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TRAINING *for* BETTER TB CONTROL



HUMAN RESOURCE DEVELOPMENT *for* TB CONTROL

A STRATEGIC APPROACH
WITHIN COUNTRY SUPPORT



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HUMAN RESOURCE DEVELOPMENT FOR TB CONTROL - A STRATEGIC APPROACH WITHIN COUNTRY SUPPORT

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Although the DOTS strategy has been widely accepted, many developing countries have been unable to expand coverage as rapidly as needed and have failed to achieve global targets of detecting 70% of infectious cases and curing 85% of those detected by the year 2000. Neglect of human resource development has been identified as one of the main constraints to rapid expansion of DOTS.

Human resource development has for many years been synonymous with organizing training courses. The realization that this is not enough has gradually developed, not only for TB control programmes but also for many of the other programmes and components of primary health care. This document provides a strategic approach to training or better human resource development beyond the organization of training courses. It describes an outline of the essential components of a structure and system for Management of Human Resource Development for TB control where the quality of the different components of the system and their implementation is as essential as having a high number of persons trained in a short period of time.

To further assist programme managers, training co-ordinators and others involved in activities to implement the human resource development strategy within the National Tuberculosis Control Programmes a detailed guide is being developed to accompany this document. "The Training Co-ordinator's Handbook – Basic Skills and Tools for Managing Human Resource Development for Tuberculosis Control" provides detailed information on how to plan, implement and manage a system for human resource development. This document will be available from the Stop TB, WHO, Geneva by mid 2002.





INTRODUCTION



Without unprecedented efforts to improve TB control in regions hardest hit by the disease, incidence is expected to climb steadily. An effective intervention exists: The DOTS strategy is when carefully implemented one of the most cost effective of all health interventions. However, the implementation of the DOTS strategy can not be successful without additional and improved human resources.

Human resources are among the most important resources in health care delivery. Health system managers have the responsibility and challenge of ensuring that maximum benefit is derived from these human resources to maintain and expand health services such as tuberculosis case detection and management. Training, properly focused, directed and managed is therefore an essential component of the comprehensive strategy for TB control.

The purpose of this document is to outline a strategy for management of human resources for tuberculosis control specifying the role of national TB programmes as well as the support by international organizations and agencies.



DEFINING THE PROBLEM

Over many years training has been a key component of TB control programmes. Many training courses have been organized, internationally as well as at country level to improve the implementation of TB control strategies in countries. Implementation of the DOTS strategy has advanced in many countries and the key challenge is no longer to start up programmes but to expand geographically and to maintain high quality implementation. Health sector reform in many countries is offering both an opportunity and a threat to TB control activities and health worker performance. And adding to the problem is the rapidly growing spread of HIV-AIDS and its implications for TB control, as well as its devastating impact on the workforce itself, especially in Africa.

As the experience with implementation of training programmes for TB control activities has increased so has also the awareness of the need to pay additional attention to the quality of training, the need for better management of training programmes and the need for ongoing follow up of training. Many training programmes are partially based on a few incorrect



assumptions that are negatively affecting the training efforts and, eventually, the quality of the TB control efforts:

- The notion that training is a time limited activity and when the DOTS strategy has reached 100% coverage training is no longer needed;
- The notion of “they have been trained, therefore they will perform well”;
- The assumption that “communication means learning” which assumes that the information transmitted to the participant is always learned.

There is furthermore often a lack of attention to issues such as the quality of the training itself, factors influencing behavioural change of health workers as well as the community and environmental factors facilitating or obstructing change.

This situation applies not only to TB but to other PHC interventions as well. In light of the growing magnitude of the TB problem in the world today there is a need to review the approach to human resource development for TB control and move forward in a more sustainable manner in a long term perspective based on lessons learned from the past.

IMPROVING TRAINING ACTIVITIES FOR TB CONTROL

Training activities for TB control can not be a “one-shot” effort, organizing a training course and training the staff in the area and considering the work done. Training must be a continuing effort. Therefore, the training strategy should develop the training activities beyond planning and implementing training in the context of a geographically and time limited project where training is viewed as just organizing training courses. The training strategy should describe planning and implementing training as part of a health intervention which needs to be sustained, where the geographical limit is the country and the time limit is “forever”. The training strategy should also take into consideration the quality of all training activities, with special emphasis on the educational methodologies in training programmes and material. And there must be clear linkages to programme supervision and on-the-job training.



DEFINING THE GOAL

The long term goal for human resource development for TB control is to reach and sustain a situation where:

Staff at different levels of the health system have the skills knowledge and attitudes (in other words are competent) necessary to successfully implement and sustain TB control activities including the implementation of new and revised strategies and tools and in relation to HIV management.

Without reaching and maintaining this goal it will not be possible to reach and sustain the global targets for TB control.

REACHING THE GOAL

To reach and sustain the goal for human resource development in TB control, countries, with the support of international organization need to intensify and improve the quality of their efforts in human resource development.

THE STRATEGY AT COUNTRY LEVEL

Countries should develop/revise and implement a comprehensive strategy for human resource development for TB control, including supervision and follow-up. The strategy should not be seen in isolation but in the broader context of health system strengthening for a set of core interventions. However, even in the most integrated approach the details of each intervention need to be developed to ensure that the menu of intervention “packages” is well co-ordinated, leading to training material and programmes that are fully compatible and consistent. In all situations the human resource development strategy should be an integral part of the National TB control plan and funding should be earmarked to facilitate sustainability and continuity.

The strategy, describing how to reach the goal, should have the following components:

- Establish/improve existing in-service training programmes for TB control;
- Establish/improve existing systems and structures to identify performance deficiencies related to lack of skills and to enable staff to acquire the necessary competencies for TB control activities through formal training or on-the-job training (supervision and follow-up);



- Establish/improve existing systems to, on an ongoing basis, identify new staff working in TB control and enable them to participate in the appropriate training programmes as soon as they take up a new position (staff rotation);
- Review and revise as necessary basic training programmes for medical doctors, nurses and other health workers involved in the implementation of TB control activities, to ensure that new graduates are fully prepared for work in TB control;
- Co-ordinate training related to TB control with training for other disease control interventions such as for HIV/AIDS prevention and control.

However, a training programme is only responsible for meeting the learning objectives of the programme. Even the best training programme can not solve all problems. It is not responsible for system deficiencies that do not permit the staff to perform after training. For a newly trained health worker to implement new skills it is essential that there is an enabling environment including a supportive supervision system, drugs and logistics supply.

Human resource development, as well as any other component of the DOTS strategy must be well managed in order to be successful. Therefore to implement this strategy, countries need to undertake the activities listed below as key steps in the human resource development. However this is not a restricted list but rather a minimum list of steps:

1 ESTABLISH/REVISE ORGANIZATIONAL STRUCTURE TO MANAGE HUMAN RESOURCE DEVELOPMENT AT NATIONAL LEVEL OF THE NTP

- Assign a focal point for training co-ordination within the NTP (in big countries this is a full time job);
- Appoint a training co-ordination group with representatives from training institutions, field staff, professional organizations and other disease control programmes such as HIV/AIDS;
- Determine roles and functions for training management at sub-national levels.

2 PLAN FOR THE FUTURE

- Establish the goal for human resource development for TB control in country
- Develop strategy to reach the goal.



3 REVIEW CURRENT SITUATION

- Review and list functions and tasks by level and by professional category and develop/revise job descriptions for staff involved in TB control to correspond with current policies and recommendations for TB control
- Review current existing training related activities both related to who is being trained, in what kind of training programmes (in-service, new staff, reassigned staff; basic training programmes), and the material and methodologies used
- Conduct training needs assessment against set standards for job performance and job descriptions (staff currently working)
- Analyse data and determine key areas for improvement.

4 PREPARE SHORT AND MEDIUM TERM PLANS FOR HUMAN RESOURCE DEVELOPMENT FOR TB CONTROL AT DIFFERENT LEVELS OF THE HEALTH SYSTEM (IN-SERVICE TRAINING)

- Establish short and medium term objectives
- Develop activities for each objective
 - Develop/revise training programmes for different categories of health personnel involved in the TB programme according to the functions
 - Develop/revise training material
 - Select and train course facilitators for the different training programmes (paying particular attention to the technical and educational competencies of the future facilitators as well as the ability to encourage course participants to develop skills in independent thinking and problem solving)
- Prepare organization of training courses (long term as well as short term).

5 DEVELOP SYSTEM FOR FOLLOW-UP AFTER TRAINING AND LINKS TO OVERALL TB PROGRAMME SUPERVISION

- Establish the organizational structure for follow up after training
- Train supervisors for follow up on training.

6 MANAGE AND USE INFORMATION FOR MANAGEMENT OF HUMAN RESOURCES FOR TB CONTROL

- Determine what information is needed
- Assess existing data management procedures
- Take action to improve data management procedures.



7 PREPARE SHORT AND MEDIUM PLANS TO STRENGTHEN THE TEACHING OF TB CONTROL IN BASIC TRAINING PROGRAMMES FOR MEDICAL DOCTORS, NURSES AND OTHER CATEGORIES OF STAFF INVOLVED IN TB CONTROL

- Establish working group for curriculum strengthening
- Review current situation
- Prepare activities for curriculum strengthening for each category of health personnel.

8 MANAGE FINANCES

- Prepare a budget
- Control and manage funds
- Monitor finances – compare results with budget projections
- Financial reporting – institutional and donor requirement
- Use financial reports for decision-making.

9 IMPLEMENT AND MONITOR THE IMPLEMENTATION OF THE PLAN FOR HUMAN RESOURCE DEVELOPMENT

- Ensure timely implementation of activities
- Ensure adequate deployment of manpower
- Ensure timely allocation of resources
- Evaluate course participants (capacity in relation to learning objectives of the course and ability to carry out tasks)
- Ensure regular supervision and follow-up after training.

10 EVALUATE THE IMPLEMENTATION OF THE PLAN FOR HUMAN RESOURCE DEVELOPMENT AND REVISE BASED ON FINDINGS IN MONITORING AND EVALUATION

- Evaluate the training and education plan
- Evaluate the training process
- Evaluate the product (course participants)
- Revise plans according to findings in monitoring and evaluation.

11 CONTINUED IMPLEMENTATION OF THE PLAN FOR HUMAN RESOURCE DEVELOPMENT – MAKING THE PROGRAMME SUSTAINABLE

- Implement, monitor, evaluate and revise as necessary.



THE STRATEGY OF INTERNATIONAL ORGANIZATIONS

International organizations and agencies skilled and competent in training should:

1. Provide technical and financial assistance to individual countries in developing and implementing the strategy for human resource development for TB control;
2. Develop generic training modules, manuals and guidelines to facilitate material development at national level;
3. Organize training courses on key aspects of TB control at regional/intercountry level for key staff at country level.

ACCELERATION IS URGENT

To slow the epidemic of TB, activities over and beyond what is being done today are needed. In organizing training courses for human resource development there is always a temptation to include too many participants in too short a time because the need is big. However, quality must not be sacrificed in the name of speed and urgency. Therefore one of the key challenges for all partners in the Global DOTS Expansion is to maintain and strengthen quality and at the same time accelerate activities for human resource development. Urgency and speed is essential - but at the same time quality is imperative for reaching and sustaining the targets.



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