

Utilizing Health Workforce Training Data for Decision Making

Case Study I

Background: In early March 2020, COVID-19 arrived in Timor-Leste creating a state of emergency. During a global pandemic, health workers in Timor Leste are on the front lines of combatting this disease, working to ensure that the virus does not spread in the country. Based on other countries' experiences, the WHO recommended that the MOH follow certain instructions and measures for Infection Prevention Control (IPC) for health workers such as handling baby food, assisting the delivery of an infected mother's baby, preparing medicines and food for patients, and many more. In addition, there has been an increased focus on training in Emergency Obstetric Care IPC specific to COVID-19.

Unfortunately, it is expected that the pandemic will continue well into 2021 and the Minister of Health wants to ensure that health workers are equipped with the knowledge and skills they need to combat the virus.

The Case:

- **Training:** To achieve this goal, the Minister of Health has issued a new directive that all health workers throughout the country must be: 1) trained on COVID-19 IPC and treatment measures, including COVID-19 and EMOC for doctors and midwives; 2) provided with follow up after training supervision to ensure they are carrying out practices properly; and 3) provided with a refresher training every six months throughout the pandemic. While the INS has made great strides in training much of the country, additional trainings for both topics and refresher trainings are needed, and supervisory visits must be conducted.
- **Mission:** You will need to identify which health workers have been trained in what COVID-19 related topic in 2020. Based on this information, you will then need to plan a phased approach to implement these activities based on those that need training and refresher training (specifying what training), and those that will need follow up supervision in the next year (and when they will need that supervision). The INS Executive Director also needs this data so that she can plan for resource requests in 2021 to fund the implementation of this directive, and request advocacy support from the Minister for complimentary resources from IPs.
- **Resources:** There is very little budget available for these trainings, but development partners have been allocated funding to provide support. In addition, partners will be needed to support the implementation of the training to ensure that all health workers receive the training and supervision that they need throughout the pandemic.

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Case Study II

Background: The provision of integrated management of childhood illness (IMCI) within the country has traditionally been based on the following five steps: 1) assess the child 2) classify the illness based on signs 3) identify treatment 4) treat the child and 5) provide follow-up. New guidance released last year from the World Health Organization (WHO) incorporates a 6th step, counsel the caretaker, which should occur between treating the child and providing follow-up. Given both the addition of a new step into the guidance and the importance of incorporating appropriate and effective counseling techniques into the provision of IMCI, the WHO recommends training for all health workers that haven't been trained in IMCI within the last two years.

To evaluate the effectiveness of the new guidance, the WHO has developed a study protocol to determine whether the addition of counseling caretakers improves health outcomes. The MOH has agreed to conduct the study in Timor-Leste, with site selection beginning in October of 2021.

The Case

- **Training:** Timor Leste has committed to training all doctors, nurses, and midwives in the country on the revised IMCI guidelines by May 2021. The training will take place over 5 days and be conducted in each Municipality, and three implementing partners have agreed to support the INS in carrying out this training.
- **Mission:** You will need to implement this 5-day IMCI training. To do this, based on the past training data available, you will need to identify who needs to be trained, and how you will carry out the training by May 2021 given this must be a national training and it is five days long, and only three IPs to support the training. The Minister of Health has requested a report on the number and location of every health worker trained by May 30, 2021 to comply with the WHO's timeline for site selection. Furthermore, the WHO has requested that the list include the region/district where the health workers are deployed and the name of the facilities to which they are assigned to ensure an appropriate study sample size.
- **Resource Needs:** As this request is arriving after annual budgets have been prepared and approved, there is no national budget available for this training aside from salaries of the training personnel. In addition, as the training is to be nation-wide, technical and financial support will be needed from development partners to ensure that all health workers eligible for the training are identified and trained in advance of the May 2021 deadline.

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Case Study III

Background: The Sustainable Development Goals (SDG) are a universal call to action for nations to come together to end poverty, protect the planet and improve the lives of people everywhere. The government of Timor-Leste championed the Goals from their inception and, on the 22nd of May 2017, launched *Timor-Leste's Roadmap for the Implementation of the 2030 Agenda and the SDGs*, which aligns with *Timor-Leste's Strategic Development Plan (2011-2030)*. In support of SDG 3, *Ensure healthy lives and promote well-being for all at all ages*, page 41 of the Plan states that the Government “will take action to... ensure that Timor-Leste has adequate and appropriate human resources to provide the health services our people need. These actions will include strengthening the quality of training and education to meet the needs of our health sector and developing continuing education and in-service training programs.”

The Ministry of Health has been called upon to operationalize this part of the Strategic Development Plan related to improving the quality of in-service training and has a specific interest in improving maternal newborn health outcomes in the country under SDG3. UN Member States will be convening in early 2022 to review achievements and shortcomings from the implementation of the SDGs, and the Minister believes that with the right planning and implementation team he can demonstrate progress toward both Timor-Leste's Strategic Development Plan and the Sustainable Development Goals... and possibly run for Prime Minister. While the UN Convention is more than a year away, it will take months of planning to ensure that the right health workers are trained in appropriate competencies to show progress toward these ambitious goals.

The Case

- **Training:** In an effort to achieve these goals, the Minister of Health is directing 75% of the training budget towards refresher training for midwives on all standard maternal newborn health in service training by the end of 2021. This is an ambitious goal, so the Minister of Health would like to prioritize areas with higher maternal and newborn mortality rates and midwives who have not received a relevant training in the last three years. In addition, the INS may need to review and update the current trainings to ensure that they are in line with best practices.
- **Mission:** You will need to identify the relevant trainings and confirm if they need to be updated. Then, based on the past training data related to these trainings, you will need to plan a phased approach to carrying out the trainings based on the priority regions and health workers identified. You will use this plan to report regularly to the Minister and to coordinate IPs in rapid roll out of the training.
- **Resource Needs:** Though a significant amount of funding is available from the national budget for these trainings, development partners will still be needed to support both implementation and carrying out of the training to ensure that all health workers eligible for the training are identified and trained in advance of the December 2021 deadline.

<https://sustainabledevelopment.un.org/memberstates/timorleste>

https://wedocs.unep.org/bitstream/handle/20.500.11822/9800/-Timor-Leste_Strategic_Development_Plan_2011-2030-2011TimorLeste_StrategicDvlpmntPlan_2011-2030.pdf?sequence=3&isAllowed=y

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Case Study Instructions

- **Day 1**

- Begin by summarizing your mission so that all group members understand what your case is trying to achieve.
- As part of engaging IPs in achieving the mission, identify the health workforce challenges that will be addressed during the training.
- Identify data needs to develop and monitor the implementation plan.
- Review the data set provided and document any data quality issues. Make recommendations to improve the quality of the data.
- Determine the stakeholders, both local and international, that will need to be engaged to achieve this mission.
- Map the information use flows for these stakeholders based on how these stakeholders need to use the data achieve this mission.

- **Day 2**

- Using the provided guide, conduct basic analysis using your data set.
- Based on the stakeholders identified in Day 1, identify the potential barriers to use of data that could affect your ability to achieve the mission. Complete the table.
- Recommend feedback loops in relation to your mission.

- **Day 3**

- Complete the Link Data to Action Framework to demonstrate what is needed to achieve your mission.
- Create a summary recommendation on how you will achieve your mission.
- Present your findings to the group.



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Case Study Day 2 Handout: Basic Data Analysis Guide

Instructions

- Using your case study, identify the necessary analysis to inform the actions that you will take to achieve your mission. Use the details as described in the background, training, mission, and resources as a guide to determine what analysis you need.
- Once you have identified your data analysis needs, use the data set to conduct the following calculations as appropriate (i.e. For each area of analysis, you may only need to conduct one kind of calculation. For some areas of analysis, you may need to conduct multiple types of calculation.)
 - Ratio
 - Compare two numbers in relation to each other (a to b, a per b, a:b)
 - Proportion
 - Compare a subsection of a group to the whole of that group (numerator=subsection of group/denominator=whole group)
 - Percentage
 - Multiple the proportion by 100, expresses the number in relation to the whole
 - Rate
 - Expresses the frequency of a specific event in a certain period of time (remember to multiply by 1000)
 - Mean
 - The average of a set of data
 - Median
 - The middle of a distribution, when numbers are listed in order
- Discuss the trends that you are seeing, and further describe what this analysis means in the context of your case study and how these results will inform the actions you will take to achieve your mission (write notes below and put into Flip Chart):



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Case Study Handout: Linking Data to Action Framework

Instructions:

- Review your Case Study and the past two days of training.
- Using what you have completed during the last two days, complete the table:
 - Identify the program or policy question(s) based on your mission
 - Document the decision makers and other stakeholders needed to address these questions and achieve the mission
 - Identify the indicators and data needs, as well as the data sources needed
 - Define the timelines for analysis and decisions to take action to achieve the mission
 - Determine how the analysis and decisions will be communicated
 - Describe the final decisions or actions that are needed to achieve your mission.
- Either transfer the completed framework to a flip chart or the PowerPoint template provided.

Linking Data with Action Framework

Program/ Policy Question	Decision Maker (DM), Other Stakeholders (OS)	Indicator/Data	Data Source	Timeline (Analysis) (Decision)	Communication Channel	Decision/ Action