

PRIME PAGES



Reviewing Results in PRIME II

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PRIME II

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Locally Appropriate Training Equipping Paramedics with Clinical Knowledge and Skills

Using field support funds, PRIME II's training strategy for a wide cadre of NGO health providers has increased the capacity of local training organizations and dramatically improved provider performance in the delivery of reproductive health, child survival, and family planning services.

Background

PRIME has provided TA to local training organizations in Dhaka since 1998, developing their capacity to train primary providers (paramedics and doctors) to deliver an essential service package (ESP) at urban and rural NGO clinics. The NGO clinics operate within the USAID National Integrated Population and Health Program and are supervised and managed by CA-led partnerships. The ESP program reflects a major philosophical change by aiming to integrate previously separate, vertically structured health and population programs. PRIME II TA focuses on “other” reproductive health—i.e. maternal health and RTI/STIs—child survival interventions, and, since early this year, family planning services. Through PRIME II interventions, the local training organizations have improved their capacity to develop culturally appropriate curricula, train trainers, develop and adapt effective training materials, and evaluate provider performance in the designated health areas. Maternal health and child survival training activities have been underway for more than three years. Through mid-2001, PRIME's efforts have resulted in 1,300 paramedics who now have the skills to provide an expanded range of services at their clinics. Bangladeshis living in the range of these clinics now have greater access to this array of services.

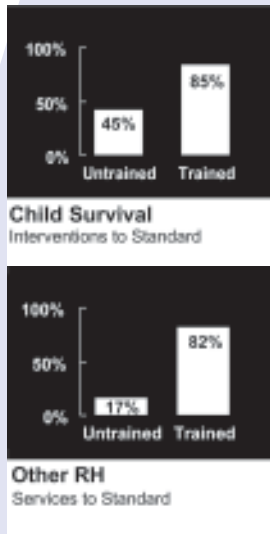
Interventions

Highlights of PRIME II's strategic approach include:

- Increasing the capacity of a range of training organizations to implement performance-based clinical training of paramedics and doctors in the essential service package
- Developing capability in strategic planning, budgeting, curriculum development, adult learning, management, information systems, and evaluation for clinical training.

Results

A recent assessment demonstrates that the technical knowledge and skills of providers who have benefited from PRIME's comprehensive training strategy are significantly better than



those of untrained counterparts at service delivery sites. Of trained paramedics, 85% performed child survival interventions to standard compared to 45% of untrained; 82% of trained paramedics performed other reproductive health services to standard as opposed to 17% of untrained. The assessment also reveals that after thirty weeks the clinics with trained providers were serving nearly five times more clients than before. More than 90% of clients were satisfied with key elements of quality such as confidentiality and privacy, advising for a return visit, a provider who “patiently listens to their problems,” waiting arrangements, and office hours.

In addition, a spring 2001 institutional evaluation of capacity in training indicates that all nine training organizations strengthened by PRIME have shown significant improvement since baseline in the areas of infrastructure, curriculum development capability, responsive planning, training management information systems, quality of training, and number of courses offered. Several of the organizations have created residential training capability, reduced trainer attrition, and won training contracts outside of the USAID program to help sustain their operations.

As PRIME understands very well, training is not a “magic bullet” to improve performance at service sites and other factors may have contributed to the performance improvements documented by the assessment. Still, the encouraging findings clearly point to a training program that is equipping a critical mass of paramedics with a high level of clinical knowledge and skills as well as attitudinal approaches that increase use of services and lead to higher client satisfaction. The capacity for developing, managing, and conducting locally appropriate training that has been transferred to the local training organizations is also significant.

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