

## Module 5

# Assuring Safety for Clinical Techniques and Procedures

### Essential Ideas to Convey

- ❑ Medical safety is a critical issue for both **clients** and **providers** and relates to the **procedures** that are conducted in the **clinical environment**. Medical safety is one of the fundamentals of care.
- ❑ Clinical techniques and procedures are considered safe when skilled providers are practicing according to updated, evidence-based standards and guidelines and infection prevention protocols, within a physical structure appropriate for managing clinical and surgical procedures.
- ❑ Medical monitoring is a quality improvement intervention that entails the objective and ongoing assessment of the **readiness** and the **processes** of service delivery. Medical monitoring is conducted to ensure that services are safe and to identify gaps between best and actual practices, and it leads to recommendations for improvement, including performance improvement.
- ❑ Guiding principles for supervisors
  - Be facilitative:*
    - Work as a team member to model facilitative supervision.
    - Talk with and listen to all levels of staff.
    - Recognize jobs well done.
    - Solve problems on the spot, when possible.
    - Provide feedback in a constructive way.
    - Involve staff in the decision-making process.
    - Never criticize staff in front of a client or other staff.



## Session 5

### Assuring Safety for Clinical Techniques and Procedures: Medical Monitoring

#### Objectives

By the end of this session, the participants will be able to:

- Describe the medical monitoring process and how it contributes to assuring the safety of clinical techniques and procedures
- Identify areas that should be assessed through medical monitoring activities
- Explain the functions of on-site and off-site supervisors' organizing and conducting medical monitoring to improve the quality of medical services
- Explain what off-site supervisors should do before, during, and after the supervisory visit

#### Materials

- PowerPoint presentation, Module 5
- Participant Handout 5.1: Counseling Observation Checklist
- Participant Handout 5.2: Infection Prevention Checklist
- Participant Handout 5.3: Facility Audit Checklist
- Participant Handout 5.4: IUD Service-Delivery Assessment
- Flipchart 5A: Site Action Plan
- Flipchart 5B: Off-Site Supervisor's Action Plan
- Flipchart paper and markers
- Participant Resource: Appendix A—Sample Medical Monitoring Checklists

#### Advance Preparation

1. Revise and adapt the checklists according to the national standards of the country where the training is being held.
2. Make enough copies of the handouts for distribution to all participants.
3. Prepare flipcharts 5A and 5B:

<b>Flipchart 5A</b>				
<b>Site Action Plan</b>				
<b>Problem</b>	<b>Cause(s)</b>	<b>Recomendations</b>	<b>By Whom</b>	<b>By When</b>

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<i>Flipchart 5B</i>				
Off-Site Supervisor's Action Plan				
Problem	Action/Resources Needed	Timeframe	Follow-up	Notes

Session Time

2 hours, 40 minutes	<b>Training Activities</b> . . . . .		<b>Time</b>
	<b>A.</b> Introduction to medical monitoring . . . . .		55 min.
	<b>B.</b> Supervisory visits . . . . .		30 min.
	<b>C.</b> Using medical monitoring tools . . . . .		1 hour, 15 min.

## Session 5 Detailed Steps

### Activity A: Introduction to Medical Monitoring: Presentation/Small-Group Work/Discussion (55 minutes)

1. Present the learning objectives for this session.
2. Ask the participants to recall what factors are important to ensuring the safety of clinical procedures and techniques. Lead a brainstorm, writing ideas on a sheet of flipchart paper.
3. Start the PowerPoint presentation for Module 5. (See slide notes pages for comments and explanations.) Reveal Slide 2, to summarize the points made in the brainstorming and to emphasize what elements need to be in place to assure safety. Tell the participants that skilled providers are those who practice according to updated, evidence-based standards and guidelines and infection prevention protocols, within a physical structure appropriate for managing clinical and surgical procedures.
4. Reveal Slide 3 and ask for a volunteer to read the definition of medical monitoring. Tell the participants that they will be working in small groups to describe what both off-site and on-site supervisors and staff usually do to ensure safety.
5. Divide the participants into four groups. Reveal Slide 4 to assign and explain the tasks for the groups. Tell the participants that they will work in small groups for 15 minutes, and that they will need to record the results of their discussions on a piece of flipchart paper. Each group will present their results.
6. Tell the groups that they will have **5 minutes** for each presentation. After the first group presents its results, invite the group that was working on the same tasks to add anything that the first group missed.
7. Make sure that all issues described in slides 5–7 are addressed in the groups' presentations. Use slides 5–7 to summarize the exercise.
8. Invite the participants to share their experiences about **who** in their practices conduct those assessments. Ask them to describe activities conducted by **medical and nonmedical supervisors**: How do they coordinate their supervisory activities? Do they collaborate with each other? After the discussion is completed, reveal Slide 8 and summarize the information, describing by whom and how often medical monitoring activities can be conducted.
9. Use Slide 9 to discuss the structure of a supervisory system. (Adjust the information according to the country's system.)
10. Use Slide 10 to discuss what tools might be used to conduct medical monitoring activities. Compare the content of this slide with the groups' presentations.
11. Ask the participants to share their experiences of whether they have participated in the development of such checklists. Ask them to describe the process of checklist development. Discuss what important issues need to be addressed when someone is working on checklists.

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### **Activity B: Supervisory Visits: Small-Group Exercise/Presentation (30 minutes)**

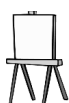
1. Tell the participants that during the next activity, they will discuss what off-site supervisors should do before, during, and after a supervisory visit.
2. Divide the participants into three groups. Reveal Slide 11 and explain the tasks for the group work. Allot **15 minutes** for the small-group work.
3. Invite the groups to present their results (allowing **5 minutes** per group). Encourage the entire group to discuss the presentations, while sharing their own experiences.
4. Use Slides 12–17 to summarize the exercise and the group discussion. Reveal Slide 12 and emphasize the importance of proper preparation to a site supervisory visit. Discuss with the participants how much time they usually need to plan for their supervisory visits. Tell them that supervisors should be aware that because medical monitoring requires time, they need to reserve time for such activities and include them in their workplans.
5. Use Slides 13–14 to discuss the range of activities that an off-site supervisor may conduct when visiting a site. Tell the participants that during this exercise, they will learn what supervisors should do. Later in the course, the participants will learn how to conduct medical monitoring activities and will gain the skills that will enable them to conduct supervisory visits. (For example, they will learn how to provide constructive feedback.) The participants will practice the knowledge and skills during the practice supervisory visit that is scheduled for Day 4.
6. Tell the participants that a supervisor can use medical monitoring activities to identify problems and to help staff develop an action plan. Use Slide 15 to describe a format for an action plan that staff and supervisors can use to record the problems that they and the off-site supervisor identified and the solutions that they developed. Explain how to develop an action plan. A team-based approach should be used for problem-solving during the development of recommendations and the site's action plans. The root cause(s) of a problem should be identified using the “multiple why?” technique (an approach that involves asking “why” as many times as is needed to get to the root cause). Tell the participants that during the next exercise, they will learn how to develop an action plan correctly.
7. Use Slide 16 to discuss what the off-site supervisor should do after completing the supervisory visit. Emphasize that one of the roles of the off-site supervisor is to help a site's staff to implement solutions that the staff cannot solve without external help. Tell the participants that the format presented on Slide 17 might be used by off-site supervisors to integrate the findings into their own plans. When summarizing the topic, compare the PowerPoint lists with the lists of tasks developed by the participants.
8. Discuss with the participants the roles of medical and nonmedical supervisors and the ways in which they can collaborate, using their skills and knowledge in specific areas. For example, the nonmedical supervisors can conduct facility auditing activities.

### **Activity C: Using Medical Monitoring Tools: Small-Group Exercise/Discussion/Presentation (1 hour, 15 minutes)**

1. Explain to the participants that during this activity, they will practice how to use different checklists to assess a site's readiness and its processes and procedures. Remind them that

both off-site and on-site supervisors should use the checklists to assess the quality of services and to involve the staff in the performance improvement and quality improvement processes.

2. Ask the participants to open their Participant Handbook to Appendix C to see different checklists. Allow them a few minutes to review the checklists.
3. Remind the participants that medical monitoring checklists need to be adjusted and adapted for each country or region and should be based on national standards and guidelines.
4. Discuss with the participants the roles of medical and nonmedical supervisors.
5. Divide the participants into three groups: A, B, and C. Ask the members of each group to count 1-2-1-2, etc. Explain that all who have Number 1 will represent on-site supervisors and all with Number 2 will represent off-site supervisors. Group A will use Participant Handout 5.1 (the Counseling Observation Checklist), Group B will use Participant Handout 5.2 (the Infection Prevention Checklist), and Group C will use Participant Handout 5.3 (the Facility Audit Checklist).
6. Explain that the participants should envision their clinic, or any clinic. Reading questions, they should “identify” hypothetical problems. (These problems can be those that are common to many clinics or they can be imaginary.) In each group, the off-site and the on-site supervisor are to work as a team: The on-site supervisor will develop an action plan to solve the problems they identified; the off-site supervisor will develop an action plan for the activities they will undertake to help the site’s staff and supervisors to solve those problems that need external help. Participants should make sure that they address in their plans the fundamentals of care and think how to enhance services for long-acting and permanent methods.
7. Tell the participants that those who represent off-site supervisors should remember their role as a liaison within the health care system. They need to think about and plan activities that will bring changes into the processes and systems and make improvements sustainable.
8. Reveal flipcharts 5A and 5B, showing the formats of action plans, and tell them that they are to use those formats for recording their findings on flipcharts.
9. Tell the participants that they will be working in small groups for **40 minutes**.
10. After the participants have completed their group work, the groups will present their results. Each group should start its presentation with the action plan developed by the on-site supervisor. The off-site supervisor will then present his or her plan. The entire group should then comment on the results. Trainers should reinforce messages from the previous activity concerning supervisors’ actions to improve the quality of clinical services and assure the safety of clinical techniques and procedures.
11. When the groups present their action plans, make sure that the problem statements are specific, that the root causes are identified, and that the solutions are concrete and realistic.
12. Reveal slides 19–20 and explain the guiding principle for supervisors (“be facilitative”) and that this is what supervisors should promote. Explain what types of behavior by off-site supervisors can demonstrate a facilitative approach to supervision and supportive leadership. When commenting on the last bullet on Slide 20, explain the roles and the tasks of supervisors, both on-site and off-site, including their roles in strengthening the training system and in making links to the local trainers. Explain that later in the course, they will discuss these issues in detail during a session on a systems approach to supervision.



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13. Discuss with the participants what knowledge and skills are needed to conduct medical supervision and monitoring. Mention the importance of communication, leadership skills, and technical competency, and tell them that later in the course, they will practice those skills.
14. Discuss the concept that medical supervision is not just a supervisor's responsibility, but rather is a responsibility of all staff. The supervisor serves as a trigger to make things happen, however, and is the one who is ultimately responsible for ensuring that medical monitoring activities are carried out and that medical services are safe.
15. Reinforce the message about collaboration between medical and nonmedical supervisors and between off-site and on-site supervisors. One task for off-site supervisors is to teach/coach on-site supervisors to conduct medical monitoring activities and to transfer the knowledge and skills on how to involve the staff in quality improvement process.
16. Reveal Slide 21 and explain the steps in the quality improvement process. Link the steps of the process to medical monitoring activities.
17. Reveal Slide 22 and describe how the results of an off-site supervisor's visit may contribute to the development of a more comprehensive, feasible quality improvement/performance improvement plan.
18. Explain Slide 23, which emphasizes that after the off-site supervisor completes a site supervisory visit and the site's action plan is developed, some of the information gathered during the monitoring activities is shared with "headquarters" or with an appropriate level within the system, and that as a result those plans might have to be revised. The off-site supervisor plans the follow-up with staff at the district, regional, or national levels on planned activities that require external help.