

Creating a culture of quality

Supportive supervision for quality improvement

Reference manual



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Table of contents

Acknowledgements	2
Introduction	3
Section 1	
The importance of supervision within the quality of care programme ...	4
Self-assessment ... creating a culture of quality of care	4
Making it happen ... underpinning philosophy	4
Leadership ... and capacity building	4
Concepts and principles of supportive supervision	5
Getting the best from the supervision process ... elements for success	7
Section 2	
Internal and external supervision in the quality of care programme ... progress towards the action plan and quality improvement	8
Internal and external supervisors ... different roles to play	8
Criteria for supervisors ... similar skills, different roles	8
External supervision ... main aims	8
Internal supervision ... main aims	9
Section 3	
Skills and techniques of supportive supervisors ... creating an effective learning environment	11
Supportive supervisors ... gaining staff cooperation and confidence	11
Effective communication skills ... messages received and understood	11
Coaching ... enabling staff to learn, grow and work efficiently	14
Working with teams ... the vital role in building team work	18
Dealing with conflicts ... reconciling differing viewpoints	25
Section 4	
The external supervision process ... technical, communication and management aspects	27
Activities to be conducted before the supervision visit ... preparation checklist	27
Activities to be conducted ... during the supervision visit	28
Activities to be conducted after the supervision visit ... follow-up phase	30
The Service Delivery Point Action Plan Monitoring Form	32
The Member Association Overall Action Plan Monitoring Form	33
Section 5	
Linking supervision with the IPPF quality of care standards	34
Supportive supervision ... standards on the needs of providers	34
Providers' need for training	34
Providers' need for information	35
Providers' need for infrastructure	36
Providers' need for supplies	37
Providers' need for guidance and providers' need for back-up	37
Providers' need for respect and providers' need for encouragement	38
Providers' need for feedback	38
Providers' need to express their opinion	39
Sources and references	41

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Introduction

Focus on empowerment and interaction

This reference manual is designed to assist IPPF regional quality of care advisors, IPPF Member Associations and service delivery point professionals, who are responsible for supporting and monitoring the implementation of the IPPF *Strengthening the Quality of Reproductive Health Care Programme* (henceforth referred to as the quality of care programme) through supervision. The manual is also intended to guide IPPF regional and Member Association training activities to introduce the supportive supervision process at Member Association level.

The aim of supervision in the quality of care programme is to support the quality improvement process at Member Association and service delivery point levels. The supervision approach adopted is meant to avoid traditional approaches that emphasize 'inspecting' and 'controlling'. Instead, it is intended to be a process that is oriented towards team work, where the main focus is on empowerment and interaction, and where the supervisor becomes a coach who supports the staff.

This reference manual should be used during the quality of care training on supportive supervision as a back-up to the facilitators' guide. Readers, especially trainers, may also find the following resources developed as part of the quality of care programme of particular interest:

1. IPPF. *Training skills for health professional: reference manual*: A reference manual on key training skills needed to introduce the quality improvement process using self-assessment at individual Member Associations and their (SDPs).
2. IPPF. *Self-assessment and facilitation skills for quality improvement: A training of trainers guide for health professionals, Facilitator's Guide*. The manual for trainers conducting training on self-assessment and the quality improvement process. The manual includes the course outline, exercises, and all handouts for the five day training.
3. IPPF. *Quality of Care Improvement Process Manual for Service Providers and Managers*: The core programme document providing detailed instructions for the implementation of the quality improvement process using self-assessment tools at individual Member Associations and SDPs.

All resources and further information about the quality of care programme is available on the IPPF website at: www.ippf.org

Section 1

The importance of supervision within the quality of care programme ...

Self-assessment ... creating a culture of quality of care

In the IPPF quality of care programme, service providers and managers conduct self-assessment exercises to identify quality of care gaps in service provision and management support systems. They then work to address these gaps by developing and implementing quality of care action plans. The self-assessment exercises are carried out using a participatory and dynamic approach that motivates Member Association and service delivery point staff and creates a culture of quality of care as well as commitment to improve the quality of sexual and reproductive health services.

Staff need encouragement, support and motivation to implement the quality of care action plans.

Making it happen ... underpinning philosophy

The quality of care programme is designed to influence the quality of Member Association programmes which focus on information, education and service delivery. It is important, therefore, that supervision for the quality of care programme is integrated with supervision for other Member Association programmes. The quality of care programme provides technical assistance and support to align the supervision systems to the same philosophy which underpins the self-assessment exercises.

This approach offers guidance and encouragement, conveys a sense of ownership of the process, and motivates staff to improve and maintain high quality sexual and reproductive health services. This approach can support Member Associations to reshape their existing supervision systems at the Member Association and service delivery point levels in line with the quality of care programme concept.

For the quality of care programme to run smoothly and effectively, it is important to maintain a good level of communication and collaboration within the service delivery point teams and also between service delivery points and district/central Member Association levels. Supervisors have an important role in facilitating this. With the supportive supervision approach, district and headquarters supervisors can identify, and discuss with service delivery point supervisors and staff, areas where they need assistance from district and headquarters level to implement their action plans. At the same time, district and headquarters supervisors can bring to the attention of the service delivery point supervisors and staff the developments at Member Association level, which are important to support the service delivery point effort to improve quality of care.

Leadership ... and capacity building

The integration of quality of care supervision with supervision for other programmes enhances communication and collaboration between programmes as well as cost-effectiveness of the supervision process and sustainability. Supervisors can show leadership and build the capacity of all staff involved. They have a role to encourage and support service delivery point staff to maintain the quality improvement process as an ongoing activity. With the supportive supervision approach, the supervisor can create a supportive and empowering environment for this process.

In the quality of care approach, supportive supervision ensures that staff build their capacity continuously and receive technical updates and orientation.

One of the most important elements of the quality of care approach is to empower staff to introduce and maintain the quality of care standards and criteria in their work. Involving staff members in the self-assessment process of the quality of care programme makes sure that they know what to do, and gives them a sense of pride and ownership in their work. In a similar way, they need to be involved in introducing and monitoring quality of care activities. The approach and skills of the supervisor are crucial to achieve this.

Concepts and principles of supportive supervision

Role of supervisors ... to build support, skills and self-esteem

Many sexual and reproductive health programmes follow a traditional supervisory process where supervisors from headquarters or district offices carry out visits to the service delivery points once or twice a year. These visits are generally brief: supervisors have many different activities to monitor but little time for discussion and coaching. Because of time constraints and lack of planning, supervisors often leave service delivery points without a written plan of recommendations and no follow-up support is provided. This means that the supervision visit makes little, if any, contribution to staff motivation or to improve staff or service delivery point performance. Indeed, traditional supervision is often geared more towards the needs of headquarters to monitor service delivery point activities, rather than meeting the support and guidance needs of clinic staff.

To guarantee the effective implementation of the quality of care programme, the supervision system should enable and support staff at the service delivery point level to assess, implement and maintain the quality of care process and standards. Quality of care supportive supervision therefore pays special attention to:

- mentoring
- coaching
- training
- team problem-solving
- two-way communication between supervisor and service providers

Staff attitudes – and especially their level of motivation to do their work well – are a concern for all supervisors. Supportive supervision helps to enhance staff motivation as it is based on the premise that motivation comes not only from outside stimulus, but also from within people. This means that supervisors have an important role to play in the quality of care programme to strengthen staff self-esteem and their interest in helping others as a way to develop and maintain their motivation from within.

The supportive supervision approach transforms the ‘controlling’ or ‘policing’ style of supervision into a continuous process of empowerment – one that assists staff to improve the quality of their work and personal performance. In this way, the focus of supervision shifts away from the traditional monitoring role of headquarters by placing responsibility for quality improvement on the service delivery point staff.

Emphasis on team work ... achieving common goals

Supportive supervision encourages and facilitates participation to identify quality of care gaps and areas for improvement by emphasizing team work, coaching, motivation and encouragement. In addition, by using supportive supervision, supervisors can overcome many of the shortcomings of traditional supervision which often places ‘blame’ on individual staff members. In contrast, the team approach within supportive supervision emphasizes individual performance only as it relates to the ability of the team to achieve common goals. This approach has a forward focus; it looks at systems, processes and team productivity more than the shortcomings of individuals. The overall goal is to promote and maintain the quality of services.

Within the context of the quality of care programme, supportive supervision encourages the whole team to:

- be knowledgeable about the quality of care standards
- make sure that the quality of care standards are met
- find out what is hindering or helping implementation of the quality of care action plan
- identify and implement ways to improve quality
- monitor progress towards action plan implementation systematically

In summary, opening a two-way communication system, respecting all members of the service delivery point team, developing confidence and giving constructive feedback are essential elements of supportive supervision. Within the quality of care programme, the underlying theory to supervision is that people do better work when they participate actively, are listened to and treated well, encouraged to use their initiative and receive recognition for a job well done.

Motivation ... the difference between success and failure

There are many service delivery points around the world where clients are received with a warm welcome and attended to by cheerful staff – these tend to be service delivery points which are very busy, yet clean and well organized, and which deliver high quality services. There are other service delivery points, however, which are in a poor state, serve few clients and have low quality standards. Research shows that motivation can make the difference between a successful sexual and reproductive health service and a failure. Supervisors therefore need to recognize the importance of motivating staff at Member Association and service delivery point levels.

What is motivation ... and what motivates health care providers?

We know the difference between someone who brings passion and thought to the things they do, and someone who just does things in a routine and mechanical way. Many believe that motivation can be improved through measures such as salary increases or other in-kind incentives. While there is a place for these types of interventions, there are other factors that play an equal, and often more important, role in motivating health care providers.

In health care, the motivation to perform well does not come solely from one's own needs – it is also derived from fulfilling the needs of others. So, to achieve a high quality of services, supervisors should contribute to the motivation of providers by taking into account their personal needs and increasing the awareness of providers of the positive impact their work has on the people they serve.

Depending on how supervisors perform their job, they can either motivate or de-motivate the people they supervise. Service providers will be more motivated to perform well when:

- they are fully aware of the importance of what they do for other people
- they feel that they are part of an institution or programme, and not just employees
- they are properly supported by the system through adequate training and supervision, guidance and supplies
- their opinion is taken into account in managerial decisions
- their good performance is recognized and acknowledged
- they are encouraged to use their initiative
- they work in an environment in which all human beings act with kindness and respect for each other

Based on the above concepts, the supervisor needs to make sure that:

- service providers are aware of the positive effect their work has on the daily life of their clients and/or on the well-being of the community
- service providers know what is expected of them
- service providers receive positive feedback
- service providers can develop professionally within the workplace and the workplace has a culture of learning
- ideas and contributions of all staff are taken seriously and are followed up
- the personal and professional needs of staff are respected

The supervisor's job is to know what motivates staff – and how to motivate them. The more the supervisor understands staff motivation, the more she/he can encourage and support staff to achieve high quality services.

Getting the best from the supervision process ... elements for success

Encouraging participation ... taking responsibility

Taking into account the elements which motivate staff to perform well, it is clear that for Member Associations to succeed in implementing the quality of care programme, one of the most important elements of supervision is to empower staff. This includes encouraging participation in the quality improvement process, guiding service providers to take responsibility for their own actions through a supportive supervision process, motivating them, and giving them a sense of pride and ownership in their work.

Staff team involvement ... fostering a climate of ownership

To improve and maintain quality of care standards, supervisors need to foster a climate of ownership and team work among staff by emphasizing that all staff members can contribute to the quality improvement process. Problems are identified and solved in a participatory way in the quality of care programme. Regimented, obedient staff or fault-seeking supervisors do not succeed in addressing the challenges of quality improvement. Supervisors who are involved in quality of care and quality improvement need to depend on the creativity, involvement, initiative and enthusiasm of their staff.

Focus on process ... not individuals

When assessing performance, supportive supervision focuses more on systems and processes than on individuals. This supervision approach recognizes that most problems at Member Associations and service delivery points are due to faulty systems, rather than the fault of individuals.

Continuous learning ... improving personal and professional competence

Introducing changes and improving quality involves training at all levels. Training is an integral part of quality improvement. Training strategies should include systematic assessment of training needs with the involvement of supervisors and service providers. IPPF and Member Associations should be regarded as learning organizations where the learning environment values learners and their experiences.

The supervision process should ensure that all levels and types of staff have the knowledge and skills they need to carry out their work. Supervision activities provide opportunities for on-the-job training and supervisors also have a role to make sure that the Member Association is providing continuous learning opportunities for staff to improve their personal and professional competence.

Maintaining quality ... adequate work environment and tools

Supportive supervisors work with service providers to ensure that Member Associations and service delivery points have adequate infrastructure, equipment and tools to improve and maintain quality. In addition, supportive supervisors ensure that staff are trained to use and maintain equipment, and to manage supplies, and that they have clear service and technical guidelines.

Setting up peer support ... finding solutions on the work floor

It is useful to explore ways to strengthen supervision by setting up a peer support network in which peers provide support to each other. Peer support can be used as a part of, and in addition to, an existing supervision system. It is a process of systematic interaction of staff members, who meet regularly to discuss and find solutions for problems on the work floor.

Section 2

Internal and external supervision in the quality of care programme ... progress towards the action plan and quality improvement

Internal and external supervisors ... different roles to play

Within the quality of care programme, there are both 'internal' and 'external' supervisors who share responsibility in supervising the quality of care process at Member Association and service delivery point levels. The internal supervisor is a service delivery point staff member while the external supervisor is someone from either the Member Association headquarters or a branch office who visits the service delivery point periodically. The major difference between the two is that the external supervisor is not at the service site on a daily basis. Here are two examples to illustrate the point.

Internal and external supervisors

Example 1

When an IPPF regional supervisor visits a Member Association and works together with Member Association supervisors, the IPPF regional supervisor is the external supervisor and the Member Association supervisor is the internal supervisor.

Example 2

When a Member Association supervisor visits a service delivery point and works together with the service delivery point supervisor, the Member Association supervisor is the external supervisor and the service delivery point supervisor is the internal supervisor.

Remember:

- the internal supervisor is placed within the service delivery point or working unit
- the external supervisor is placed outside the service delivery point or working unit

It is important that supervision takes place within the framework of a supportive interaction between the internal and external supervisors and between supervisors and service providers.

Criteria for supervisors ... similar skills, different roles

The person responsible for supervision should meet the following criteria:

- they are technically competent¹
- they have credibility within the team
- they have a supportive attitude and skills

While both internal and external supervisors should have similar skills, they have different roles to play within the quality of care programme, as described further below.

1. External supervision ... main aims

As noted in the example, external supervision is usually conducted by the IPPF Regional Office to the Member Association, or by a central supervisor at the Member Association headquarters to service delivery points. The main aims of the external supervision are to discuss progress towards the action plan and quality improvement, solve any problems, and provide coaching and encouragement.

¹ A supervisor cannot be technically competent in all areas of quality improvement, because such specific technical issues, such as clinical procedures, may need to be addressed by others.

Regional IPPF staff as external supervisors ... coordination and facilitation

The regional supervisor provides support to the Member Association headquarters to coordinate and facilitate training activities. The regional supervisor also assists the Member Association to develop its overall quality of care action plan. This process includes introducing a reporting system, ensuring that required funds are made available on time and helping with fundraising. The regional supervisor facilitates communication between the Member Association and IPPF and monitors the progress of the Member Association's overall quality of care action plan, as well as providing continuous support and motivation. In this process, the regional supervisor works directly with the Member Association supervisors who in this relationship play the role of internal supervisors.

Member Association headquarters/branch staff as external supervisors ... support and technical assistance

At the Member Association level, headquarters and branch-level staff become external supervisors when they visit service delivery points to provide support in preparing the service delivery point action plan and to carry out follow-up activities such as training. Other tasks of a Member Association external supervisor are to strengthen the links between service delivery points and the Member Association headquarters, identify sources of technical assistance for service delivery points, analyze service delivery point reports and give relevant feedback. A Member Association external supervisor visits the service delivery point regularly and collaborates closely with the service delivery point internal supervisor.

Both external and internal supervisors need to plan supervision visits carefully with service delivery point managers to make the most of the visit. Supervisors must also be rigorous in following up issues raised during the visit.

Supervision visit ... forward planning

To ensure an effective and productive visit, external supervisors must work with the service delivery point and particularly with the internal service delivery point supervisor(s) to:

- set objectives for the visit
- review service delivery point activity reports and service statistics sent to headquarters by the service delivery point
- decide what activities to undertake while on site
- review the quality of care supervision tools that will be used during the visit
- make all administrative preparations

2. Internal supervision ... main aims

The aim of internal supervision is to ensure that those in need of sexual and reproductive health services receive the highest possible standard of care from those who provide them. Good internal supervision can help increase the competence and satisfaction of service providers, which can improve the performance of the facility. This, in turn, can increase client well-being and satisfaction.

Internal supervisors can conduct supervisory tasks as part of their everyday activities, even while providing sexual and reproductive health services. Internal supervisors vary greatly in the jobs they do. The internal supervisor may:

- work in a small, rural service delivery point or a large hospital
- be a nurse, midwife, physician, public health technician or other type of health care professional
- have received some formal training in supervision

The main responsibilities of an internal supervisor are to:

- conduct meetings with service delivery point staff to follow up action plan progress
- work with service delivery point staff to assess their performance periodically in comparison to quality of care standards
- build team work
- facilitate the quality of care problem-solving process
- provide constructive feedback to service delivery point staff about their performance
- ensure that interventions have had their intended effect

The internal supervisor is always interacting with staff, helping them to internalize a culture of quality. The more skilled a supervisor is in working with people, the more successful that supervisor will be in improving the performance of health care staff and the quality of sexual and reproductive health services.

Another task of the internal supervisor is to set up and maintain effective communication with the Member Association external supervisor. Internal supervisors should also be able to organize fundraising activities for their service delivery point.

Personal characteristics of the internal supervisor include:

- leadership skills and the ability to motivate others
- expertise in team building and creating an enabling environment for peer support and decision making
- the capacity to delegate
- a desire to help service providers achieve their full potential
- a commitment to provide high quality health services at the service delivery point
- openness to new and creative ideas

Section 3

Skills and techniques of supportive supervisors ... creating an effective learning environment

Supportive supervisors ... gaining staff cooperation and confidence

The supportive supervisor in the quality of care programme assists the Member Association and its service delivery points to implement the quality improvement process, in addition to monitoring activities such as collecting statistics and observing procedures and infrastructure.

One of the most important tasks for the supportive supervisor is to demonstrate to service providers that she/he is willing to work with them and support them in the quality improvement process. In this way, the supervisor identifies herself/himself with the service providers, and gains staff cooperation and confidence.

Good interpersonal communication is at the heart of supervision. To support Member Associations and service delivery points to reach the highest quality of care, and enable staff to perform at their best, the supervisor needs to communicate and work well with staff at Member Association headquarters and service delivery point levels, as well as in many different situations. The supervisor's effectiveness can be increased if she/he can promote team work, be sensitive to the needs of staff, manage conflict and motivate staff members to do their best.

Four key elements are required in supervision:

1. effective communication skills
2. coaching
3. working with teams
4. dealing with conflict

We describe each of these elements in turn.

1. Effective communication skills ... message received and understood

Without effective communication skills, it will be difficult to function well as a supervisor. Being able to communicate effectively – in other words, the ability to transfer information in a way that leads to a mutual understanding between the sender and the receiver – is essential for the supervisor to be successful.

The following principles are important in good communication:

- all levels of staff should be free to express and explain their views, and should be encouraged to do so
- everyone should be treated with respect
- a message, whether verbal or written, should be expressed clearly and in understandable language
- communication has two main elements: sending and receiving – the supervisor should always check that the message is received and understood
- conflict or disagreement is normal in human relationships; it should be managed in a way that will achieve constructive results

The supportive supervisor should use a variety of communication techniques. These include:

- active listening
- positive body language
- clarification
- appropriate questioning methods

Active listening ... stimulates open and frank communication

Active listening is a communication technique that stimulates open and frank exploration of ideas and feelings. Active listening is not the same as hearing; it requires energy, skills and commitment. In active listening, the listener accepts what is being said without making value judgments, clarifies the ideas or feelings being expressed

and reflects these back to the speaker. Active listening is a powerful tool, because it can make the speaker feel important, acknowledged and empowered.

Active listening checklist: do's and don'ts	
Do	Don't
Concentrate on what the speaker is saying.	Don't do other things (for example, look at your watch, write notes) when the speaker is talking.
Allow the speaker to express herself/himself.	Don't interrupt. Don't finish the speaker's sentences.
Allow the speaker to control the conversation.	Don't ask questions that change the subject.
Accept the speaker's opinion as valid for herself/himself.	Don't discredit, criticize or judge.
Pay attention not only to words, but also to gestures and behaviour.	Don't anticipate what the speaker is going to say next. Don't ignore the emotional context.
Prevent emotions from blocking active listening, no matter what the speaker is saying.	Don't become angry, defensive or upset.

Supervision is about using active listening to understand the feelings and ideas of staff. The relationship between supervisor and staff will improve the more the supervisor understands their staff and, as a result, the staff feel understood by their supervisor.

Positive body language ... showing respect, interest and empathy

It is commonly known that non-verbal aspects of communication are important, but it is often difficult to notice and manage one's own non-verbal communication, such as body language. Body language is the way we convey messages to others through gestures and the posture of our body. Body language can include:

- how we look at people when we speak to them and when they speak to us
- what facial expressions we use (for example, smiling, nodding, frowning)
- how we place our arms and hands (for example, arms crossed)
- how we position ourselves (for example, sitting behind our desk, sitting at the same level as the other person)

Active listeners use positive body language to show respect, interest and empathy. At times body language may intimidate or frighten people and discourage them from offering their suggestions for solving problems. A supportive supervisor should avoid triggering this kind of reaction.

The packaging of messages can also play a powerful role in allowing staff to either open up or close down communication channels. The setting of the conversation, and the supervisor's tone and attitude can make the difference when offering invitations for dialogue, signalling clearly that there is an opportunity to open up and explore a problem.

Clarification ... asking the right questions

As with the use of active listening skills and positive body language to encourage others to speak, clarification is another way of showing the other person that we are interested and listening carefully. Clarification involves asking questions in order to better understand what the speaker has said. Seeking clarification on what someone has said is more polite and respectful than merely saying "I don't understand you".

Seeking clarification

Example

Statement: "I am having a hard time getting clients to listen to my advice."

Clarification: "I am not sure I understand you completely. Are you saying that clients are not following your recommendations?"

To use clarification, we have to restate the message as we understand it, asking if our interpretation is correct. Use phrases such as "Do you mean that ...?" or "Are you saying that ...?"

Using clarification questions shows that we are genuinely interested in what we are being told, because we are taking the trouble to restate the speaker's point. Clarification should not be used too frequently, however, as the speaker may resent the constant interruptions.

Appropriate questioning techniques ... encouraging open dialogue

It is important for supervisors to know how to ask questions in a way that encourages staff to provide as much information as possible. They should be skilled in using 'open-ended' questions instead of 'closed' questions – this will help to avoid one-word answers and will encourage open dialogue.

Open-ended questions

Open-ended questions are questions that give respondents ample room to develop their response with any information they consider necessary.

Open-ended questions

Examples

- "Why?"
- "What do you think went wrong?"
- "How do you feel about this?"
- "When did it happen?"
- "Why do we do it this way?"
- "Who is affected by this?"
- "What alternative can you offer?"
- "What has been done about the stock-out of contraceptives?"
- "How will you handle that troubled employee?"

Open-ended questions cannot usually be answered with one-word responses, so this encourages staff to provide a more detailed answer. The supervisor then has a better understanding of the issue and is able to assist more effectively.

Closed questions

Closed questions are those expecting answers such as “Yes” or “No”. Closed questions can be used by supervisors to check facts, opinions and feelings. This kind of question does not invite others to give more information.

Closed questions

Examples

- “Did you solve the problem of the stock-out of contraceptives?”
- “Are you going to meet with that troubled employee?”
- “Did you like the training course?”

Questions for choice

These questions invite the other person to make a choice.

Questions for choice

Example

- “Do you want me to call X or will you do it?”

The advantage with this type of question is that some people like the idea of being able to choose. The disadvantage is that they can feel forced to make a choice or feel that they have to restrict themselves to the choices given.

2. Coaching ... enabling staff to learn, grow and work efficiently

An effective supervisor is someone who coaches effectively to improve quality of care. In a business setting, the definition of coaching has two aspects:

- coaching as an approach to management – in other words, how people carry out the role of being a manager
- coaching as a set of skills – for guiding employee performance to deliver results

For the purpose of the quality of care programme, the concept of coaching is fundamental to the role and approach of the supervisor as a leader. In this context, coaching is understood as a supervisor who acknowledges and develops staff abilities to achieve the best performance results. In other words, when the supervisor acts as a coach, staff members learn, grow and work efficiently.

Good coaching involves working with staff to develop realistic goals, action plans and timelines. The ‘coaching’ supervisor delegates, but also provides effective guidance and support to staff as they work towards achieving programme or institutional objectives.

The characteristics of an effective coach include:

- knowledge and competence in quality improvement methods and having the required skills
- the ability to encourage staff to learn new skills
- awareness of the importance of constructive feedback:
 - informs staff whether the Member Association or service delivery point is meeting quality standards
 - gives positive feedback as often as possible
 - avoids negative feedback but instead offers specific suggestions for improvement
- recognition that supervision can be stressful and knowing how to prevent or minimize stress among staff:
 - uses appropriate humour
 - observes participants and watches for signs of stress

- provides regular breaks during the supervision visit
- focuses on staff success instead of failure
- is patient and supportive
- provides praise and positive reinforcement
- has the ability to correct errors while maintaining staff self-esteem
- is a good listener and observer

To fully understand the role of the coach, it is helpful to compare the do's and don'ts of effective coaching. The effective coach involves all the staff in the quality improvement process and provides them with positive feedback. The ineffective coach is controlling, avoids involving staff and typically fails to provide positive feedback.

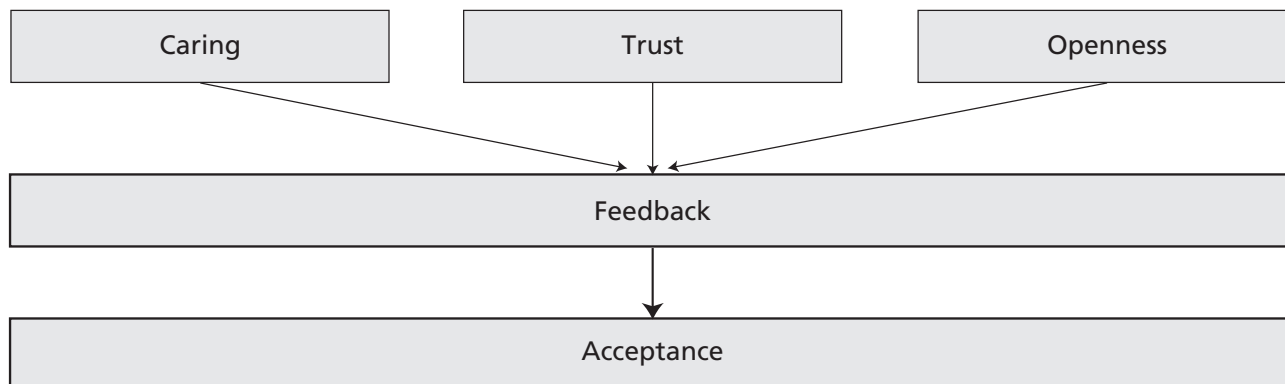
Effective coaching checklist: do's and don'ts	
<ul style="list-style-type: none"> • focuses on the practical • treats supervisors as colleagues • encourages working together (team player) • works to reduce stress • fosters two-way communication • is a facilitator of learning 	<ul style="list-style-type: none"> • focuses on the theoretical • maintains distance between themselves and staff (status is seen as above the staff) • creates distance among staff • often creates stress • uses one-way communication • acts as the authority or the only source of knowledge

Giving feedback ... essential throughout the supervision process

Providing performance feedback means letting service providers know what was perceived about their performance. It is about acknowledging what people have done and how they have performed.

The coaching supervisor provides ongoing feedback to service providers. When a task is done well, they give positive feedback; when a task needs improvement, they give constructive feedback. It is important to give specific feedback, and it is important to give feedback as near as possible to the time of the performance. The coach provides feedback about the work and behaviour of the team and individuals within the team. Feedback is essential throughout the supervision process – this includes before, during and after supervision visits and performance assessments. Many supervisors may find it difficult to acquire the skill of giving performance-enhancing feedback. However, whatever issues of performance are involved, a good coach will always remember to acknowledge something worth acknowledging.

The process of giving and receiving feedback, communicated in an appropriate way, can achieve results. The supervisor therefore needs to ensure optimal conditions so that feedback can be given and received effectively. The process of feedback can be threatening or damaging if the following conditions are not addressed:



Caring

The supervisor should show that she/he genuinely cares for the service providers and wants to give them support – both emotional and intellectual – to improve the situation and to improve individual and team performance.

Trust

A key condition for effective feedback is that people should feel safe and not undermined by the feedback given. Supervisor and service provider should have a relationship in which the service providers feel that they are supported by the supervisor and that the supervisor provides feedback sensitively.

Openness

Feedback should be open and honest. The supervisor needs to create an environment in which service providers can be open with their thoughts, feelings and actions. Clarity and transparency about how feedback will be used by supervisors is also important.

Acceptance

Feedback can only be effective when every member of staff feels truly accepted by his or her supervisor and colleagues during team or individual feedback.

Guidelines for giving verbal feedback to individuals and teams

When providing feedback:

- be timely – give feedback soon after the observation
- start on a positive note
- take responsibility for your own feedback. Speak for yourself, not for others; so always give feedback in 'I' form
- be specific – describe specific situations and actions
- explain the effect the situation or the actions have on other people
- be descriptive but don't personalize. Describe the consequences of the situations and actions but do not judge the person. Direct the comments at actions and situations that need to change
- be accurate so that feedback leads to helpful insights, not to confusion or anger
- give information on controllable matters, so that it relates to situations and actions that service providers can change
- give time and space for reaction
- don't give too much feedback at a time
- check whether the other person has understood your feedback
- welcome questions and respond to them
- remember that staff may be uncomfortable receiving feedback, even if you are handling it in the best possible way
- show your appreciation for the attention given to your feedback, whether people agree or disagree

Effective versus ineffective feedback

Example of effective feedback

Effective feedback is descriptive, specific and accurate:

"When you inserted the IUD, you did not tell the client what to expect. I saw her wince and tense up, making it difficult for you to gain her cooperation during the procedure."

Example of ineffective feedback

Ineffective feedback is personalizing and non-specific:

"You always seem to be in such a hurry that you completely ignore the client's needs."

After giving feedback:

- follow up on whether the service provider(s) acts on the feedback
- support her/him/them in achieving improvements based on your feedback
- praise improvements

Guidelines for receiving feedback

In addition to giving feedback, supervisors also receive feedback from those that they supervise.

When receiving feedback:

- let the other person say as much as possible without interrupting
- remember that feedback is not about you as a person but about your work or your behaviour and the effect it has on others
- ask questions to clarify what you have heard before you react
- look first at areas of agreement
- give yourself some time to think; don't try to solve everything on the spot
- don't minimize feedback
- don't agree if you think differently, but be prepared to discuss the issue
- don't get other people involved

The external and internal supervisors should give feedback to each other on the process of the supervision, and on their communication and collaboration with the Member Association and the service delivery point.

Dealing with performance issues

At times, members of staff do not perform according to the quality of care standards, and action plan activities are not implemented as planned. A situation like this is one of the biggest challenges for supervisors.

Coach approach to dealing with performance issues

The effective coach does not wait for performance issues to develop into bigger problems. When there are gaps affecting quality of care, the coach approach is to work with the individual or the team to identify the causes. The emphasis is on coaching to improve – working together to clarify expectations, developing plans that target improvement, and providing support to make sure that improvement occurs. Coaching is a more effective practice to encourage discussion to identify solutions than simply dictating solutions to staff. When staff take ownership of the process to improve performance, they will be more motivated to implement solutions to the problems.

Delegating

Delegating means entrusting others with assignments and responsibilities.

Coach approach to delegating

The coach delegates as much as possible for two simple reasons:

- the supervisor cannot solve all the problems identified in the self-assessment process or the action plan, or resolve all quality improvement issues
- staff feel motivated when they are given responsibility and ownership for solving problems. The coach aims to maximize the available resources and increase productivity

The effective coach delegates meaningful responsibilities and projects, and not just busy work tasks. She/he provides the necessary support, resources and accountability that members of staff need to do their job well.

Mentoring and developing staff

Mentoring and developing staff involves making an effort and showing interest to assist staff to develop their skills and capabilities. It involves teaching, encouraging and challenging staff to do their best.

Coach approach to mentoring and developing staff

Supportive supervisors thrive on working with their employees to help them develop their skills and capabilities. They provide challenging opportunities for staff, and frequently exchange feedback to trigger learning and growth. They take an interest in employers' careers and job situations, and encourage training and other learning experiences.

From the coach perspective, the more capable employees become, the more productive and self-sufficient they are. Developing strong human resources is a source of pride, not a source of insecurity.

3. Working with teams ... the vital role in building team work

Supervisors have a key role in building team work. The first step to successful team building is learning about people. Although understanding people is a lifelong task, supervisors can learn some basic points fairly quickly that will go a long way to help them with team building. It is much easier and more effective if senior management is involved, so supervisors should keep them engaged and informed about the progress made at Member Association and service delivery point levels.

To work well in teams and get things going, supervisors need to understand the team concept. Supervisors cannot play favorites by giving some individuals easier jobs or disciplining them less for failure to meet standards. They need to praise everyone's good work, but also need to use good skills when making corrections. Supervisors must recognize that people are different in their level of skills, past experiences and motivation. They must also be aware of differences in maturity levels among workers as well as in their ability, and even willingness, to work together as a team.

One basic fact is that people want recognition for what they do. By giving recognition for the quality of group work, supervisors can make individuals feel proud of being a member of the group which in turn will contribute to team building. Learning to say "That looks good!" is simple, but essential to encourage success and can be applied to individual or group accomplishments. Staff are more likely to repeat an action that makes them feel positive, and it is very positive when someone says they've done a good job – provided, of course, that it is the case! The first step to working well with teams and helping to motivate them is to understand the concept of a team!

Team work and the quality improvement process

Team work is a frame of mind, a belief and a commitment. It represents a commitment to a specific and agreed goal, as well as to a group, meaning that the group's goal is equally or more significant than that of individuals in the group, at least in the short term. Team work also entails a belief that the goal is worthwhile. The supervisor must believe in the goals of the Member Association and service delivery point staff, primarily because they were involved at all stages of the quality improvement process. They have shared in its formation, participated at the self-assessment exercises and put together an action plan to meet it. In addition, they offer energy and expertise to reach quality of care standards. Staff implement the action plan and are confident that it is the correct course. As they were involved – and they understand how they planned to meet the quality of care standards, implement the action, finish the products or whatever it is they are committed to – they have a proprietary interest in the goal. All these factors simplify the process.

Everybody should be treated as a member of the team ... the value of shared thinking

Supervisors should treat everybody as members of the team at all times, which can prove difficult. They begin by recognizing them as individuals, with individual worth as well as unique skills and abilities which can be combined with other team members, with differing skills, to make an effective team. Further, they should be valued for more than just their skills and experience. The main goal is for staff members to realize that they have a mind – a thinking capability that can discover how to get things done. When they get together with others with thinking capabilities, the supervisors will have a team which is far more able to solve problems than any person alone.

Effective team meetings ... their role in the quality improvement process

Both internal and external supervisors need to work with teams and hold team meetings. Supervisors need to work with the team in a spirit of equity, transparency and openness.

Team meetings are needed to:

- gain a better understanding of the process of work
- ensure the dissemination of updated information
- provide feedback on the quality improvement process
- solve problems and find solutions to improve quality of care

As a supervisor in the quality improvement process, your goal is to help staff discuss and solve problems related to quality improvement and issues raised by them. In order to improve quality, staff will work as a group or team to address problems. To make sure that staff meetings are effective, a supervisor needs to:

- foster a safe environment for expression and discussion
- encourage different levels of staff to participate and work together
- create a climate for different types of people and personalities to work together
- manage and solve conflicts
- regularly assess, monitor and evaluate staff meetings

To improve the effectiveness of team meetings, the supervisor should be aware of the following aspects and take the following action:

- establish goals
- identify what needs to be done
- prepare an agenda
- decide who will be involved
- set an appropriate climate for the meeting
- set clear ground rules and agreements about how the meeting is facilitated, such as not speaking at the same time as another person, and listening to each other
- assign responsibilities and implement what has been agreed on
- follow principles of good time management: when to hold the meeting, how long it should last and make sure the meeting runs to time
- promote constructive feedback and self-assessment
- disseminate information speedily and regularly
- encourage different types of workers and personalities to work together
- encourage all levels of staff to participate fully
- monitor and evaluate regularly how meetings are conducted
- lead the way in discarding traditional roles: for example, rather than the supervisor always acting as meeting chair, all staff can take turns in this role

Physical environment

Issues to consider when choosing a venue for team meetings include:

- temperature
- lighting
- noise
- seating arrangements (enough chairs facing each other)
- ventilation
- toilets

Objectives

The supervisor's task is to ensure that:

- everyone understands the objectives of the team, and everyone is committed to the objectives
- the team regularly reviews its performance against objectives
- team objectives are related to the quality improvement process and quality of care standards

Decision making

The supervisor's task is to:

- involve everyone when making decisions
- reach consensus in the team on most issues
- use differences of opinions to improve the quality of decisions

Accountability and commitment

The supervisor's task is to:

- make each team member feel committed to the team
- make members feel responsible for the results of the team
- give team members collective ownership

Communication

The supervisor's task is to make sure that:

- all members know where the team is heading
- all communication in the team is relevant and timely
- effective communication takes place at all levels

Involvement

The supervisor's task is to:

- involve all team members in achieving results
- make individual team members interested and involved in team issues

Creativity

The supervisor's task is to:

- encourage creativity and innovation
- motivate team members to be receptive to new ideas and suggestions from other team members
- focus on improvement and change

Atmosphere

The supervisor's task is to:

- develop a good working atmosphere
- keep the team spirit high
- create a safe environment where individuals can express their opinion without the risk of being humiliated or abused

Feelings

The supervisor's task is to encourage:

- people to express their feelings without fear
- sensitivity within the team to each other's needs and concerns
- empathy and understanding among team members

Trust

The supervisor's task is to facilitate:

- an open exchange of views
- a climate in which individuals trust each other

Valuing differences

The supervisor's task is to:

- treat all team members as equals
- use differences of opinions to improve the quality of decision making
- value different needs, styles and personalities

Review the process

The supervisor's task is to:

- regularly review with the team whether things are going well
- work with the team continuously to find ways to improve the team process
- involve all members in reviewing the team process

Roles and responsibilities

The supervisor's task is to ensure that:

- all team members know how they can add value
- all roles and responsibilities of team members are clearly defined and understood
- all individuals are aware of their role in the team

Improving team work

There is a simple model for teams to work effectively which includes four main areas. Each team has:

- a common purpose or goal
- clear roles and tasks
- decision making procedures
- trusting relationships among team members

These four areas are listed in order of priority. So, in order to facilitate a team, the supervisor needs to address the goals first, then the roles and tasks, followed by the decision making procedures and finally the personal relationships within the team.

Goals

All team members need to understand and accept the team's objectives.

Roles

All team members should understand what is expected of them.

Procedures

All team members should know how decisions are made and in what ways problems are solved. An effective team works with defined procedures to come to a unanimous decision so that action can be taken.

Trust

All team members should feel safe and supported.

Aspects of teamwork

A group of people does not necessarily make a team. A team can be defined as a group of individuals working together to a common goal, with a high degree of interdependence.

To make a team work, the supportive supervisor must look at different elements:

- i. developing a team spirit
- ii. working as a team
- iii. team approach to problem-solving

i. Developing a team spirit

As a supervisor you can do the following to develop a team spirit:

- select a group of staff for the goal to be achieved; the larger the team, the harder it is to manage. If you are at a site of fewer than 10 people, include everyone on the team
- work with the team to develop a common goal that is known by everyone
- nurture a sense of belonging, and focus on what the team members have in common
- make all team members feel that they have something to contribute
- help team members work together harmoniously and efficiently to solve problems
- encourage members to set aside some of their personal goals and desires for the benefit of the team
- treat team members fairly and equally
- structure the work of the team in a simple and logical fashion; make sure it is distributed fairly
- manage the team efficiently so that work proceeds in a timely manner
- create an environment that supports and rewards openness, creativity, trust, mutual respect and a commitment to provide high quality health services

ii. Working as a team

Working as a team means:

- team members consulting each other
- team members helping each other
- team members complementing each other
- team members encouraging and motivating each other

It is the role of the supervisor to facilitate the process in all four dimensions of team work. When a team does not function well, the cause may be that the supervisor is not paying attention to one or more of these dimensions. For each dimension, the following strategies can be used by the supervisor to support the effectiveness of the team:

- encourage discussion
- ensure that all staff understand that their ideas are equally important and relevant
- encourage different levels of staff to work together
- lead the way in discarding traditional roles in teams
- encourage lower level staff to participate fully
- model a respectful attitude towards all staff
- encourage different types of staff and personalities to work together
- negotiate, harmonize and compromise. Use people's sense of humour to lower any tensions in the group.
- remain calm and put difficult situations into a broader context
- use positive feedback

As a supervisor, what can you do to encourage team work when you are not there?

Teams can work independently if team members:

- are aware of their strengths and weaknesses
- are able to set their own goals
- are able to act according to those goals
- take responsibility for their action
- are able to avoid opinions and behavior that block change

As a supervisor this means that you need to support staff in helping them to understand their own individual strengths and find support in their colleagues.

Self-directed and self-managed teams ... some definitions

Confusion about teams in the workplace sometimes arises due to a loose definition of terms. Here we specify what a few key words and phrases mean.

Work group

A group of people working together. Example: the mechanics in an auto centre.

Team

A group of people working together towards a common goal.

Self-managed team

A group of people working together in their own ways towards a common goal which is defined outside the team. Example: James Corporation. It manufactures cardboard boxes as defined by executive leadership. Team does its own work scheduling, training, production, rewards, recognition, and so on.

Self-directed team

A group of people working together in their own ways towards a common goal which the team defines. Example: as above, but the team also handles compensation and discipline, and acts as a profit centre by defining its own future. Before anyone would try to implement a self-managed (and subsequently self-directed) team, they should know about and be able to articulate the expected benefits. A mature self-managed team, when compared to a typical hierarchical management, would have measured results showing the following.

iii. Team approach to problem-solving

In order for the staff to work together, the supervisor needs to facilitate a process for when problems need to be solved by the team. There are many ways to solve problems. One way to facilitate problem-solving is through a peer support process, in which staff contribute their own expertise and experiences. This model has some advantages:

- it is very practical
- it can clarify problems and dilemmas in the group
- it leads to more openness among group members
- it enhances team spirit
- it gives ownership of the solution to the team

The problem-solving process goes through the following stages:

Phase 1 – Introduction

This is the starting point:

- each member introduces a problem or challenge she/he faced during an earlier quality of care training activity
- write an inventory of all problems on a flipchart

Phase 2 – Selection of problem

A problem is chosen based on the following criteria:

- the problem is recognizable to other members of the group
- each group member presents a problem in turn

Phase 3 – Analysis of the problem

The group member reintroduces the problem, but does not reveal how she/he dealt with it:

- the group member introduces the problem in the present time
- the group asks searching questions
- the group members ask more questions; without interpretation, judgment or suggestions and without jumping to conclusions

Phase 4 – Solution to the problem

These are the steps towards reaching a solution:

- the group discusses and makes sure they all understand the problem
- all group members state how they would solve the problem
- the member who introduced the problem explains how they dealt with the problem themselves
- the person who introduced the problem reflects on the contributions made by team members

The supervisor's task is to:

- make sure that the causes of problems are clearly identified before solutions are implemented
- consider alternative solutions before agreeing action
- enable the team to use problem-solving techniques

Developing teams ... some lessons learned

To create a team, a demand for performance is more important than team building exercises. You can put a team together and train them in team work for weeks, but they will not be a team until they have a common goal and a common understanding of the need to perform. First comes the action plan; next come the tasks needed to carry out the plan; then, finally, teams are formed to do their tasks.

- Team basics are often overlooked. Team basics are size, purpose, goals, skills, approach and accountability
- Teams at the top are most difficult. Executives have complex, long-term challenges as well as heavy demands on their time. They got where they are by being tough
- There is no need to throw out the hierarchy. Teams are the best way to integrate across structural boundaries as well as being the most effective way to design and energize core processes
- Teams allow performance and learning at the same time. There is no better way to become a learning organization than to have a team-based structure which thrives on people learning from peers. This learning endures.

4. Dealing with conflicts ... reconciling differing viewpoints

Sooner or later, all supervisors will have to deal with conflict. Conflict is not inherently bad – it simply stems from differing viewpoints. Since no two people view the world exactly the same way, disagreement is quite normal. In fact, when someone agrees with you all the time they are probably telling you what you want to hear, or what they think you want to hear, not what she or he actually believes.

Disruptive meetings ... conflict resolution tactics

Conflicts in meetings can be very disruptive, but they can also be very helpful. It is important to remember that conflicts usually stem from disagreements. If the person in disagreement is raising valid questions, it may benefit the group to address the issues that are being presented. In fact, by listening to them, supervisors may gain valuable insight into what is and what is not working within the organization. However, if the person continues past the point of disruptiveness, specific steps should be taken. Supervisors can use the following conflict resolution tactics when meetings get 'out of control'.

Resolution tactics

Examples of conflict resolution tactics

- Find some 'grain of truth' in the conflicting positions that can be built on.
- Identify areas of agreement in the two positions.
- Defer the subject to later in the meeting.
- Document the subject and set it aside to discuss at the next meeting.
- Ask to speak with both parties after the meeting or during a break.
- See if someone else in the meeting has a response or recommendation.
- Present your view, but do not force agreement. Let things be and go on to the next topic.
- Agree that the person has valid points and there may be some way to make the situation work for both parties.
- Create compromise.

Conflicts in negotiations ... tactics to increase the chances of success

When a supervisor is facilitating negotiation among staff, it is important to remember that each party is seeking to make its views prevail. No-one wants to feel like they are giving away something for nothing. In fact, most conflicts arise because one party feels like the other party is taking advantage of them. In order to avoid these types of situations, here is a list of tactics that the supervisor can use to increase the chances of a successful negotiation.

Negotiation tactics

Examples of negotiation tactics

- Avoid 'defend-attack' interaction – this is always unproductive.
- Seek more information – ask a lot of questions.
- Check understanding and summarize – make sure that you understand everything.
- Try to understand the other person's perspective – communication is more than just listening, so try to see it their way.

Rules for disagreeing diplomatically... reaching a compromise

Regardless of the type of conflict the supervisor must deal with, there are several general rules of thumb to be followed to bring harmony to a volatile situation. These are:

- reflect understanding of the other person's position or opinion: "I feel, think, want" and so on. This says "I am listening to your opinion and I take your opinion into account before I state mine"
- let the other person know that you value them as a person even though their opinion is different from yours. "I understand (appreciate, respect, see how you feel that way)" and so on. This says "I hear you and respect your opinion"
- state your position or opinion. "I feel, think, want" and so on. This says "I don't agree, but I value you – so let's exchange ideas comfortably, not as a contest for superiority"

To become an effective conflict manager requires a lot of practice. Just remember that the goal is to reach a compromise that both parties can live with, as well as be happy with. In other words, find a way so that both parties can walk away feeling like a winner!

Section 4

The external supervision process ... technical, communication and management aspects

During a supervision visit the external supervisor demonstrates technical as well as communication and management skills. The supervisor transfers knowledge and skills, and facilitates problem-solving by the team. The supervisor uses an inclusive style of communication and makes use of supervision instruments to document what is observed during the visit.

Activities to be conducted before the supervision visit ... preparation checklist

1. Planning and organization ... first steps

The supervision activity must be well planned. If it is not, time will be wasted and the visit will accomplish little. The supervisor should work with service delivery point managers or coordinators to ensure a well planned supervision activity.

Set objectives for the visit ... general and specific

It is crucial to set objectives for the supervision visit so that both the supervisor and the service delivery point team know what to expect and how to prepare.

General objectives for the supervision visit might be to:

- monitor quality of care action plan progress
- support the service delivery point staff to improve performance in their management of supplies, medicines and consumables

Specific objectives might be to:

- identify obstacles and constraints for action plan implementation
- determine areas that need support for quality improvement
- provide guidance to service delivery point staff in organizing a physical inventory of supplies, medicines and consumables
- review the inventory records and ordering procedures with service delivery point staff

Decide on activities to undertake while on site ... making the most of the visit

The external supervisor should think through exactly what she/he will do while at the service delivery point, and inform the service delivery point manager or coordinator of the proposed activities. Again, this will help the supervisor and the service delivery point team to make the most of the visit.

Specific activities for the supervisor might be to:

- hold an information and planning meeting with the service delivery point manager, coordinator or internal supervisor
- hold a meeting with service delivery point staff to monitor quality of care action plan progress
- observe infection prevention practices and procedures
- observe a counselling session
- examine supplies and equipment
- hold discussions with clients
- examine client records
- hold a meeting with staff to address specific problems
- review quality of care activity reports and service statistics sent to headquarters by the service delivery point

Examples of issues to review are to:

- identify trends in the delivery of services
- identify whether there are changes in the client profile
- examine whether the number of clients has changed (increase or decrease)

2. Review the quality of care supervision tools that will be used during the visit ... familiarization and preparation

Before the visit it is important to review the service delivery point action plan, the quality of care standards and any other areas that need improvement. This review will guide the supervisor in selecting the quality of care supervision tools (for example, observation checklists) that she/he will need during the visit. It is crucial that the supervisor is familiar and comfortable with the use of these tools before the visit.

3. Make all administrative preparations ... ensuring a smooth and productive visit

All the administrative arrangements should be completed in advance to ensure a smooth and productive trip. Supervisors will need to:

- gather any documents necessary for the visit – for example, observation checklists, action plan, guidelines and so on
- notify the service delivery point manager or coordinator about the details of the visit including the date, the amount of time needed, people she/he needs to work with and the activities that will be conducted (such as meetings and observations)
- make logistics arrangements including transport, fuel, money and travel documents

Activities to be conducted ... during the supervision visit

1. Hold a meeting with the service delivery point manager and staff ... first steps

The first step an external supervisor should do when arriving on site is to meet with the service delivery point manager or internal supervisor and staff. This meeting can be brief and should not disrupt daily activities. The purpose of this meeting is to share the objectives of the visit and to plan how the visit will take place. At a small service delivery point, all staff should participate. At a larger service delivery point, the internal supervisor, the unit chief and the unit staff should participate.

During the meeting, the external supervisor should review the strengths and problems identified during the previous visit. Questions should be asked about progress made towards achieving the action plan, whether previously identified gaps are being resolved and whether any new problems have surfaced. The supervisor should ask about what has gone well for the service delivery point.

2. Observe service provision and client–provider interaction ... the core of health service supervision

Observation of service provision is the core of health service supervision. The critical areas to observe include:

- welcome of and communication with clients
- technical competence of providers
- infection prevention practices

Clinical observation is best done by using a supervision checklist to note how the provider is performing in comparison to pre-set performance standards.

3. Examine client records and clinic statistics ... basis of good decision making

It is important to examine client records and clinic statistics periodically to make sure that they are well kept and up-to-date. This will assist those who use the records to:

- make good clinical decisions about medications, procedures and treatments to recommend to clients
- make good decisions about client follow-up
- know the client population and make appropriate programme decisions
- provide proper counselling to clients
- evaluate the clinical competence of providers
- evaluate the quality of services offered at the site

Clinic statistics represent a numerical picture of clinic activities. They can illustrate changes in monthly or annual service delivery trends, which may provide a measure of whether services are improving or not. Statistics should be reviewed with the staff, and the supervisor should make sure that the staff understand why they are collecting these statistics and what they mean.

4. Observe the providers' needs standards ... observation guidance

In Section 5 – Linking supervision with the IPPF quality of care standards – you will find guidance on how to observe the quality of care programme standards on providers' needs which can be used during the supervision visit and sessions.

5. Observe working conditions ... closely related to performance and results

Staff performance is often closely related to working conditions at the site. Usually, the better the conditions, the better the performance and results. Specific working conditions to be observed include:

- the general physical environment (for example, cleanliness, ventilation)
- clinical equipment and supplies
- furniture
- availability of information, education and communication materials
- organization of clinic space
- size of inventory
- condition of inventory

The external supervisor should listen carefully to any concerns staff have about working conditions to determine whether conditions are affecting their ability to provide high quality services.

6. Discuss services with clients and other users ... important viewpoints

An important aspect of performance and quality improvement is the viewpoint of those who use the services. The external supervisor should always reserve time to find out what clients and other community members think of the services.

7. Help staff conduct self-assessment ... identifying and finding solutions

As the service delivery point staff participated in the self-assessment process by identifying and finding solutions to quality of care gaps, the external supervisor should assist staff to integrate self-assessment as part of their ongoing work. The supervisor should encourage staff to continuously ask themselves the following questions:

- In what areas are we obtaining positive results?
- In what areas are the results not so positive?
- Which members of staff should be congratulated for a job well done?
- What has this person done that can serve as a good example for others?
- What can be done to strengthen those areas that need improvement?

Setting up ongoing self-assessment at a service delivery point will allow for better problem-solving in the periods between external supervision visits.

8. Meet again with staff ... summarize the visit

After observing, discussing and meeting with staff and clients, the external supervisor should meet again with staff in order to:

- acknowledge progress made in action plan implementation since the last visit
- identify priorities and discuss any issues that need immediate attention
- discuss available resources for problem-solving
- establish a plan for addressing priority issues
- discuss follow-up activities for the service delivery point internal supervisor to undertake

9. Establish a follow-up plan ... leave on a positive note

Finally, the external supervisor should meet with the internal supervisor to establish a follow-up plan. This plan will identify the names of people responsible for specific activities and dates by which those activities should take place. This plan should then be referred to at the introductory meeting with staff during the next supervision visit.

In completing the visit, the external supervisor should:

- thank all staff for their dedication to performance and quality improvement
- schedule the date for the next supervisory visit, if possible
- complete a supervision register or notebook, noting principal observations, strong points, areas requiring improvement and recommended action. This notebook should stay at the site. The internal supervisor should read and sign the notes to acknowledge the external supervisor's visit
- leave on a positive note so that the service delivery point staff are left with the impression that they are doing good work and that any problems identified can be resolved

Activities to be conducted after the supervision visit ... follow-up phase

The external supervisor's job is not complete when she/he leaves the service delivery point. After the visit comes the follow-up phase. This aspect of the supervision process is just as important as planning and conducting the on-site visit.

1. Submit a supervision report ... recommendations and plans

The supervision report is one way to summarize and establish that a supervision visit took place. The report should be completed immediately after the visit and should complement the notes left at the site. The format of the report will depend on what is required by the system. As a minimum, the report should include the follow-up plan established with the service delivery point staff and the recommendations made by the external supervisor. The supervisor should ensure that the report is submitted to the required people, which will usually include the service delivery point, the executive director, and programmes and services managers.

2. Debrief the appropriate management staff ... information sharing

There are often other staff who are responsible for or interested in what is happening at the service delivery point. The external supervisor should ensure that they are properly briefed about the service delivery point activities and progress. Keeping as many people informed as possible can only help when mobilizing resources for problem-solving and site improvements.

3. Problem-solving ... vital aspect of follow-up

Perhaps the most important aspect of follow-up is to make sure that any action identified for solving quality of care gaps is carried out. The external supervisor should not just wait until the next visit to see if the situation has improved. She/he must be an active partner with the service delivery point to make sure that the recommended action is implemented as soon as possible. Some actions may need to be carried out by the external supervisor (for

example, intervening with the regional supply system to solve a logistics problem). The external supervisor may delegate actions to other managers who are better placed to address an issue (for example, increasing staffing levels at the site). Actions identified for responsibility by the internal supervisor or other service delivery point staff should be checked periodically to see how much progress has been made and to provide encouragement. If possible, contact can be made by phone, or another brief visit may be needed to check on progress.

4. Chart progress of quality of care action plans ... use quality of care monitoring forms

The service delivery point action plans and progress reports should be used as supervision tools to chart progress in action plan implementation. Internal and external supervisors can work alongside Member Association and service delivery point teams to review these documents, measure progress, identify constraints and discuss the action to be taken. When necessary, action plans should be revised to correspond with the changing needs of the Member Association and service delivery points.

Supervisors should use the quality of care action plan monitoring forms (see pages 32 and 33) to record the results of discussions, facilitate follow-up and to document the ongoing process of action plan implementation.

- The Service Delivery Point Action Plan Monitoring Form on page 32 can be used by the external and internal supervisors to document action and interventions that are completed, those in progress and those not yet completed. The form can also help to identify the type of technical assistance or support needed.
- The Member Association Overall Action Plan Monitoring Form on page 33 can be used in a similar way by the Member Association management team and the regional quality of care advisor.

The Service Delivery Point Action Plan Monitoring Form

Service delivery point:

Date:

Supervisor:

Action/interventions	Progress to date (tick as appropriate)		Technical assistance/ support needed	By whom	By when	Additional information/comments
	Completed	In progress				
		Not done				

The Member Association Overall Action Plan Monitoring Form

Member Association:

Date:

Supervisor:

Action/interventions	Progress to date (tick as appropriate)		Technical assistance/ support needed	By whom	By when	Additional information/comments
	Completed	In progress				
		Not done				

Section 5

Linking supervision with the IPPF quality of care standards

Supportive supervision ... standards on the needs of providers

As previous sections have emphasized, a key task of supervisors at the service delivery point level is to assist the implementation of the quality improvement process and to support staff to meet the rights of clients by providing high quality sexual and reproductive health care. An important element of supporting service providers is to ensure their own needs are met. Meeting the needs of providers is essential for providers, in turn, to meet the rights of the client. It is therefore important for the quality of care standards on the needs of providers to be used by supervisors as a reference when providing supportive supervision.

In this section, each of the 10 needs of the provider are linked to the quality of care standards and criteria, as well as the supervision process.

The self-assessment is, in itself, a way of providing supportive supervision because of the participatory way of working with the questionnaires as well as the development of action plans. By working in this way you are taking the opinions of all staff seriously and giving them ownership over the programme.

Providers' need for training

Standard

The Member Association has systems in place to identify and meet the training needs of service providers.

Service providers must have access to the knowledge and skills needed to perform all tasks.

Supervisors therefore have the responsibility to work with staff to identify training needs and to take appropriate steps to ensure that necessary training is provided.

Training is an integral part of quality of care. Staff cannot deliver quality services or meet all the necessary standards if they do not have the necessary skills to carry out their work effectively. This means that training and supervision are closely linked, as supervision visits can assist staff to:

- identify their learning needs
- identify training priorities
- decide on a training strategy

The internal supervisor can assist staff to identify their training needs by discussing the outcomes of the service delivery point action plan. The internal supervisor is also responsible for keeping staff informed of any new clinical procedures or services, and to provide training or orientation as needed. The internal supervisor should keep track of which staff members regularly participate in training events to acquire new skills or to maintain or improve existing skills. The external supervisor should keep the internal supervisor updated about new developments and procedures.

Once the internal supervisor has worked with staff to identify their training needs, she/he will select the appropriate training mechanism to meet those needs. There are various training routes:

- off-site training
- whole site training
- on the job training
- cascade training

The training can be conducted by:

- one of the service delivery point staff – this is most feasible when the content area is not a new skill for all staff, but one in which a new staff member requires training (for example, infection prevention)
- a local trainer – if the content area needs external expertise, the supervisor should try to find someone nearby (at the Member Association or another service delivery point) who has the skills, experience and training ability
- a distance trainer – if it is not possible to find a skilled local trainer then the services of a distant national, or sometimes international trainer may be required.

The internal supervisor should also prioritize training needs with the help of the external supervisor. Issues to be considered when deciding on priorities are:

- costs
- importance of the training for service delivery
- number of staff who will benefit from the training
- impact on quality of services

The external supervisor is responsible for supporting the internal supervisor to select the appropriate training mechanism and prioritize needs. Their supervision visits can also be an opportunity to provide follow-up to training activities. As external supervisors usually supervise more than one service delivery point, they can also establish whether other service delivery points have the same needs and whether joint training can be organized. It is important for the external facilitator to discuss staff training needs with the Member Association management so that they can be involved in the overall training strategy.

Supervisors should remember that training activities should be placed within the context of other staff and programme needs. They should remember that:

- training does not solve all problems
- training does not compensate for poor supervision
- training cannot help a service provider who is unsuited or unwilling

After training activities the internal supervisor should ensure that:

- trainees apply their new knowledge and skills in practice
- facilities and supplies are adapted to the new skills and needs of the trained staff
- processes and procedures are put in place to apply the new knowledge and skills
- the training is shared with other relevant staff members
- further training needs are discussed and addressed

Providers' need for information

Standard

The Member Association has a system in place to meet providers' information needs.

Service providers need information on issues related to their duties – including updated technical information.

In order to maintain and improve quality of care, staff members need to be updated on current and new information related to their work. Addressing this need for information includes providing information and ensuring that it is understood by staff. Information can be given verbally and in writing.

To provide information in supervision it is important to:

- keep staff updated of new procedures and technologies
- ensure that information materials are made accessible to all relevant staff
- ensure through discussion that materials are read and internalized

The task of the external supervisor is to provide the internal supervisor with appropriate updated materials. This includes materials that are sent to the Member Association by IPPF or other international organizations, as well as national materials, including documents produced by the Member Association. Some materials may require translation or adaptation to suit the needs of service delivery point staff. For the consistency of the programme and

services, the external supervisor should inform the internal supervisor about any new activities and developments of the Member Association and other service delivery points.

The internal supervisor should copy the materials, if necessary, and/or circulate them among all relevant staff members. To ensure that materials are accessible to staff, the internal supervisor should establish an 'information point' – a dedicated cabinet, shelf or table – where staff can easily retrieve materials. The internal supervisor can promote involvement of staff to internalize the information provided. She/he can do so by:

- promoting discussions and organizing team meetings to discuss the material
- giving staff time and responsibility to read and discuss new information and literature

Resources

The following IPPF technical publications should be made available and discussed at the service delivery point:

- Statements by IPPF's International Medical Advisory Panel
- IPPF Medical Bulletin (quarterly publication)
- IPPF Medical and Services Guidelines for Sexual and Reproductive Health Services (2004)
- IPPF youth publications
- IPPF HIV publications

Providers' need for infrastructure

Standard

The Member Association has appropriate and well organized service facilities and activities.

Service providers need to have the appropriate physical facilities and organization to provide services of an acceptable quality at clinical and community levels.

Supervision should address two features in relation to infrastructure:

- physical conditions at the service delivery point
- organizational procedures

The self-assessment and the implementation of the service delivery point plan of action contribute to addressing constraints in the infrastructure of the service delivery point and will facilitate ideas about how problems can be solved.

Physical infrastructure

The internal supervisor should:

- discuss with staff how the physical working environment should be arranged so that the available space is properly utilized for efficiency and quality of care
- discuss with staff any constraints in the physical infrastructure and ways they can be addressed
- advocate for new equipment at headquarters level through the external supervisor

Organizational infrastructure

The internal and external supervisors should:

- help staff to determine how client flow can be improved
- develop a system so that the waiting room is not overcrowded at certain times of the day or the week
- set clear responsibilities and duties for all staff including tasks and activities

The external supervisor should liaise with headquarters if organizational issues need to be followed up.

Providers' need for supplies

Standard

The Member Association has a system in place to meet providers' needs for an efficient logistics management system that ensures the optimal range, quantity and quality of commodities at the appropriate time and place.

Service providers need continuous and reliable supplies of the contraceptive methods and materials which are required for providing family planning and other sexual and reproductive health services at appropriate standards of quality.

The internal supervisor should work with relevant staff members to:

- discuss how to put the systems in place which are required to provide supplies and commodities effectively
- establish priorities for supplies
- forecast the commodity needs of the service delivery point
- discuss proper storage of commodities and supplies

The external supervisor should support the internal supervisor by:

- promoting effective logistic and supplies systems
- discussing proper storage of supplies and commodities
- liaising with headquarters on ways to improve the provision of commodity suppliers
- giving guidance on how supplies can be distributed effectively
- discussing ways that local conditions can be improved

Providers' need for guidance and providers' need for back-up

Standard

The Member Association has a system in place to meet providers' needs for back-up and guidance.

Service providers need clear, relevant and objective guidance. This guidance should be in the form of written guidelines, working tools and effective supervision.

In addition to the quality of care standards which form the basis for the quality improvement process, Member Associations and service delivery points need other written guidelines and protocols to ensure the quality of their work. The role of the internal and external supervisors is to make standards and guidelines accessible to staff and support them to work accordingly.

The internal supervisor can do this by:

- organizing orientation meetings for staff to discuss guidelines and standards
- ensuring that all guidelines and standards are available for all staff. They should not be locked up in an office but made accessible to all in the library, a reference cabinet or other information point
- observing whether staff are performing according to the standards and guidelines and, when necessary, discussing performance individually or within the team. The supervisor should identify together with the staff why there are shortcomings and how they can be solved, through training or other ways
- promoting collaboration among staff to support each other in working towards quality of services

The external supervisor should support the internal supervisor by:

- making sure that updated guidelines and protocols are made accessible to the internal supervisors
- discussing ways to supervise the application of standards and reviewing guidelines with internal facilitators and staff

Providers' need for respect and providers' need for encouragement

Standard

The Member Association has a system in place to meet providers' needs for respect and encouragement.

Service providers need stimuli to develop their potential and creativity. Their motivation and commitment are essential for successful sexual and reproductive health services. They also need recognition from supervisors of their competence and potential, as well as respect for their dignity.

A core component of supportive supervision is to help staff develop their skills and capabilities. Supervisors need to motivate staff by recognizing and rewarding good work. While salary increases are a common method used to try to motivate staff, there are a number of alternatives available to the internal supervisor. These include:

- showing the great impact of providers' services on their clients' lives
- making staff feel that they are part of the organization, and not just an employee
- building staff commitment and confidence, by working in teams towards solving problems
- making staff feel that their opinions really matter
- celebrating success
- taking an interest in staff members' careers and job situations as well as encouraging training and other learning experiences
- taking an interest in personal situations and circumstances
- being honest when providing feedback and communicating with staff

The internal supervisor should work towards creating an atmosphere in which staff are not afraid to ask for guidance and technical assistance. The supervisor, in turn, must be prepared to respond to questions, referring to standards and guidelines when necessary. If the supervisor does not have the answer to a question, it is her/his duty to search for the answer.

The role of the external supervisor is to:

- encourage the internal supervisor to respect and motivate staff
- show how the internal supervisor can encourage and respect staff by being a role model
- interact in a respectful way and enforce similar interactions between supervisors and their staff
- serve as a liaison between the service delivery point and external resources
- take an interest in the success of the service delivery point and staff welfare

Providers' need for feedback

Standard

The Member Association has a system in place to meet providers' needs for feedback that regularly assesses, monitors and evaluates the quality of sexual and reproductive health services and programme performance as well as ensuring the use of information to improve the quality of services.

Service providers need feedback about their competence and attitude as perceived by others. Feedback is necessary from all involved in the service delivery system, including managers, supervisors, colleagues and clients.

As noted in Section 3, feedback is crucial for the professional development of individual staff members and the service delivery point team, but it can only be useful if both the 'givers' and the 'receivers' are clear about the objectives of the feedback. It is important to note that giving feedback is not only about addressing situations and actions that need improvement – it is also about reinforcing success!

Feedback can be given in various ways:

- team feedback
- individual feedback
- written reports

Team feedback

Team feedback is important as it allows the whole team to learn from the supervisor and each other about situations and actions that need improvement. Team feedback can help strengthen the team. Within the quality of care programme, the focus of this type of feedback will mainly be on the service delivery point action plan implementation process.

Individual feedback

Individual feedback is a process to evaluate, discuss and document individual performance. It involves periodic and formal commentary on areas of satisfactory work and any areas needing improvement.

Elements to remember for both team and individual feedback are:

- time – feedback should be provided at an appropriate time
- regularity – there should be a system in place for formal feedback
- feedback can also be more informal

Written reports

Reports that give insight into the progress made on the self-assessment action plan implementation process of the different service delivery points can be a way to provide feedback to service delivery point teams. It will help the staff to compare progress with other service delivery points and can stimulate and encourage them to move forward. The external supervisor should compile and provide these reports to the internal supervisors.

Providers' need to express their opinion

Standard

The Member Association has a system in place to meet providers' needs for self-expression.

All service providers, regardless of the level of care they are providing, need to express their views about the quality of service they are providing.

Fear of the consequences is one reason why staff may not express their personal views. To overcome this situation, supervision must foster a culture of trust; one in which staff feel safe to express and share their views and personal opinions. Staff must also be able to trust in the outcome of sharing their opinions and be sure they might have a positive influence on change.

Self-expression can be highly motivational for staff to deliver quality work. Staff need to be recognized for new ideas and are stimulated by opportunities to tailor their workplace or to help to define their own roles. Self-expression will also have an impact on their commitment and sense of ownership of the programme.

Both the internal and external supervisors need to encourage all staff to overcome their fear of expressing themselves. Ways of promoting self-expression include:

- developing a climate of freedom and responsibility among staff
- pushing staff members on some occasions and protecting them at others
- introducing and discussing the goals of the quality of care programme so all staff accept them and understand their value
- creating an atmosphere that allows staff to take risks and still feel safe
- encouraging staff to be who they are and not hide themselves from others
- enquiring about staff expectations for their work with clients and doing the best you can to help their expectations to be met
- impressing on each staff member how valued she/he is

There are formal and informal ways to make sure that staff express themselves:

- the self-assessment process is a formal way that allows staff to express their opinions freely in order to improve the quality of the services
- team meetings can be used to encourage staff members to share their ideas and opinions informally

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International Planned Parenthood Federation (IPPF)

Who we are

The International Planned Parenthood Federation (IPPF) is the strongest global voice safeguarding sexual and reproductive health and rights for people everywhere. Today, as these important choices and freedoms are seriously threatened, we are needed now more than ever.

What we do

IPPF is both a service provider and an advocate of sexual and reproductive health and rights. We are a worldwide network of 150 Member Associations and are active in 182 countries.

What we believe

We see a world where women, men and young people everywhere have control over their own bodies, and therefore their destinies. A world where they are free to choose parenthood or not; free to decide how many children they'll have and when; free to pursue healthy sexual lives without fear of unwanted pregnancies and sexually transmitted infections, including HIV. A world where gender or sexuality are no longer a source of inequality or stigma. We will not retreat from doing everything we can to safeguard these important choices and rights for current and future generations.

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