### **QUALITY ASSURANCE TOOLS**

#### **PURPOSE**

In order for a piloted innovation to maintain its positive outcomes during scale-up, it must be implemented with fidelity. Robust tools are needed to monitor the quality of services during this phase. Two key tools were used to monitor SDM service quality: (1) the Knowledge Improvement Tool (KIT), a check list to assess provider SDM counseling skills, including who is eligible to use SDM, how the method works, and how to teach method use; and (2) a Client Follow-Up (CFU) questionnaire to assess whether couples were using the method correctly, which can help evaluate whether providers are correctly conveying information to clients.

These tools provide unique perspectives on scale-up and were used separately during the SDM scale-up process (except in India, where they were used in tandem). To streamline tools and foster cross learning in quality assurance mechanisms, the two tools have been combined into one section in this compendium. As these tools are specific to SDM, they should be adapted appropriately for the innovation being scaled up.

## HOW THE PROVIDER KNOWLEDGE IMPROVEMENT TOOL (KIT) WAS DEVELOPED AND USED

Originally developed to monitor service quality during the SDM efficacy and introduction studies, the KIT was used during

scale-up to evaluate the effect of streamlined training approaches and to compile individual data on the quality of counseling at a district or central level. During operations research, IRH found that incorrect method use was often the result of receiving poor information from providers. This tool was thus implemented as a check on provider competency and the quality of the system in place to train and coach providers. KIT results helped IRH identify gaps and difficulties in method counseling, and refine the training protocol accordingly. During the scale-up phase, the KIT was streamlined to focus on essential aspects of SDM counseling and, in some countries, revised to include other FP methods.

The KIT is administered by supervisors to a sample of providers. The timing and frequency of KIT administration depends on a program's needs as it revises training approaches during the scale-up process. During scale-up, IRH requested that several rounds of the KIT be applied at the regional level in all countries in order to monitor the quality of SDM services as the program went to scale.

Findings from administration of the KIT were shared with stakeholders during meetings and used to highlight areas in training that needed to be improved or reinforced during supervisory visits.

## HOW THE CLIENT FOLLOW-UP (CFU) TOOL WAS DEVELOPED AND USED

The CFU tool was developed mid-way through the scale-up phase to assess provider competency from the system enduser (client) perspective and to gain a general understanding of correct use of SDM when offered at a large scale. It was refined over time as it was used in programs.

The CFU tool was administered less frequently than the KIT because use of this tool is only feasible in settings where providers can locate their clients without encroaching on their privacy or breaking confidentiality. The provider or provider and supervisor visit the client and ask several simple questions about SDM use. During scale-up, IRH requested that at least one round of CFU be completed in all countries as a check on the quality of provider counseling and training.

Similarly to the KIT, results from administration of the CFU tool were used as field data to advocate for improved provider training and supervision as well as overall health systems strengthening to provide increased support for FP clients.

#### **LESSONS LEARNED**

- Stakeholders in all countries requested information regarding the quality of SDM services because they were unsure of whether an information-dependent method could be scaled up in relatively weak systems. These tools provided valuable information to enhance efforts to strengthen training and supervision systems to support the delivery of high quality SDM services.
- As a single-method quality assurance tools, programs found the KIT and CFU tool difficult to use during normal supervision visits intended to monitor correct record keeping and commodity flows. Therefore, IRH developed versions which covered a variety of methods and facilitated the review of service quality during supervision visits.

#### **VALUES**

KIT questions address male involvement in using SDM and provide the opportunity for providers to reinforce this critical aspect of SDM use. The CFU tool also provides a values-check on the scale-up process. It inquires generally about client satisfaction with different elements of the method, including partner participation.

#### **KEY REFERENCES**

Naik S., Suchi Tl, and Lundgren R. (2010) Options for maintaining quality family planning counseling: strategies for refresher training. *International Journal for Quality Health Care*. 22(2):145-150.

# STANDARD DAYS METHOD KNOWLEDGE IMPROVEMENT TOOL (KIT)

Provider's Name:	Community Name:
Date Trained:	Name of person applying KIT:

<u>Instructions</u>: Ask the provider the following questions. If s/he responds correctly, mark "1". If s/he does not respond correctly, mark "0" and explain the concept. For questions that were answered incorrectly, please reinforce the knowledge and ask these questions again during your next visit.

, 501	next visit.	\.c.	
How	to use CycleBeads?	Visi <sup>.</sup> 1	Dates 2
1.	Pretend that I would like to use the method. Explain to me how to use CycleBeads ( provider a set of CycleBeads to use in the demonstration).	Give I	he
1a.	CycleBeads represent the menstrual cycle. Each bead is a day of the cycle.		
1b.	The <b>RED</b> bead marks the first day of your period (menstrual bleeding).		
1c.	The <b>BROWN</b> beads mark days when pregnancy is unlikely.		
1d.	The WHITE beads are days when you CAN get pregnant.		
1e.	The <b>DARKER BROWN</b> bead helps you know if your period came too soon to use CycleBeads.		
1f.	On the day you start your period, move the ring to the RED bead.		
1g.	Mark this day on your calendar.		
1h.	Move the ring every day to the next bead, even on days you are having your period.		
1i.	Always move the ring in the direction of the arrow.		
1j.	Use a condom or do not have sex during the white bead days when you can get pregnant.		
1k.	You may have sex when the ring is on the brown beads.		
11.	When your next period starts, move the ring to the red bead, skipping over any remaining beads.		
lm.	If your period comes before the dark brown bead, your period has come too soon to use this method.		
ln.	If your period does not come by the day after you reach the last brown bead, your period has come too late to use this method.		
2.	What should the woman do if she forgets whether or not she has moved the ring?		
2a.	Check her calendar and count how many days have gone by since the first day of her last period. Then count the same number of beads and place the ring on the correct day.		

Who	can use the method?
3.	What two requirements are necessary to be able to use the method?
3a.	The woman must have periods about once a month, when she expects them.
3b.	The woman and her partner are able to use a condom or not have sex on the days she can get pregnant (white bead days).
Whe	n can a woman start using the method?
4.	When can a woman begin using the method?
4a.	If she knows the date of her last period, she can move the ring to the appropriate bead and begin using the method immediately.
4b.	If she knows the date of her last period, she can begin using the method when her next period starts. Until then she should use a condom or abstain to prevent a pregnancy.
5	When can a woman who is postpartum or breastfeeding start using the method?
5a.	Once she has had at least four periods since her baby was born, and
5b.	If her last two periods were about a month apart.
6.	When can a woman who has recently used a hormonal method start using the SDM?
6a.	She should be referred to the nearest health center.
How	can CycleBeads help a woman remain alert?
7.	Why is it important to move the ring every day?
7a.	Moving the ring every day helps her know if she can get pregnant or not that day.
7b.	It also helps her know if her period has come <b>too soon</b> (period starts before DARK Brown bead)
7c.	It also helps her know if her period has come <b>too late</b> to use this method (period has not started after moving ring to last brown bead.
Whe	n to contact the provider?
8.	When should an SDM User contact her family planning provider?
8a.	If her period does not start by the day after putting the ring on the last brown bead. This means that her period came too late to use CycleBeads.
8b.	If the couple cannot abstain or use condoms on the white bead days and wants to switch to another method.
8c.	If the couple has had sex on the white bead days without using condoms.
8d.	If she hasn't had her period when she expects it and thinks she may be pregnant.
How	effective is the SDM?
9.	Among women who use SDM, how many will become pregnant in a year?
9a.	Five out of 100 women who use the SDM correctly in a year will get pregnant.
How	does family planning support the Healthy Timing and Spacing of Pregnancies?
10.	What should clients know about the healthy timing and spacing of pregnancies?
10a.	Wait at least two years after your baby is born before getting pregnant again. It is good for the health of your baby and you.
10b.	Use a family planning method continuously for at least two years to avoid getting pregnant too soon

## **CLIENT FOLLOW UP (CFU) FORM**

#### Instructions

Client follow-up is typically done 2-3 months after providers are trained to assess quality of counseling as measured by clients' ability to follow method directions correctly and satisfaction with the method chosen. The data collector should explain that the purpose of the visit is to see how the client is doing with the method and if she has any concerns. The data collector should emphasize that all information is confidential, that participation in this visit is completely voluntary, and that the client may decline to answer any question she is not comfortable with.

District/Town/City/Village:	Name of Provider:	_
Name of Health Facility:	Date:	

No.	Are you using CycleBeads?	Are you satisfied with the method?	If dissatisfied or not using the method, why?	Verification of Cycle		Client demonstrates correct CycleBeads use	How does a woman manage her fertile days?	How do men cooperate in use of the method?	Have you had any concerns with the method? <sup>1</sup>	Did you talk to the provider about your concerns?	Was the provider's response satisfactory to you?
	Yes -1 No -2	Yes -1 No -2	<ul> <li>Did not like the method - 1</li> <li>Irregular periods - 2</li> <li>Got pregnant - 3</li> <li>Wants pregnancy - 4</li> <li>Husband dislikes method - 5</li> <li>Wants another method - 6</li> </ul>	Marked date of period on calendar Yes-1 No-2	Ring is on correct Bead Yes-1 No-2	<ul> <li>Move ring to red bead every time period starts -1</li> <li>Move ring daily, even on bleeding days-2</li> <li>See provider if period starts before darker brown bead -3</li> <li>See provider if period doesn't start after last brown bead -4</li> <li>See provider if had sex without condoms on white bead day-5</li> </ul>	<ul> <li>Abstain from sex – 1</li> <li>Use Condoms – 2</li> <li>Abstain from sex or use condoms – 3</li> <li>Withdrawal – 4</li> <li>Does nothing/does not know - 5</li> </ul>	<ul> <li>Helps move ring -1</li> <li>Reminds to move ring -2</li> <li>Agrees to use protection or abstain on fertile days-3</li> <li>Other - 4 (Specify)</li> </ul>	Yes - 1 No- 2	Yes - 1 No - 2	Yes - 1 No - 2
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<sup>&</sup>lt;sup>1</sup> The three questions in grey were added to the CFU to help assess service delivery quality. It is important to note that there is not an exhaustive way to capture service delivery quality, which is a complex measure.