

**HOW EFFECTIVE IS THE FOLLOW-UP
AND ENHANCEMENT PROGRAM (FEP)
IN RETAINING CLINICAL KNOWLEDGE
AND SKILLS OF SKILLED BIRTH
ATTENDANTS (SBAs) AND IMPROVING
THEIR WORKING ENVIRONMENT IN
RURAL NEPAL?**

ENHANCING RURAL HEALTHCARE



Background

The National Health Training Center (NHTC) and Nick Simons Institute (NSI) devised the Follow Up and Enhancement Program (FEP) in 2011 where the clinical knowledge and skills of trainees (e.g., SBA) and work environment in terms of availability of equipment, medicines, and supplies are assessed directly at their working sites and provide feedback to improve upon any gaps.

Till 2017, the FEP team from NSI/NHTC has conducted follow-up on 1089 SBAs, visiting 593 birthing centers in 35 districts across Nepal. There is, however, no current study that documents the effectiveness of FEP. Thus, this study aims to describe the effectiveness of the FEP program on retaining or increasing the knowledge and skills of SBAs and improving their working environment.

Data Collection

A mixed-methods comparative research design with purposive sampling.

Quantitative data;

- 73 SBAs had pre-FEP in 2016 and a post- FEP in 2017 (Bardiya, Bajhang, and Makawanpur)
- 93 SBAs had not previously had FEP (Dadeldhura, Syangja, Siraha)

Qualitative data (16 birthing centers where FEP was conducted in 2016);

- Interview/group interview- SBAs (n=16), key stakeholders (n=7)
- Focus group discussion- Health Facility Operation and Management Committee (HFOMC)(n=16), SBA trainers (n=2)

Results

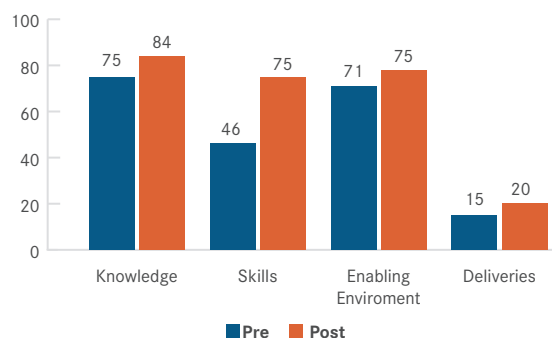
Characteristics of nurses with FEP and without FEP.

Variables	SBA with FEP (%)	SBA without FEP (%)	
	Staff Nurse	3 (4)	19 (20)
Position	Auxiliary Nurse	70 (96)	
	Midwife	74 (80)	
Age	<30	19 (26)	43 (46)
	30-39	26 (36)	28 (30)
	>=40	28 (38)	22 (24)
Recruitment	Permanent	56 (77)	74 (80)
	Temporary	17 (13)	19 (20)

Pre VS. Post Analysis

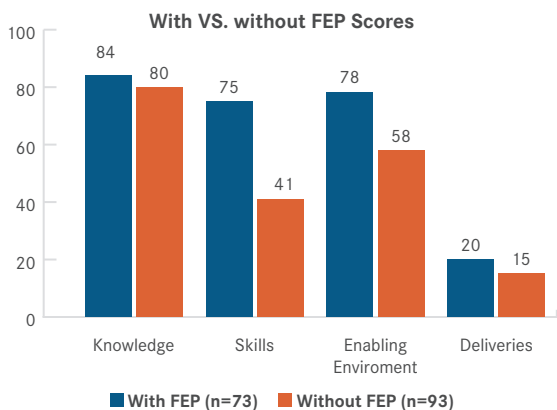
- Clinical knowledge and skills scores improve with one-time FEP by approximately 9% and 29% respectively.
- Enabling environment scores increased by approximately 7 percentage points.
- SBAs conducted additional 5 deliveries over 3 months after receiving FEP.

Pre VS. Post Scores (n=73)



Intergroup Comparative Analysis (With VS. Without FEP)

- Knowledge scores of SBAs with FEP are 4% higher than SBAs without FEP.
- A significant difference is found in the skills of SBAs with and without FEP. SBAs with FEP have 34% score higher. Similarly, enabling environment is 20% higher.



FEP Positives

- FEP is perceived as Ideal Monitoring and Supportive program.
- Update and retain clinical knowledge and skills
- Energize and build confidence.
- Establish linkages between SBA, Trainers, and HMCs.
- Raised awareness of responsibilities and energized concerned stakeholders.

“In supervision, one does not provide feedback and identify the gaps but in this FEP, they identify gaps and provide suggestions.” (SBA)

“..... there is no mechanism to monitor whether the job given by the government has been doing or not.” (District Health Officer)

“If we go to the FEP, then we can understand how the SBA trainees have been doing at their work-sites.” (SBA Trainer)

Improvements Needed in FEP

- The frequency of FEP should be increased.
- Need to involve other staff during feedback.
- Better to conduct clinical skills on the real patient rather than a dummy.
- Essential materials such as revised guideline, equipment should be provided.
- Provide equal opportunity to trainers.
- Trainers should create a friendly environment while coaching.

“This is a very good program...which includes all aspects of improvements but what I want to say is that the duration and frequency of the program has become less.” (Public Health Nurse)

“It should be regular. It should happen every 6 months or 1 year.” (SBA Trainer)

“As they come here and observe and tell us the things we need to improve, but it would be good if they manage (help us get or give us) materials too.” (HFOMC)



Key Findings

- FEP is a highly effective program by both quantitative and qualitative evaluation.
- FEP enable to increase the clinical knowledge and skills as well as enabling environment.
- Beneficial to all stakeholders [Energizing, motivating, establishing linkage] - SBAs, Trainers, HFOMC.
- Expectations- learning materials, equipment.
- Trainers are not always nice- SBAs are sensitive to few incidents.
- All trainers are not getting equal opportunity to involve in FEP.

Recommendations

- A frequent FEP is necessary to enable SBAs to provide quality maternal and neonatal health services.
- The intervention with the concept of decentralization should be developed to increase the frequency.
- Consider providing some support for equipment and supplies.
- Consider the inclusion of curriculum on behavior change communication (trainers) during orientation.
- Government monitoring/supervision programs should be modeled on FEP.

Acknowledgment

We would like to thank all the study participants, FEP trainers, HFOMC members, respective DHOs PHN in the study districts.



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