to a firm for use during the production process is:

a) Organizational resource

b)              Human resource

c) Monetary resource

2-All of the following are the basic organization resource except

a) Human:

b) Monetary resource

c) Capital:

d) Management

3-Human resource managers in the healthcare industry are responsible employee retention, legal matters, and staff recruitment.

                     A) True                           B) False

Note: Satisfactory rating – 3points         Unsatisfactory - below 3 points

```
Score = _____

Rating: _____
```

                     Answer     sheet

Name: _____          Date: _____

**Short Answer Questions**

         1._____

         2._____

         3._____

## LO2. Plan manages monitor and evaluate health system

**Instruction sheet -1**

This learning guide is developed to provide you the necessary information regarding the following content coverage and topics

- Managing and leadership in community healthcare
- Planning health programs
- Managing supplies at health post
- Monitoring and evaluation

This guide will also assist you to attain the learning outcome stated in the cover page. Specifically, upon completion of this Learning Guide, you will be able to –

- Identify concepts and Principles of Management
- Describe management functions
- Describe community health development army
- Demonstrate team leadership
- how Monitoring and evaluation

## Learning Instructions:

1. Read the specific objectives of this Learning Guide.

2. Follow the instructions described below 3 to 6.

3. Read the information written in the information "Sheet 1, Sheet 2, Sheet 3 and Sheet 4,---" in page ---, ---, --- and --- respectively.

4. Accomplish the "Self-check 1, Self-check 2, Self-check 3 and Self-check 4" ,---" in page ---, ---, --- and --- respectively

5. If you earned a satisfactory evaluation from the "Self-check" proceed to "Operation Sheet 1, Operation Sheet 1 and Operation Sheet 2 " in page ---.

6. Do the "LAP test" in page – ---

## Information sheet -1-Management and leadership in community healthcare

1.1 Definition of management

Management is simply doing things through people

## 1.2 Concept of management

As Management is simply doing things through people a health extension worker will involve in supporting individuals to produce their own health, in doing these job knowingly or unknowingly you practice management in every daily activity. When you start your job you may ask yourself, what you may suppose to do. Then you can get answer from other management definition, so management is the process of forecasting and planning, organizing, leading, coordinating and evaluating the resource of an organization in the efficient and effective manner to achieve organizational goal.

Management in your daily work will involve knowing of three important concept of management

The first concept is the issue of Effectiveness, it is how well an organization, or a person in an organization is meeting their goal. For your case, it means how well you achieve your annual objective. For example, if you plan to provide family planning for all females in child bearing age in your kebele and you do so by the end of the year, then you are effectively perform your plan. But if you achieve poorly and the community is not satisfied with your service, then you are not effective.

The second concept is Efficiency, is a measure of how well the health sector is using its resource to achieve that goal. Efficiency is the question of cost effectiveness. If you do well to achieve your objective but with high cost that is not balance with your performance, then you are effective but you are not efficient

The third concept of management is Equity; it is a matter of distributing resources as well as service for all segment of the population equally. Equity is a question of right, because every citizen has a full right to get health service

## 1.3 principles of management

**1.3.1 Team spirit:** Team spirit is essential for any organizational work. This principle advocates he benefits of working as a team and building good morale amongst every one you work with, including volunteers and members of model households. As manager you will need to ensure that you develop and maintain morale, both individually and communally, and through building team spirit. This helps promote an atmosphere of mutual trust and understanding

### 1.3.2 Division of labour

The principle of division of labour is that work must be shared or divided fairly amongst the team. Normally, in a team, there needs to be division of labour, where each category of staff exercises their particular skill towards achieving specific objectives. The role of management is to assign a balanced proportion of each type of worker to the work to be done.

■ There has been an outbreak of diarrheal disease in your community. A prevention and control committee has formed in response to the epidemic and identified a number of activities which will be needed to sort out the problem.

**The work must be divided amongst the staff and groups available**

(a) The kebele administration and the Health Extension Worker/ Practitioners must mobilize the community.

(b) Health personnel must assure the supply of medicine.

(c) The water committee should ensure that the water is treated and safe.

(d) The Health Extension Worker/Practitioner should give health education and advocacy.

Figure 1.Teams of health workers requires division of labor to make sure people know the tasks they should focus on. (Photo: Carrie Teacher)

### 1.3.3 Focus on results not activities

One of the principles of management is to make sure that everybody withinthe organization has a clear understanding of the goals and objectives, and makes each person aware of their own roles and responsibilities in achieving those objectives. This is commonly called management by objective, which is a systematic and organized

approach that allows management to focus on achievable goals (Figure 2). Deciding and saying what is to be accomplished is setting an objective (a goal, a purpose or a target). There are many kinds of objectives. For example, you may have an objective that 80% of the pregnant women in your kebele will attend antenatal care and be delivered by Health Extension Practitioners next year.



Figure 2 Setting appropriate objectives and activities can help you achieve a health goal. (Photo: Ali Wyllie)

## 1.4. Management functions

Management is a process that can be divided into five distinct parts involving interrelated activities.

Health Extension Practitioners play various roles in the Primary Health Care system.

You will be expected to be a manager, leader, coordinator, planner, and supervisor and also monitor of the health services in your community.

**Management consists of the following functions**.

### 1.4.1. Planning

Planning is forecasting and thinking about things that you want to happen in the future and then working out ways to get there. It will be your job to help develop the plans that determine the goals you pursue to improve the health of all the people in your community. As a first step you need to prepare plans for the future and this is best done together with community groups that share a common purpose.

### 1.4.2. Organizing

After a plan is developed it needs to be translated into action. As part of the implementation process, organizing the various administrative structures and community group members is crucial. Furthermore, you need to construct a set of formal relationships with different groups in the community (Figure 2.4). This process will help you in deciding how the plan will be carried out and who will do it.



Figure 3. All good managers will communicate their plans to the community (Photo:FMOH/WT)

### 1.4.3. Leading

Leading is directing, influencing and motivating a team. At the community level, the

health delivery system includes various community groups, such as model households, volunteers and development workers. As a Health Extension Practitioner you are a leader and you will play a leading role in working with these groups, to carry out the different activities involved in maintaining community health. You need also to create an environment that encourages your teams to do their best work so their performance inspires other members of the community.

### 1.4.4. Coordination

To coordinate activities is to ensure that everything that needs to be done is done and that no two people are trying to do the same job. Coordination willhelp you to see whether the things that you and your team are doing are consistent with your overall plan. You may arrange meetings with your teamas a coordination mechanism to discuss how jobs and responsibilities areprogressing

### 1.4.5 Monitoring and control

Monitoring and control will be an important part of your role as a Health

Extension Practitioner, otherwise you won't know how well you are doing as you try to achieve your goals and objectives. Monitoring is the regular observation and recording of activities. Controlling is ensuring that work has been accomplished according to plan. If your monitoring and control activities indicate that you aren't being very effective then you may have to change the way that you are working or ask for extra help from your supervisors.
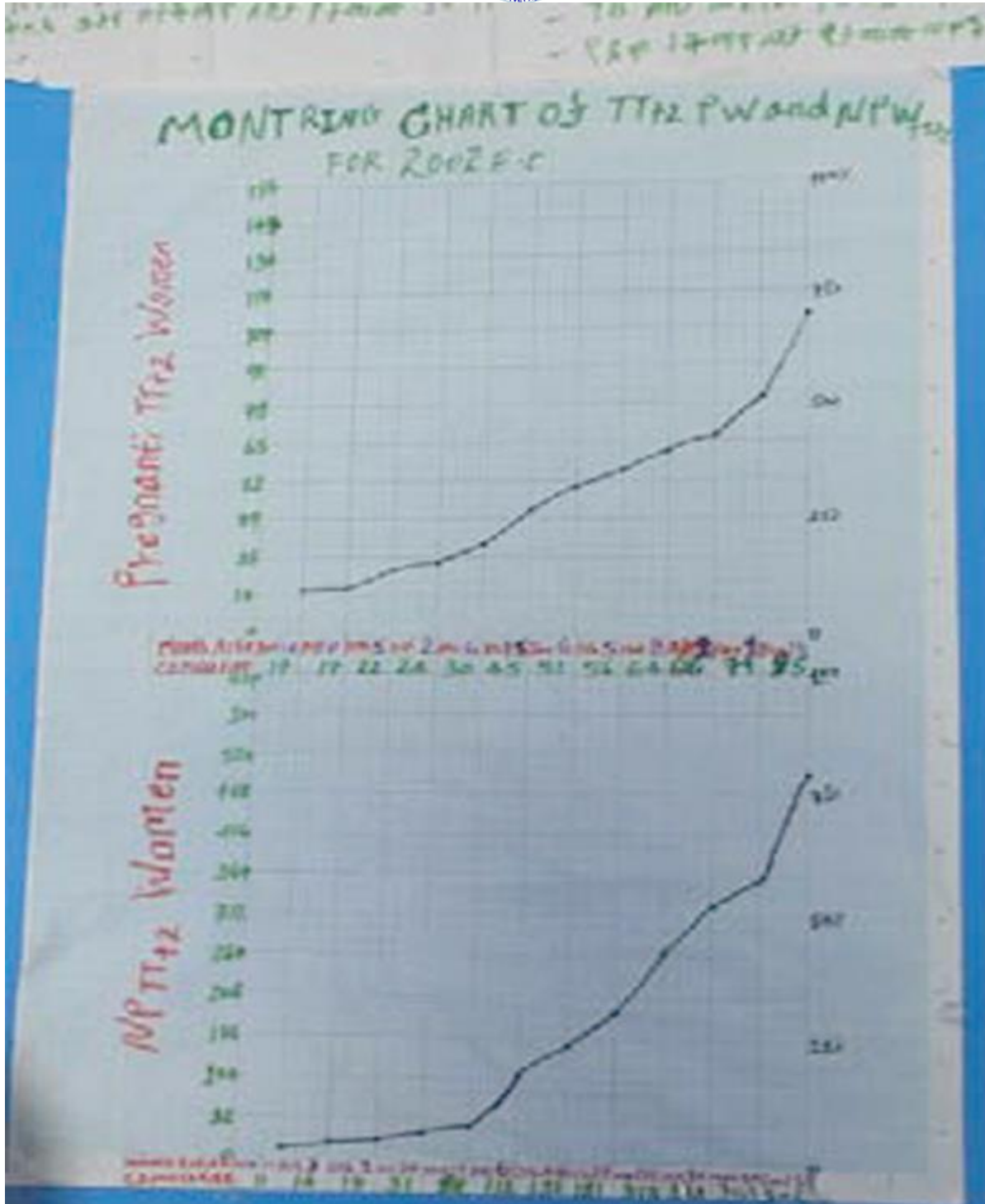
Figure 4 Monitoring health goals through the regular observation and recording of activities. (Photo: Ali Wyllie)

## 1.5. Management roles and levels

### 1.5.1. Level / hierarchy of Managers

❖ First-line /low level , Supervisory   mangers:

❖ Middle managers: Middle level/administrators

❖ Top/ senior managers : high level

➢ **First-line / low level ,Supervisory mangers:**

Responsible for the work of operating and do not supervise other managers

Direct non-management employees have authority and responsibilities are lowest

level of managers in the organizational hierarchy.

➢ **Middle managers:**

Managers in the midrange of the organizational hierarchy

They are responsible for other managers and sometimes for some operating employees

They report to more senior managers

➢ **Top managers / senior**

Mangers responsible  for the overall management of the organization.

They establish operating policies. Guide the organization's interaction with its environment.

## 1.6. Definition of Leadership

Leading is as one of management function. But we have to know also what leadership means. Leadership is concerned with influencing the thoughts, attitudes and behaviors 'of other people. So team leader ship is also the act of practicing leadership skill among the team we lead

| Self-check -1 | Written test |
|---|---|

**Directions**: Answer all the questions listed below. Use the Answer sheet provided in the next page:

1 Responsible for the work of operating and do not supervise other managers **(5pt)**

   a)        First-line /low level , Supervisory   mangers:

   b)        Middle managers: Middle level/administrators

   c)        Top/ senior managers : high level

2 Management is simply doing things through people

   a)        true          b) false

**3** ---------- is a regular observation and recording of activities

   a)        Leading

   b)        monitoring

   **c)**        evaluation

Note: Satisfactory rating – 5 points          Unsatisfactory - below 5 points

Score = _____

Rating: _____

Answer     sheet

Name: _____          Date: _____

**Short Answer Questions**

1._____

2._____

**3**_____

# 2.1. Introduction

**Planning**; is the process of defining community health problems, Identifying needs and resources, establishing priority goals, and setting out the administrative action needed to reach those goals. It is a means by you set the gaps that you identified in the study session six in the form of statement that will going to achieved and solve the community health problems. However, knowing what planning is will not be enough. It is also important to know why you need a health care plan. As a health extension worker of your kebele, your first goal is solving community health. To do so, in the first place, you need a clear understanding of your community problem one by one. In the second place because of different constraints in solving all the problems of that community, the identified problem requires to be prioritized. Thirdly planning is not only the issue of health extension workers, it requires integration of different stake holders of that kebele. The different stake holders include, community, administrative bodies of that kebele, different governmental bodies working in that kebele and other non-governmental bodies working in that kebele. So during planning process you have to discuss with all this bodies to make the plan feasible and achievable. This forum will develop the sense of ownership in every individual attending the session and increase their participation in implementation process. These are the three basic reasons why health care planning is important in your day to day activities to reach your final destination

## 2.2 .Planning process

A good plan should give clear vision/mission, goal and objective, a clear picture of the tasks to be accomplished, the resource needed to accomplish the tasks like human, material, money, time and information. Vision is a concrete picture of the future that you wish to create. For example, you may have a vision —To see healthy individuals in your kebele by the year 2020. Mission is a brief statement/written description of the purpose of you as a health extension worker of your kebele. For example you may

state your mission as To prevent disease and promote a health of your community through delivering different health services.

Goal is a purpose that you are striving to achieve in your kebele. The primary goal of you to be there in your kebele is to protect the health of your community from different health problems. Objectives are clearer statements of the specific activities required to achieve your goals.

2.2 Planning takes place at all levels. Every organization in respective of its size and purpose will need plan to achieve its organizational goal. Planning takes place continually and it is cyclic process. For example; you need to plan every year. But your plan of last year may different from your plan of this year in different way. Planning method can be applied to a large program at national/country level, for example; Malaria control programme. As well as to small level, for example in your kebele you may plan to construct a latrine for a 100 households

2.3. Planning must be collective undertaking; means planning should involve different stake holders in your kebele

### 2.2.3. Types of Planning

There are two types of planning. These are:

- **Strategic planning;** is the process of determining what an organization intends to be in the future and how it will go there. It is finding the best future for your organization and the best path to reach that destination. Always it is planned for long years like for example for five years. It covers wide issues to be achieved in your

- **Tactical/operational planning/activity** planning; is a short range planning that emphasize the current operations of various parts of your kebele. It is specific to mostly one year. For example you may state as — After one year TT immunization coverage of my kebele will reach 80%

### 2.2.4. Steps in planning process

To come up with your kebele concrete final plan you need to undergo six steps. **These steps will be illustrated as follows**:-

- ➢ Undertaking situational analysis of your kebele
- ➢ Analyzing and selecting priority problems of your kebele

➢ Setting objectives and targets for your plan

➢ Identifying potential challenges that will hinder your achievement of your objective

➢ Design the strategies that can help you to overcome those challenges

➢ Writing your plan of your kebele

**1st step: Undertaking situational analysis;**

Situational analysis is a process by which we analyze different issues of your past kebele context and to undertake a future plan. It will lay a favorable condition to set achievable objective of our kebele. It is done through review organizational structure, considering national health policy and programs, past performance, analyzing health condition(magnitude), studying the size, composition and distribution of the population and collecting information about resource. This can be done through undertaking SWOT analysis. SWOT analysis: is a strategic planning tool that matches internal organizational strength and weakness with external opportunities and threats a useful strategy for achieving objectives will become evident.

**- It is abbreviated as:**

S = strength of the organization

W= weakness of the organization

O = opportunities that an organization will have to achieve that objective

T= threats that an organization might face in the implementation process

**2nd step**: Analyzing and selecting priority problem of your kebele;

- This step is already discussed in your study session five. You already identified community major health problems through community diagnosis and you prioritized the health problems using criteria's like severity, magnitude, feasibility, community concern and government concern. So at this step you have identified a problem with high concern. What is problem? Problem: is a gap between what to be and what we currently have. For example in your kebele your current measles coverage might be 70% but the standard coverage by Ethiopian government needs to be to achieve at least 85% coverage. So the problem is the gap between 85% and 70% coverage, so we need to solve issues that hinder this achievement

**3rd step; Setting your objective/target**

- Objective is a desired end state (outcome) of a programme. If the programme is made to have an objective and target then it must be SMART. means it must be

**S=** Specific- should state specific/one objective

**M**= measurable –the end result of the problem should be quantifiable

**A** = achievable- the set objective must be achievable

**R** = realistic- the set objective must not be over ambitious

**T** = time bound – every objective set must have time boundary

For example you can set your objective as; —by the end of this year 70% of females in age of 15-49 in artumafursiworeda will get TT vaccine

**4th step**; Identifying potential challenges that will hinder your achievement of your objective

- What are the challenges we may face? Why objectives could not be achieved? What may be the limitations that can affect the performance of this objective?

- This is the step at which we systematically identify or give answer for the above questions so that we can tackle the problems as easily as possible.

- Resource problem like

- ⬦       ☐ Lack of fuel for refrigerators
- ⬦       ☐ Shortage of different equipments, drugs and resources at the health post
- ⬦       ☐ Lack of interest of voluntary health workers in the kebele
- ⬦       ☐ You may lack skill of different services
- ⬦       ☐ Climatic condition may favors the spread of some disease like malaria, diarrhea
- ⬦       ☐ Peoples culture and tradition might hinder the uptake of some programs like family planning

**5th step;** Design the strategies that can help you to overcome those challenges

- Based on the result of obstacle analysis we will design different strategies to alleviate the problems like

| Obstacles that are identified | Possible solution strategies |
|---|---|
| Cultural barriers | - Integrated health information dissemination on different service going to be delivered<br>- Involving religious leaders in health information dissemination |
| Shortage of logistics on the health post | - Requesting the logistics to woreda health office in timely manner<br>- Continuous follow up of your stock<br>- Taking from the nearby health posts |
| Lack of skill to deliver the service | - Taking training by communicating with woreda health offices<br>- Facilitation of outreach service |
| Irregular rain fall | - Early warning your community and yourself to take active response during the occurrence of the problem |
| Less support from voluntary community health workers in the kebele | - Supporting, motivating the voluntary health workers through different mechanisms like giving certificate, sending training in the right way, being familiar with your community |

Table 1. Obstacle analysis

**6th step;** Writing your plan of your kebele.

- The purpose of writing the plan is to use as guiding document, to request different funds, for monitoring and evaluating purpose and generally it is a means by which you will communicate with different organizations.

- The following table illustrates the eight guideline words/questions and steps that will we follow to write your plan

| Self-check -2 | Written test |
|---|---|

Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page

1          Planning takes place at all levels.**4p**t

   A) true          b )false

2          How many Steps are therein planning process?

A) 4          B) 5          C) 6

3          ---------- is the process of defining community health problems, Identifying needs and resources, establishing priority goals, and setting out the administrative action needed to reach those goals.

          A) Management          b)planning          c) leading

 4-----------is a short range planning that emphasize the current operations of various mostlyfor one year.

   A)  Tactical planning          B)Strategic planning          C)none

Note: Satisfactory rating – 4points          Unsatisfactory - below 4 points

Score = _____

Rating: _____

          Answer    sheet

Name: _____          Date: _____

**Short Answer Questions**

          1._____

          2._____

          **3**_____

          4_____

| Information sheet -3 | Management of supplies at health post |
|---|---|

3.1.　　　　　　　　Supplies at the health post

3.1.1 IPLS for HEWs /HP resupply system/

The Health Extension Workers (HEWs) have an important role in the health system of Ethiopia. You will serve millions of Ethiopian men, women and children every day. HEWs supply family planning products, antibiotics, pain relievers, immunizations, and other basic essential health care services. In order for you to complete your jobs successfully, the supply chain needs to work as it is said —No product, No program

In order for all health facilities: Hospitals, Health Centers, and Health Posts, get the right pharmaceuticals and medical equipment's in the right quantity, in the right condition (quality), in the right place, on the right time and at affordable price a supply chain system is designed. This supply chain system is called the Integrated Pharmaceutical Logistics System (IPLS).

As a health extension worker who needs to have pharmaceuticals and medical equipments in your health post to serve your clients, will have to do certain set of logistics tasks to have the six rights fulfilled.

**The set of logistics tasks you need to do are:**

➢　　　Store pharmaceuticals using appropriate storage procedures

➢　　　maintain Bincards for pharmaceuticals

➢　　　complete a physical count of pharmaceuticals every month

➢　　　complete the —Completed by Health Post section of the Health Post

**Monthly Report and resupply Form (HPMRR)**

➢　　　　　arrange for transport and pick up of pharmaceuticals

➢　　　　　dispense products to clients

➢　　　　　issue products to community health workers or volunteers

➤ visually inspect products when receiving issuing and dispensing to clients

These set of tasks are essential in order that we provide uninterrupted health service to our clients anytime they come. This, in turn, will help us to gain trust of the community in our health service.

Below figure shows Flow of Pharmaceuticals and Information in the Integrated Pharmaceutical Logistics System (IPLS)
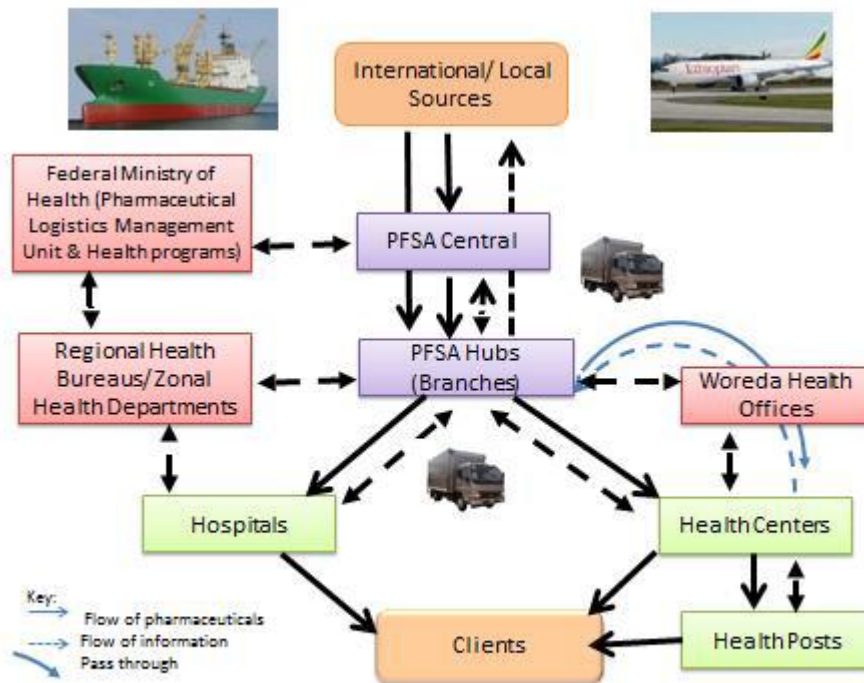


## 3.2. Management of equipment (supplies)

3.2.1 Storage of Pharmaceuticals

In this part, you will be able to describe what proper storage means and why it is important. Besides you will be able to identify good storage practices, arrange your storage area, know what —First to Expire, First Out (FEFO) is, and learn how to manage damaged and expired pharmaceuticals.

Proper storage of pharmaceuticals is crucial because it keeps the pharmaceuticals in good condition (one of the six rights) – without affecting their safety and efficacy. In addition, it makes locating and monitoring

pharmaceuticals easier; it also protects them from being stolen or mishandled.

✓ Proper Storage Guidelines:

| | Proper Storage Guidelines of Health Commodity | |
|---|---|---|
| 1. | Clean the storeroom regularly. | Pests are less attracted to the storeroom if it is regularly cleaned and disinfected. If possible a regular schedule for extermination will also help eliminate pests. Keep food and drink out of the storeroom. |
| 2. | Store pharmaceuticals and medical supplies in a dry, well-lit, well-ventilated storeroom – out of direct sunlight. | Extreme heat and exposure to direct sunlight can degrade drugs and other pharmaceuticals and dramatically shorten shelf life. Temperatures in the storeroom should not exceed 25°C. Direct sunlight raises the temperature of the product and can reduce its shelf life. Drugs should not be opened to repackage them. Store supplies in their original shipping cartons. |

| 3. | **Protect storeroom from water penetration.** | Water can destroy both supplies and their packaging. If the packaging is damaged, the product is still unacceptable to the patient even when the drug or pharmaceutical is not damaged. Repair the storeroom so that water cannot enter. Stack supplies off the floor on pallets at least 10 cm high and 30 cm away from walls as moisture can seep through walls and floors. ARV drugs and fluconazole are particularly sensitive to moisture. |
|---|---|---|
| 4. | **Keep fire safety equipment available, accessible, and functional, and train employees to use it.** | Stopping a fire before it spreads can save expensive supplies and the storage facility. The right equipment should be available; water is able to put out paper fires, but is ineffective on electrical and chemical fires. Place well-maintained fire extinguishers at suitable positions in the storeroom. If a fire extinguisher is not available, keep sand or soil in a bucket nearby. Regardless of the method used, train the staff in the use of the available fire safety equipment. |
| 5. | **Store latex products away from electric motors and fluorescent lights.** | Latex products (Condoms)can be damaged if they are directly exposed to fluorescent lights and electric motors. Electric motors and fluorescent lights create the chemical ozone which can rapidly deteriorate latex products. Keep latex products in paper boxes and cartons. |
| 6. | **Maintain cold storage,** | Cold storage (2 to 8 degrees Celsius; 36 to 46 degrees |

---------------------------------------------------------------Fahrenheit) is essential for maintaining the shelf life of certain pharmaceuticals that require it. These items are irrevocably damaged if the cold chain is broken. If electricity is unreliable, the use of cylindered gas or kerosene-powered or solar refrigeration is recommended. Many drugs require storage below 25oC. Some drugs require refrigeration, that is storage between 2- 8oC

| | | |
|---|---|---|
| 7. | Limit storage area access to authorized personnel and lock up controlled substances. | To prevent theft and pilferage, lock the storeroom and/or limit access to personnel other than authorized staff, and track the movement of drugs and other pharmaceuticals. Access must not, however, prevent appropriate distribution; a spare set of keys should be kept in the office of the facility or pharmacy In-Charge. Physical counts should be conducted on a regular basis to verify inventory records. |
| 8. | Stack cartons at least 10 cm off the floor, 30 cm away from the wall and other stacks, and no more than 2.5m high. | Pallets keep the products off of the floor so they are less susceptible to pests, water and dirt damage. Stack cartons on pallets 30 cm away from the walls and from each other to promote air circulation and to ease movement of stock, cleaning and inspection.<br><br>Do not stack cartons more than 2.5m high, as the weight of the products may crush the cartons at the bottom. This will also reduce potential injury to warehouse personnel. If cartons are particularly heavy, stack cartons less than 2.5m high.<br><br>At health facilities, where the use of pallets is inappropriate, shelving should be used. |
| 9. | Store medical supplies | Exposure to insecticides and other chemicals may |
| 10 | Store flammable products separately from other products. Take appropriate safety precautions | Some medical procedures use flammable products, such as alcohol, cylindered gas, or mineral spirits. Such products should be stored away from other products and |

| | | near a fire extinguisher |
|---|---|---|
| | | |

| 11. | Store pharmaceuticals to facilitate FEFO procedures and stock management. | FEFO (First Expired, First Out) is a method of arranging drugs in a storage facility where the drugs are managed by their expiry date. Drugs that will expire first are issued first, regardless of when they were received at the health facility. |
|---|---|---|
| 12. | Arrange cartons with arrows pointing up, and with identification labels, expiry dates, and manufacturing dates clearly visible. | Identification labels make it easier to follow FEFO, and make it easier to select the right product. Items should be stored according to manufacturer's instructions on the cartons; this includes paying attention to the direction of the arrows. |
| 13. | Separate unusable pharmaceuticals from usable commodities and dispose of damaged or expired products, Remove them from inventory immediately and dispose of them using established procedures. | Do not dispense expired drugs to the patients. Designate a separate part of the storeroom for damaged and expired goods. See Section F below for instructions on handling damaged or expired products and return of drugs. |

## 3.3. Ordering and controlling supplies/Arrangement of Pharmaceuticals and Medical Supplies

Pharmaceuticals should be arranged in an orderly manner so it becomes easy to locate and access them, count them and visually inspect them for any indicators of damage/expiry.

The common ways of arranging pharmaceuticals are either based on pharmacological (their use) as Antibiotics, anti pain---etc. or pharmaceutically (dosage forms) as injectables, syrups, tablets..etc. Often, health facilities use a combination of both to arrange their pharmaceuticals. You can also use either one of them or a combination of both to arrange the pharmaceuticals in your health post.

All medicines have expiry dates labeled on their containers. The containers could be cartoons, small packs inside a cartoon, bottles, or strips. Expiry date is a specific date beyond which the medicine can't be used. Often it is written as —"Exp" or —"exp date" on the containers

While storing, you need to consider **expiry date** of the pharmaceuticals so you can use products that have **short expiry dates** sooner than products with *long expiry dates*. The method that is used for this purpose is called "FEFO" – First to Expire, First out. Pharmaceuticals should be stored based on the proximity of their expiry dates; store pharmaceuticals with near expiry date at the fore front of the shelf and those with long expiry date at the back of the shelf. This makes managing pharmaceuticals easier; making the first to expire products easy to reach, pick and dispense.

## 3.4 Record Keeping in Health Posts

Bincards are used to account for products held in storage, including their receipt and issue. In the IPLS for HEW (HP resupply system), valuable information used to make resupply decisions is recorded on the Bincard; data from bincard are used in reporting and calculating resupply quantities.

It is essential that you recognize that you are the responsible personnel for the management of pharmaceuticals, and therefore you should keep up-to date and accurate bin cards for each product and individual units for products having more than one unit of issue.

You should keep a bin card for each product-together with the produce in the shelf- in your health post. Keeping bin card for each product helps you to:.

+ record all necessary information (date, received from/issued to, quantity received/issued/lost/adjusted, batch number, expiry date and

any other additional information) when products move in and out of the health post's storage cabinet/area

- record pharmaceuticals that are expired, damaged, stolen, loaned, or borrowed also known as losses and adjustments.
- record the quantity of products received, issued, lost, adjusted (essential data to make logistics decisions – how much to resupply)

This is important because our logistics decisions are solely dependent on the information we get from bincards. Besides, it plays an important role to monitor stock levels and resupply quantities as it contains all the necessary information. Therefore, you have to keep up-to-date and accurate bincards for each and every pharmaceutical in your health post.

| Self –check -3 | Written test/choose |
|---|---|

Directions:  Answer all the questions listed below. Use the Answer sheet provided in the next page

**1-The set of logistics tasks you need to do are:5pt**

       a.       store pharmaceuticals using appropriate storage procedures

       b.       maintain Bincards for pharmaceuticals

       c.       complete a physical count of pharmaceuticals every month

       d.       all

2 Arrangement of Pharmaceuticals and Medical Supplies helps

       a)       Easy to locate and access them

       b)       easy to count them

       c)       Visually to inspect them for any indicators of damage/expiry

       d)       All

3 Bincards are used to account for products held in storage, including their receipt and issue

      a)       true      b) false

Note: Satisfactory rating – 5points        Unsatisfactory - below 5 points

Score= _____

Rating: _____

Answer     sheet

Name: _____        Date: _____

**Short Answer Questions**

       1._____

       2._____

       **3**_____

| | |
|---|---|
| **Information sheet -4** | **Monitoring and evaluation** |

**4.1.** Implementation, Monitoring in health care management

Implementation is putting a program or plan in to action or doing the work. What is to be implemented will be depends on the plan. Once a program has been planned and marketed, it must be implemented. Implementation —consists of initiating the activity, providing assistance to it and to its participant, problem-solving issues that may arise, and reporting on progress.

To accomplish all of this, one has to select the most appropriate implementation strategy and see that any special concerns associated with implementation are handled properly. Factors that facilitate implementation

**4.1.1. The implementer need to**

- ✓ Know and review the plan drafted
- ✓ Understand the objectives
- ✓ Arrange time table
- ✓ Assign responsible body
- ✓ Discuss with community stake holders

**4.1.2.** Allocating the necessary resource- Health extension workers should use community resource to maintain health of that community

- ✓ Manpower – community members like volunteers
- ✓ Money – collecting from the community
- ✓ Materials – collected from the community
- ✓ Information- document all the necessary information about the progress of the implementation
- ✓ Time – use time effectively

4.1.3. Create good relation with the stake holders in your community like kebele administrative, VCHWs, community members, community based associations

4.1.4 Coordination of the work with kebele administrative and CVHWs

- This will facilitate implementation process and will help to complete the program on time.

Some of the areas to be considered in coordination are;

➢ Build and train your kebele team- based on session two of this module
➢ Give defined responsibility for every team members with time of report
➢ Leader of the team should be assigned and be known by all
➢ Develop check list that will guide coordination .

## 4.1.5. Communication

- There must be continues and regular meeting with the team members
- Create link with the necessary stake holders including the community
- There must be regular meeting with the community on different health issues

4.2. **Monitoring**: is the six component of implementation process. Monitoring is a continues, systematic and critical review of a project/program/activity with the aim of checking progress. Corrective action has to be taken if any gap is detected during monitoring process. Over all team leader of your kebele i.e. one of the health extension workers will be selected by the woreda health office and kebele administrative as a leader of health program in that kebele. So this health extension worker will be taking the responsibility of monitoring the health programs of that kebele

**What need to be monitored**? Try to use the following points as a check list of your monitoring process;

- If activities are implemented as planned or not
- If the time is properly utilized
- If the necessary manpower is deployed in every gote
- If voluntary community health workers are doing their work properly
- If the necessary resource utilized properly
- If there is a need of modifying/changing

Your activity plan and schedule will help you to monitor the progress of the implementation process. Periodic supervision has to be made to have updated information on the progress of the implementation process. There are different performance indicators at health post level like;

## 4.2.1. Health post performance monitoring indicators

You can monitor your performance at your health post by comparing your target set with your current performance. Target is the desired level of performance of specific activity. Performance is measured based on set indicators. You have put wall charts that show your annual target divided by quarterly and monthly.

**Antenatal care coverage**

- [number of 1st antenatal care visits x 100] ÷ [total number of expected pregnancies]

- Total number of expected pregnancies is calculated as 3.7% of the total population

 **Deliveries attended by HEW**

- [number of deliveries attended by HEW x 100] ÷ [total number of expected deliveries]

- Total number of expected deliveries is calculated as 3.6% of the total population

 **Child immunization coverage**, e.g. pentavalent 3rd dose coverage, full

- [number of children received 3d dose of pentavalent vaccine before 1st birthday x 100] ÷ [total number of surviving infants]

- Total number of surviving infants is calculated as 3.1% of total population

## 4.2.2 Steps in active managerial control

- Identifying risk
- Regular monitoringof critical activities

## 4.3 Factor affecting implementation process

Poor implementation means delayed or non-implemented or different from that planned. The factors for such causes could be unavoidable or failure at earlier parts of the planning cycle or failure at the programming and implementation stages. The factors could be internal, such as poor performance of voluntary community health workers on the kebele, lack of coordination from kebele administrative or external such as natural calamities, shortage of resource

## 4.4. Recording and reporting

Recording and reporting is an essential component of managing health program implementation. It is a means of giving accreditation for our effort. Activity that is implemented but failed to registered and reported is like vomited diet. So we need to continuously register and report for woreda heath office in timely manner. The time schedule of reporting is different from service to service. There are services that will be reported immediately like epidemic condition, there are activities that will be reported in weekly manner, for example malaria and also there are activities which need to be reported in monthly manner. This is depends on the current community health information management system.

## 4.4.1. Health management information system

System is a collection of components that work together to achieve a common objective. (Developing HMIS, WHO) In general, the primary purpose of the health system is to promote, restore or maintain health (from WHO definition). Health service development program (HSDP) in Ethiopia strives to reduce morbidity, mortality and disability, and improve the health status of the Ethiopian people through providing comprehensive package of preventive, promotive, rehabilitative and basic curative health services via a decentralized and democratized health system in collaboration with all stakeholders.

**In the public sector, health system management includes the function of**:

1. Client management/individual care (delivery of promotional, preventive, and curative health services to the population; working with the community

2. Health Unite/Facility management (managing service coverage/utilization, resource

3. Health system management (policy, planning, coordinating and managing, support to health unites.

Health Information System (HIS) is ―a system that provides specific information support to the decision-making process at each level of an organization.‖(Hurtubise,1984).

**HMIS** is to routinely generate quality health information and use that information for management decisions to improve the performance of health services delivery. Quality HMIS information means that the information generated by HMIS is;

Relevant Timely Complete- both in geographical coverage and in terms of

range/amount of data it is supposed to provide Valid- provides the information that it is supposed to provide Reliable- the information is consistent

Health management information system in Ethiopia is supposed to improve efficiency (time and money) and Effectiveness (meets performance expectation) of health service delivery.

**Principles of health management information system/reform includes**

Standardized – has a standardized definition through health sector and have standard recording and reporting instrument and procedure Integrated- Consists single source for each data item and have one report and one reporting channel Simplicity – It reduces number of data item, limited to those required by indicator selected and have user friendly forms and procedures throughout the system It is supported by Information communication technology/computer

## 4.5. Evaluation

Evaluation is the methodical process of determining the worth of a system, project, course of action, campaign, etc. It involves the comparison of the actual performance of the system with the target you set to achieve. Evaluation can also defined as a systemic way of learning from experience and using the lessons learned to improve current activities and promote better planning by careful selection of alternatives for future action or as asking, —Did we achieve what we set out to do?‖ and comparing the present situation with the past in order to find out to what extent organizing purposes have been achieved.

Meaningful evaluation requires clear thinking, profound learning, modify/make new plans, takes corrective actions and provide feedback on time. It is carried out mainly as a way of looking at program activities, human resources, material resources, information, and facts and figures; in order to monitor progress and effectiveness, consider costs and efficiency, show where changes were needed, and help to plan more effectively for the future. Hence, evaluation is a continuous process.

**Evaluation of service performance can** do;

❖　　　　　　　To show the main achievements/findings

❖　　　　　　　To show where and how changes can be made

❖          To show how strength can be built upon

❖          To provide information

❖          To increase skills for planning and

❖          To increase skills in decision making

**The result of your evaluation are expected to show**

- What a program has been trying to do?

- What actually happened?

- Where the differences/gaps between the plan and the Actions has happened

- The reasons for the difference/gaps, and

- What needs to be done?

**Evaluation involves finding the answers to the following questions**:

✓          Are workers performing well as planned?

✓          Is equipment functioning as effectively as expected?

✓          Are resources being utilized fully?

✓          Are records being maintained correctly?

✓          Are the collective actions of the workers producing expected results?

### 4.5.1. Steps of undertaking Evaluation

As we already define evaluation, it is a basic managerial function involving setting standard, evaluating against standard and taking corrective action.

1. Establishing standard/ target of performance - example; you may might want to increase the number of pregnant women attending antenatal care by 20% in your kebele by this year

2. Measuring performance – You will continuously record your daily implementation using record book and finally compile and put your monthly and annual performance. Then you have to compare with the standard you have set. Based on the above example you may achieve 30% of pregnant women attending antenatal care.

### 4.6. Constructive and effective feedback

Feedback is defined by Wood (2007) as 'the way in which learners become aware of the gap between their current level of knowledge or skill and the desired goal.

Afeed back mechanism is a loop system where the system is responds to a

perturbation. The response may be in the same directions in the positive feedback or in the opposite direction as in negative feedback.

There are two type of feedback: Positive and negative feedback

**What is effective and constructive feedback**?

IT is effective when the recipient is able to receive information's and adjust his/her behavior accordingly. Feedback is not criticism or judjment. Feedback is critical for positive learning environment.

Effective feedback enables the student to gain insight into the gap between their performance and the desired standard.

Without being given feedback the student may not be aware that this gap exists between their performance and the desired level.

Being given feedback on the gap between the student's skills and the desired level can help the student to recognize their strengths and weaknesses and to facilitate the improvement of their performance.

☐ The aim of giving feedback is to help the student narrow the gap between their actual performance and the desired performance by illuminating their strengths and areas for development.

Reasons for giving feedback

Wood (2007) described the main purpose of giving feedback as to promote improvement of the student's performance.

Some of the reasons you may have considered include:

I. Giving feedback to the student about their strengths is likely to increase the student's confidence, motivation and enthusiasm for learning and will help them to continue to learn and to further develop their strengths.

II. Students need to be given feedback about their weaknesses and areas for development. The student may not know that they are not achieving the required level and without this feedback will not be able to take the actions necessary to improve. Being given feedback will enable the student to focus on these areas and to take actions to progress their skills so that they are performing at the required level.

III. Giving a student regular feedback will help them to develop their skills of self-assessment so that they can recognize their own strengths and weaknesses and areas

for development.

IV. Some students have difficulties reaching the required level. Giving regular feedback and developing action plans to develop the student's skills and knowledge ensures the student is appropriately supported and that a fair process of assessment is carried out.

V. Student nurses have identified that they find feedback useful. Glover (2000) carried out a small research project investigating nursing students' perceptions and use of feedback in the clinical area. The nursing students within this study identified that being given feedback increased their confidence and self-esteem, increased their skills and knowledge, enhanced their learning and enabled them to identify where they needed more practice. However students do not always find it easy to obtain feedback. Gray and Smith (2000) and Cahill (1996) carried out studies exploring student nurses' experiences of mentorship. Both these studies found that students had difficulty in gaining constructive feedback from mentors.

**Key principles for giving feedback**

1. Ensuring that the student is at the center of the feedback process

2. The feedback illuminates both the strengths and areas for development of the student

3. The feedback is given regularly and timely

4. Non- judgmental language is used – referencing to the behavior and not to the person

5. Specific, easily understood language is used together with examples

6. Feedback is given as a dialogue between the mentor and the student

7. The feedback is given at the correct level and is both supportive and challenging.

8. The feedback is constructive and solution focused so the student understands what they need to do to improve their performance.

| Self-check=4 | Written test |
|---|---|

**Directions:** Answer all the questions listed below. Use the Answer sheet provided in the next page

1. ------------ is putting a program or plan in to action or doing the work**5pt**

      A. Implementation,    B ) Monitoring    B ) Management

2. Monitoring is a continues, systematic and critical review of a project/program/activity with the aim of checking progress

  A .True            A .False

3    Factor affecting implementation process

    A.                Failure at earlier parts of the planning cycle

    B.                Failure at the programming

    C.                Failure Implementation stages.

4    Recording and reporting is an essential component of managing health program implementation.

  A .True           b. False

5The methodical process of determining the worth of a system, project and course of action, is

    A.             Evacuation      B ) Monitoring                C )

        Management

6. Feedback is given as a dialogue between the mentor and the student

A )True           B) False

7.The aim of giving feedback is to help the student narrow the gap between their actual performance and the desired performance

A )True           B) False

| | |
|---|---|
| *Operation sheet-1* | **Steps in planning process** |

The six steps of planning

Step-1 Undertaking situational analysis

Step-2 Analyzing and selecting priority problems

Step-3 Setting objectives and targets for your plan

Step-4 Identifying potential challenges that will hinder your achievement of your objective

Step-5 Design the strategies that can help you to overcome those challenges

Step-6 writing your plan

| | |
|---|---|
| Operation sheet 2 | **Reporting by health posts** |

**Steps of reporting**

1. Write the name. of the Health Post for which the report is being completed

2. Write the name of the Health Centre from which you will receive your products.

3. Write the starting month, day and year and the ending month, day and year that covers the reporting period.

4. The Maximum Stock Level for the Health Post

5. The serial number of the product on the form

6. The name and description of each pharmaceutical.

7. The unit for each pharmaceutical.

8. Write in the quantity of stock you had available at the beginning of this reporting period

9. Write the quantity of the item received during this reporting period

10. Write the total quantity of the item lost or adjusted during this reporting period.

11. Write the quantity of the product on hand at the end.

12. Write any remarks related to the product or any explanation related to losses and adjustments that you have

13. Write your name, sign the report and write the date on which the report was completed

| *LAP Test* | **practical demonstration** |
|---|---|

.Name: _____          Date:_____

Started Time:_____          Finished Time:_____

**Instructions:**

**You expected to perform the following activity within given time per activity**

    Task1: Completing the Report and Requisition Form

    Purpose: To report on pharmaceuticals used and stocks available

    To order pharmaceuticals

**Materials needed:** Blank ***Report and Requisition Form,*** the ***Report and Requisition Form***

from the previous reporting period***, Stock Record Cards/Bin Cards*** for all pharmaceuticals**,**

pen,                                        and                                        calculator

## LO.3. Lead and develop individuals and teams

## Instruction sheet -1

This learning guide is developed to provide you the necessary information regarding the following content coverage and topics

- •Identifying Basic principles of leadership
- •identifying and implementing in line with organizational requirements
- •Building a team

This guide will also assist you to attain the learning outcome stated in the cover page. Specifically, upon completion of this Learning Guide, you will be able to –

- ➢ Know how lead a team
- ➢ Motivating a team
- ➢ Training a team
- ➢ Conducting meetings
- ➢  How  to resolve Conflict

## 1.1 .Basic principles of leadership

The following leadership principles are commonly seen as vital to success.

1.1.1 **Lead by example**: The most successful companies and organization have leaders who help their staff understand their vision and show them how everybody can work together to achieve that goal in their role.

**1.1.2 Leadership is about people**

Communicating and engaging with your team is essential to leadership.

Interpersonal communication skills are essential to any leader. As a leader you have the best possible relationship with each member of your team. This means not only relating to those people in to high level management but also the people who work in the lowest level.

1.1.3 **Focus on change**: Transformation should be at the foundation of every leadership plan.

People should understand what your goal and objective. When you encourage other to change and grow, you will do the same as leader. Change for the better should you focus

1.1.4 **Be human and admit mistakes**: everyone make mistake, but it can be beneficial for the other people to see leader knowledge their mistake as it can help them more relatable.

1.1.5 **Understand the value of listening**: Learn to listen than you talk, whenyou listen you could be finding out value, new information that may help you lead effectively. Leaders are great listeners, which do not mean they must agree with everything they hear, but they must try to make sense of it and understand.

There are two levels of human understanding: intellectual and emotional.

When you understand what some is saying, this is intellectual level.

The emotional level of understanding means that you know how they are feeling .A good leader should understand both.

### 1.1.6. Develop leadership skill.

To be great leader you should recognize the skill you need and work to develop them. Identify your strength and weakness and what your leader ship strategy will be.

**1.1.7. Promote diversity**. A leader should welcome diversity and harness the strength that it can confer and accompany what when everyone has the same knowledge and experience.

A diverse work force encourages innovation and new ideas.

**1.1.8. Work together to achieve more:** collaboration is the act of working with the others to share information, strategies' and success. Collaboration and cooperation can happen b/n organization without affecting healthy competition**.**

**1.1.9. Have solid value:** An effective leader must have a clear vision and solid value so they can inspire their followers and motivate them. Employees appreciate working with in a great team having flexible working hours, job security and comfortable working environment**.**

**1.1.10 Use technology and innovation: ,**Technology can help in the operation of business, increase productivity help move to new markets and facilitate in achievingthe company vision. Communicationacross the world is clear using the new technologywhich helps with collaboration.

| Self –check-1 | Written test/true false |
|---|---|

Directions:  Answer all the questions listed below. Use the Answer sheet provided in the next page:

1. Leaders are a great listener, which does not mean they must agree with everything they hear (**.5pt**)

2. Everyone make mistake, but it can be beneficial for the other people to see leader knowledge their mistake as it can help them more relatable.

3. Interpersonal communication skills are essential to any leader.

4. To be great leader you should recognize the skill you need and work to develop them but no need to identify your strength and weakness.

5. Technology can help in the operation of business, increase productivity help move to new markets and facilitate in achieving the company vision

**Note: Satisfactory rating – 5 points          Unsatisfactory - below 5 points**

```
Score = _____

Rating: _____
```

Answer     sheet

Name: _____          Date: _____

**Short Answer Questions**

1._____

2._____

3_____

4_____

5_____

| Information sheet -2 | **Building a team** |
|---|---|

## 2.1 .How can you build a team

Before discussing about team leadership we have to know what team is, who can be members of our team and how you can build a team. Health extension worker will work with a variety of community groups and your job will often require you to create health team from your community in order to achieve community health goals. Team is two or more people who work together to achieve a common goal. A heath team is a group of people who share common objectives determined by community need. Each member of the team contributes to the achievement of the common goal. So to be effective in performing your plan you need to build and use your own team.

You will have a team, which comprises health promoters, model households, community leaders respected community members, representatives of varies community associations. You have to form and build a team for that can support your daily activities.

**Team building will follow four stages**.

**2.1.1Team building**; it is a process of selecting and creating a team within a community.

**The first stage is forming**; is identification and organizing of different team members who can help our service delivery together and making them know each other. In this stage team members will discuss and establish rules and regulations that every group member must keep and respect.

**The second stage is storming**; in this stage team members are encouraged to participate and engaged with the issues and decisions that are key to the success of the community health team in achieving its goal.

**The third step is norming**; is a stage at which group members come together and plan together for common purpose. Members will be clear on their roles and

responsibilities as being a group member. The team has a sense of identity and tries to work together. **The final stage in team building is performing;** in this stage all group members will understand norms, behaviors and how to solve their misunderstanding and they will focus on accomplishing their purpose.

## 2.2. Community health development army

Development army is a special type of team building and function in which one model health ambassador will network with her/him other five neighbor and lead them for making them like her/him. The purpose is to train and nurture the other team members to be a health model ambassador. This diffusion will continue to make all of the other five network members to be amodel of their health. Every community based health services will be implemented by using this strategy. This will have many benefits like The time needed for changing every house hold members will be minimized The new behavior will be more sustained as compared to working through health extension worker It will minimize the effort of the health extension worker

Monitoring and evaluation process is continuously leaded by the model leader of the team in programmed manner. Every team leader of the 1 to 5 network creates other team cold development team. It contains a member of 20-30 model health ambassador of every 1 to 5 team. The development team will monitor and evaluate the implementation process of the teams under it. Continuous evaluation and feedback will be given by development to every 1 to 5 network in periodic manner.
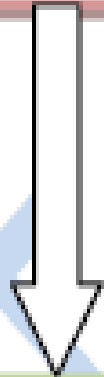
| Self- check-2 | Written test/choose |
|---|---|

Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page

1. at what stage team members will discuss and establish rules and regulations that every group member must keep and respect.**4PT**

A) 4$^{th}$ stage      B) 3rd stage      C) 2nd stage    D) 1st stage

2. Community health development army contain

   a)          30-40 members and 1-4 networked

   b)          20-30 members and 1-6 networked

   c)          20-30 members and 1-5 networked

3. -----------; it is a process of selecting and creating a team within a community.

A) Team building                B)team sprit                C)team lead

**Note: Satisfactory rating – 3points          Unsatisfactory -3 below 4points**

Score = _____

Rating: _____

Answer    sheet

Name: _____          Date: _____

**Short Answer Questions**

        1._____

        2._____

        **3**_____

| **Information sheet -3** | Leading a team |
|---|---|

### 3.1. team leadership

Leadership is setting a new direction or vision for a group that they follow, i.e.: a leader is the spearhead for that new direction.

We have discussed the issue of leading as one of management function. But we have to know also what leadership means. Leadership is concerned with influencing the thoughts, attitudes and behaviors 'of other people. So team leader ship is also the act of practicing leadership skill among the team we lead. As a health extension worker in that kebele you need to play your leadership responsibility through, setting directions for the community, helping the community see what lies ahead, helping them visualize what they will achieve, encouraging them and inspire all the community members. So again leadership is the ability to get other people to do something significant that they might not otherwise do.

As a health extension worker in your kebele you will have three leadership functions. The first one is Strategic function; it is an act of developing a sense of direction in the group or community toward the set objective. You have to provide what need to be done and a clear path on how to accomplish the work for your team member on your kebele.

The second leadership function is tactical function; this involves identifying and choosing the most appropriate meansto convince the team towards achievement of the set objective.

The third is interpersonal function; which involves maintaining the moral, unity and commitment of the team or community.

### 3.1.2    Leader vs Manager

    **Leaders:** Do the right thing

  **Manager:** Do things right

   **Leadership & Management Skills**

   **Leadership** – soft skills

- ➢ Communications
- ➢ Motivation
- ➢ Stress Management
- ➢ Team Building
- ➢ Change Management

**Management** – hard skills

- ✚ Scheduling
- ✚ Staffing
- ✚ Activity Analysis
- ✚ Project Controls

### 3.1.2. Team

A group of people committed to a common purpose, set of performance goals, and approach for which the team members hold themselves mutually accountable.

Comparing Work Teams and Work Groups

Diversity

- ☐ Heterogeneous teams more effective
- ☐ Is a source of creativity
- ☐ Contributes to healthy conflict
- ☐ May prevent groupthink

### 3.1.3. **Support team**

- ✓ preventing the use of inappropriate language or behaviors.
- ✓ Having regular team meetings that encourage active communication.
- ✓ celebrating achievements and strengthening interpersonal relationships.
- ✓ Encouraging work balance
- ✓ Occupational health and safety training, educational programs and other training

### 3.1.4. Team leader/leading work team
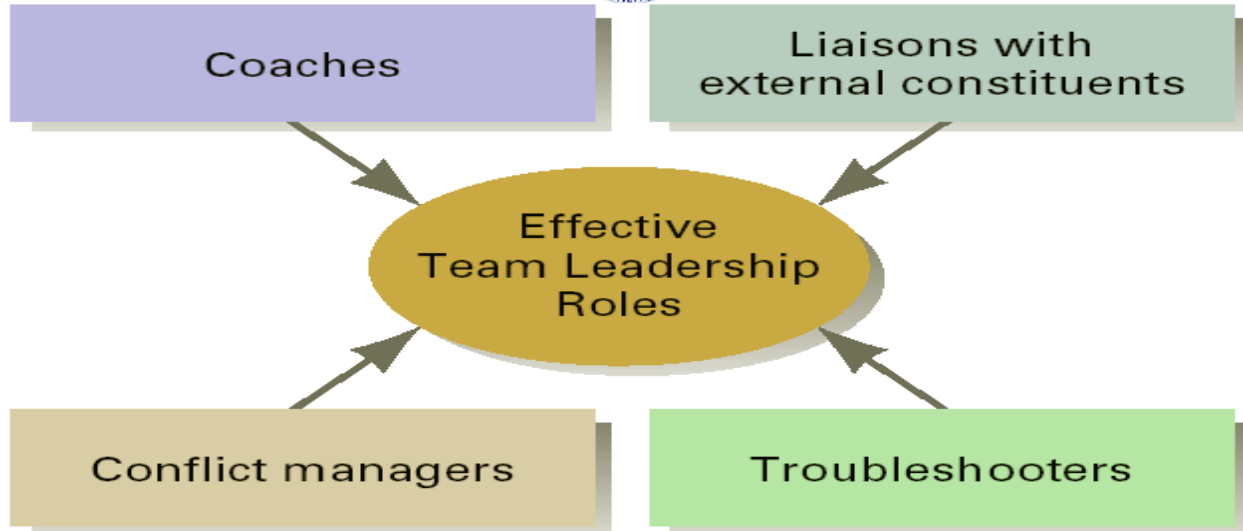
**The 3 important roles of a Team Leader**

✓ Initiator

Beginning actions and processes that promote team development and performance

✓ Model

Shaping behaviors and performance that reflects the expectations set for the team

✓ Coach

**What makes an effective team?**

Becoming an effective team leader requires:

- Learning to share information
- Developing the ability to trust others
- Learning to give up authority
- Knowing when to leave their teams alone and when to intercede
- Managing the team's external boundary
- Facilitating the team process
- Leading Productive Teams

**Team Leader Skills**

✓ Coaching, not bossing

✓ Help define, analyze, and solve problems

✓ Encourage participation by others

✓ Serve as a facilitator

**Team Leader Values**

- ➤ Respecting fellow team members
- ➤ Trusting fellow team members
- ➤ Putting the team first

| Self-check-3 | Written test/choice |
|---|---|

Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page

1. --------- is also the act of practicing leadership skill among the team we lead.

A) Leadership          B) team      C) Team leadership

2. Do the right thing IS:

 A) Management          B)Leadership          C) team

3. A group of people committed to a common purpose, set of performance goals, and approach for which the team members hold themselves mutually accountable is:

A) Management          B) team          C)Leadership

4. One of the following **is not** among the 3 important roles of a Team Leader

   A)              Initiator      B) Model              C) Coach              D) Management

5Becoming an effective team leader require:

   A.          Learning to share information
   B.          Developing the ability to trust others
   C.          Learning to give up authority
   D.          All

**Note: Satisfactory rating – 5 points          Unsatisfactory - 5below 4points**

Score = _____

Rating: _____

          Answer     sheet

Name: _____          Date: _____

**Short Answer Questions**

          1._____

          2._____

          3_____

          4_____

          5 _____

| Information sheet -4 | Motivating a team |
|---|---|

## 4.1. Definition of team motivation

Motivation is the process that initiates guidelines and maintain goal oriented behavior.

Team motivation can be described as the process that a project manager goes through to persuade employees to give their best efforts to a professional task and positive reinforcement until the task is completed.

## 4.2. Rationale for a Team Approach

Teams are a part of everyone's life. You're a member of a family team, a staff team, school, health care and community teams.

So it's appropriate that you understand how to function effectively as a team member.

The multi-dimensional and thus multi-discipline nature of many problems requires a team approach.

This approach encourages you as staff with complementary skills and competencies, to coordinate your efforts.

By establishing priorities, concentrating financial resources, and combining knowledge and expertise, you can have greater impact on serious problems through your program efforts.

**Such efforts can serve to**:

1) Lighten your work load,

2) Reduce duplication of efforts, and

3) Produce a result greater than all of your separate efforts.

4. The importance of team work

    a)       Spilt difficult task in to simpler ones

    b)       Developed specialized skill

    c)       Can lead to better productivity and reduce cost with great profitability.

d) Team work can create healthy competition

### 4.4. **How you can motivate your team member**

➢ Take time to meet with and listen to team members.

➢ Provide teams with specific and frequent feedback about their performance, and support them in improving their performance.

➢ Recognize, reward and promote high performance; deal quickly with poor performance so that they can improve and learn from mistakes.

➢ Provide information on how the organization has achieved or failed to achieve the community health goals.

➢ Involve teams in decisions, especially those decisions that affect them.

➢ Give members of the team the opportunity to grow and develop new skills.

➢ Provide team members with a sense of ownership in their work and their working environment.

➢ Strive to create a work environment that is open, trusting and fun.

Encourage new ideas, suggestions and initiatives. Celebrate individuals 'successes and take time for morale building team meetings and activities. Personally thank team members for doing a good job

| Self-check -4 | Written test |
|---|---|

**Directions:  Answer all the questions listed below. Use the Answer sheet provided in the next page**

1. Motivation is the process that initiates guidelines and maintain goal oriented behavior.(3pt)

2. Which of the following not importance of team work

a)   Spilt difficult task in to simpler ones

b)   Developed specialized skill

c) Lead to less productivity and increase cost with minimal profitability.

d) Team work can create healthy competition

3. Team motivation can provide team members with a sense of ownership in their work and their working environment.

    A) True                                B) False


**Note: Satisfactory rating –  points          Unsatisfactory - below 4points**

Score = _____

Rating: _____

Answer    sheet

Name: _____                    Date: _____

**Short Answer Questions**

1._____

2._____

**3**_____

## 5.1. Team Training Program

Team training can be defined as training in which teams are used to increase individual procedural knowledge and proficiency in doing a job (task work), individual procedural knowledge and proficiency in functioning as part of a team (teamwork), and overall team performance

5.2 .secrets for powerful team training and miraculous employee development:

1.      Be a Good Mentor
2.      Emphasize the Basics
3.      Provide Hands-on Training
4.      Let the Student Become the Teacher
5.      Present the Problem and Ask for Solutions
6.      Encourage, Support, and Reward Growth

## 5.3.          6 Steps to Build a Strong Team

1. Focus on roles. A thorough selection process for picking your team members has greater long-term benefits, even if this means you spend more time recruiting than you'd like to.

2. Value each role.

3. Communicate

4. Set goals

5. Celebrate successes and failures

6. Know each other

## 5.4 Importance of team training

Teamwork training essentially helps groups of people in how they work together in order to deliver an objective. Most of the time in our working lives, we focus on what we are doing, with team interactions, we look at how we do it and how we can

cohesively help each other and improve productivity and performance

**Does team training improve team performance?**

Team training interventions are a viable approach organizations can take in order to enhance team outcomes.

They are useful for improving cognitive outcomes, affective outcomes, teamwork processes, and performance outcomes team training interventions are a viable approach organizations can take in order to enhance team outcomes.

## 5.5. Improving Team Performance With Training

The amount of team-based work has increased in most offices, but with the pace of today's economy, teams often don't have adequate time to experiment, regroup, and improve their operations.

According to research by Training magazine, only 50% of millennial workers report that their teams perform at an optimal level at least half the time.

Professionals are observing that there are gaps between expected and actual team performance. And they're starting to unpack why that is and how to address it. Team-based projects aren't going anywhere, so it's up training professionals to explore ways to close these gaps in performance.

The good news is that there's a strong correlation between a team's performance and the amount of training they've received.

Training magazine's survey found that highest-performing teams were those that received the greatest overall levels of training for both team members and team leaders.

| Self check-5 | **written test** |
|---|---|

**Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page**

1.----------- Defined as training in which teams are used to increase individual procedural knowledge and proficiency in doing a job.(5pt)

    a)        Team Performance

    b)        Team Training Program

    c)        Team sprit

Directions:  Answer all the questions listed below. Use the Answer sheet provided in the next page

2. One of the following is not secrets for powerful team training and miraculous employee development

a).Be a Good Mentor.

b) .Provide Hands-on Training.

c).Present the Problem and Ask for Solutions.

d).Discourage, the trainee

3. Team training interventions are a viable approach organizations can take in order to enhance team outcomes.

    A)        True                          B) False

**Note: Satisfactory rating – 3points          Unsatisfactory -3 below points**

Score= _____

Rating: _____

Answer     sheet

| Information sheet -6 | Getting Organization |
|---|---|

**6.1 Definition of Get organized:** to arrange one thing, affairs so they can be dealt with
Effectively

**6.2 Organization**

A pattern of relationship through which people pursue to achieve common goals, Are groups of people, with ideas and resources, working toward common goals.

Organization is a social unit of people that is structured and managed to meet a need or to pursue collective goals. All organizations have a management structure that determines relationships between the different activities and the members, and subdivides and assigns roles, responsibilities, and authority to carry out different tasks. Organizations are open systems--they affect and are affected by their environment. Organizational requirements are those which come out of a system being placed in a social context. Organizational requirements will have their source not only in organizational structures and the activities of individuals and groups but also in power structures, obligations and responsibilities, control and autonomy, values and ethics.

Effectively; to have an element of personal control so that they can make decisions and make choices, and to have a well designed job that provides the right mix of interest, variety and challenge. The manager and his (her) staff are asked to complete the questionnaire and to analyze the results and to collate comments on the use of skills etc.; what people like doing most; what people like least; aspects of work that staff are most satisfied with and those they are least satisfied with. Organizations should clearly communicate organizational goals to engage employees in their work and achieve the organization's desired ends. Having a clear idea of organizational requirements helps employees determine their course of action to help the health to achieve their goals. Employees should also be equipped with the proper tools and resources needed as they do their work to help meet the overall organizational goals. Setting goals can also help companies evaluate employee performance -- for example,

creating individual employee goals that support overall organizational goals and measuring individual performance against those individual goals. While an organization can communicate its organizational goals through normal channels, the most effective and direct way to do so is through employees' direct supervisors. This enables managers to work with their staff to develop SMART (specific, measurable, achievable, realistic and time-bound) goals that align with the organization's goals. Setting organizational goals also helps build workplace harmony because it makes employees work toward attaining similar goals.

While developing sound goals helps organizations with planning, over time, goals might turn out to be unrealistic and need to be modified accordingly.

| Self –check-6 | Written test |
|---|---|

Directions:  Answer all the questions listed below. Use the Answer sheet provided in the next page

1   Define Getting organized.(3pt)

2. Organizations are open systems--they affect and are affected by their environment

A) True                        B) False

3Having a clear idea of organizational requirements helps employees determine their course of action to help the health to achieve their goals.

A) True                        B) False

**Note: Satisfactory rating – 3points          Unsatisfactory –3 below 4points**

Score = _____

Rating: _____

Answer     sheet

| **Information sheet 7** | Conducting meetings |
|---|---|

**7.1.how to conduct meeting**: communicating in meeting is the essential part of effective meeting, some meeting is not conducted in an effective manner due to which they fall in accomplishing the sole objective of the meeting. It may be because:

 They do not involve participation of all

They may be too long

They may be unsystematic

They may be lack of clear agenda

They may end without any conclusion

As a result, such meeting lead to agitation and sheer wastage of time.

The process of running an effective meeting including the following steps

1. **plan the meeting: plan** the meeting in advance with the plan clear in mind, the objective of the meeting can be well accomplished.

Planning includes:

> ➤        outline the objective of the meeting
> ➤        Decide the participants of attendant of the meeting
> ➤        Plan the agenda for the meeting
> ➤        Plan the starting time of the meting

2. **Declare the meeting**: After planning the meeting and before actual beggingthe meeting should be delivered

   3        conduct the meeting :be punctual, arrive before the meeting time
   4        Evaluate the meeting:  assess the meeting after it conducted.
   5        Distribute the evaluation form to all participants which provide you
        feedback on the effectiveness of the meeting

| Self-check -7 | Written test/choice |
|---|---|

**Directions:** Answer all the questions listed below. Use the Answer sheet provided in the next page

1. Communicating in meeting is the essential part of effective meeting.(**3pt**)

A) True          B) False

2  Distribute the evaluation form to all participants which provide you feedback on the effectiveness of the meeting

3. Planning meeting includes:

A.          ☐outline the objective of the meeting

B.          ☐Decide the participants of attendant of the meeting

C.          ☐Plan the agenda for the meeting

D.          all

**Note: Satisfactory rating – 3 points          Unsatisfactory –3 below 4points**

```
Score = _____

Rating: _____
```

Answer     sheet

Name: _____          Date: _____

**Short Answer Questions**

1._____

2._____

**3**_____

| Information sheet -8 | Conflict resolution |
|---|---|

8.1 definition of conflict resolution: Conflict resolution is a way for two or more parties to find a peaceful solution to a disagreement among them. The disagreement may be personal, financial, political, or emotional. When a dispute arises, often the best course of action is negotiation to resolve the disagreement

**8.2 Conflict Resolution Strategies**

1. **Avoidin**g. Someone who uses a strategy of "avoiding" mostly tries to ignore or sidestep the conflict, hoping it will resolve itself or dissipate.
2. Accommodating.
3. Compromising.
4. Competing.
5. Collaborating.

8.**3. Four steps to resolve Conflict:**

**Step-1**Communicate. Open communication is key in a dispute.

**Step-2** Actively Listen. Listen to what the other person has to say, without interrupting.

**Step-3**Review Options. Talk over the options, looking for solutions that benefit everyone.

**Step -4** Ends with a Win-Win Solution.

## 8.4. Decision-Making and Conflict Resolution

Do all members of the group have an equal opportunity for participation or do dominant personalities and people with status and power control the participation?

Have you identified your vested interests and the vested interests of other group members that may cause conflict in reaching a group decision?

Are dissenting or minority viewpoints treated with respect?

Is there an effort by the group to understand the reasons behind a dissenting opinion?

Can the group work through differences of opinion and discuss conflicts rather than

ignoring them?

Can team members separate criticism of an idea from criticism of the person who had the idea?

Does the group avoid a "wait until next meeting "attitude toward decision making and conflict resolution?

Does the team make an effort to understand the problem before finding solutions? Is the team cautious about proceeding on the basis of premature conclusions?

Have problem-solving procedures been identified?

Are all members of the team required to adhere to the group decision? Can individual members "opt out" of the group decision?

What criteria will you use in determining your personal level of acceptance of the team product? Do other members of the team know, understand, and accept the criteria that you are using? Are you really honest about the criteria you are using?

Is the team willing to take the time to reach a totally acceptable decision?

8.5 conflict resolution strategies that can help you manage **volatile team members**.

1. Define Acceptable Behavior.
2. Don't Avoid Conflict.
3. Choose a Neutral Location.
4. Start with a Compliment.
5. Don't Jump to Conclusions.
6. Think Opportunistically, Not Punitively.
7. Offer Guidance, Not Solutions.
8. Constructive Criticism.

**8.6Conflict Resolution Techniques**

✓ Listen, Then Speak Out. Believe it or not, just listening to an employee's issue is the first and most important step in resolving conflict.

✓ Gather the Group.

✓ Be Impartial.

✓ Do Not Postpone Conflict Resolution.

✓ Promote Teamwork.

✓ Broadcast Praise.

| Self –check -8 | Written test |
|---|---|

Directions: Answer all the questions listed below. Use the Answer sheet provided in the next page**(5pt)**

1. ---------- is a way for two or more parties to find a peaceful solution to a disagreement among them.

    a)           Accommodating.

    b)           Compromising.

    c)           conflict resolution

2    One of the following is not Conflict Resolution Strategies

    a)           Avoiding

    b)           Accommodating.

    c)           Compromising.

    d)           Competing.

    e)           Collaborating

Communication

    2.            Just listening, Then Speak out to amember's issue is the first and most important step in resolving conflict.

    3.           A) True           B) False

**Note: Satisfactory rating – 5points        Unsatisfactory – 5below 4points**

Answer sheet

Score = _____

Rating: _____

Name: _____  Date: _____

**Short Answer Questions**

1._____

2._____

**3**_____

*Reference*

1.       Blended Learning Module for the Health Extension Program 2014

2.       Global strategy on human resources for health: Workforce 2030

3.       Health Management, Ethics and Research for the Health Extension Programme

4.       .Dyer, William G., Team Building: Issues and Alternatives, Reading, Massachusetts: Addison-Wesley Publishing Company, 1977, 139 pp.

5.       Terry L. Gibson Jeanne Moore E. J. Lueder TEAMWORK in Cooperative Extension Programs September, 1980

6. Resolution source The Handle.Net® Software Client Library Java™ Versio