



# Outreach supervision to improve malaria diagnostics and case management

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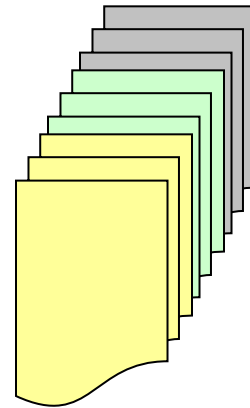
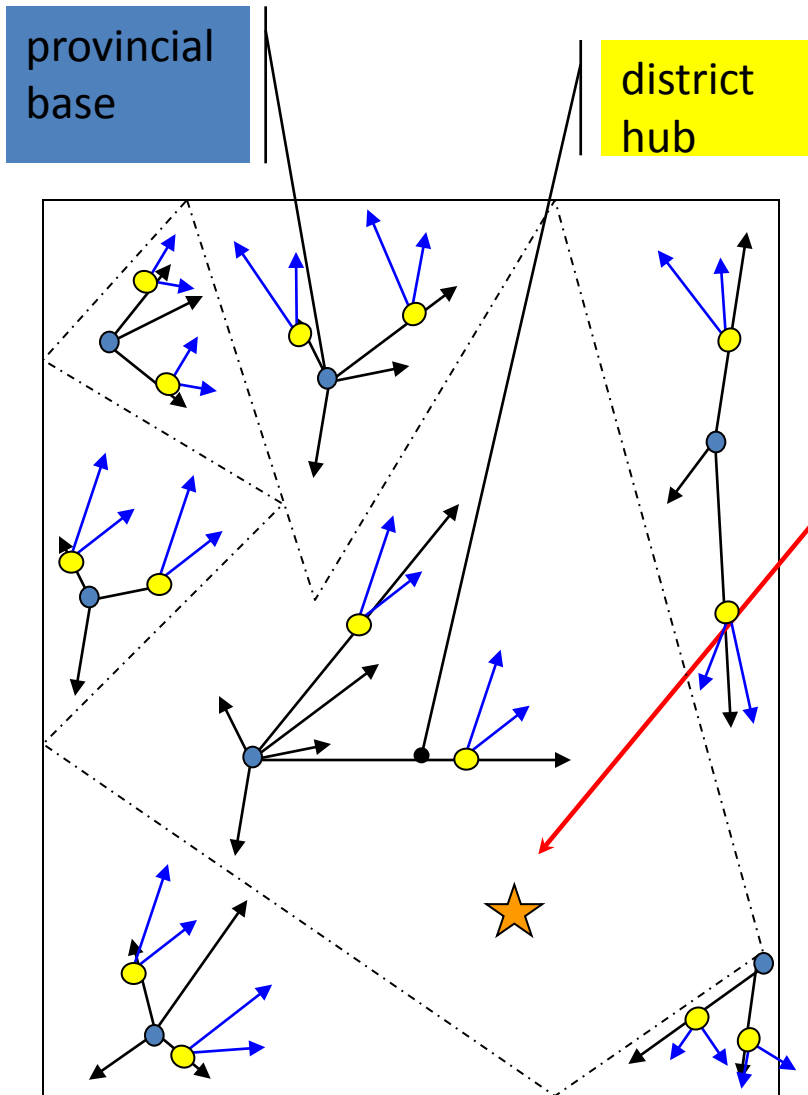
Luanda, August 26, 2009

# Country Chart IMaD activities

	2008	2009	2010 (MOP09)
Angola	Assessment of diagnostic capacities	Adapt training materials Train supervisors	MOP: QC of lab diagnosis
Benin (IMad coordinator)	Assessment	Training in supervision, RDT and microscopy	QAQC diagnostics
Ethiopia	-	Assessment	Support QA schemes
Ghana (IMad coordinator)	Assessment, policy	Training in supervision, microscopy	Lab QC, supervision
Kenya	-	Assessment, policy	QAQC diagnostics
Liberia (IMad coordinator)	Assessment	Training	Nat ref lab, lab QA supervision
Madagascar	Assessment	Suspended: adherence to RDT results at health post level	-
Mali	Assessment	Training	Training lab diagnosis, QAQC diagnostics
Malawi (IMad coordinator)	-	Assessment, training	QAQC of diagnostics, adherence to RDT results
Zambia (IMad coordinator)	Assessment	Training	Strengthen diagnosis at health center level

## Increase supervision to improve competence in malaria diagnosis and case management

- Training in a central location does not necessarily translate into better competence
- Classic cascade training frequently have had limited success in improving performance
- On-the-job training requires extensive travel
- Frequently provinces lack a skilled supervisor
- Supervision to promote adherence to test results by clinicians



## Checklists:

- generated by OS
- initial, 2-3 day visit
- subsequent (1/quarter), 1 day visit
- passed to central admin

## National Coordinator/supervisors

- Integral in planning of training OS
- receive completed checklists
- ensure visits are completed as scheduled
- compile results
- work with provincial Supervisors to optimize visit schedules
- work with NMCP, MoH and PMI coordinator to disseminate results of checklists and facilitate corrective actions

# Laboratory Curriculum

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
8.00-8.30	Introductions Joint	<b>Recap</b>	<b>Recap</b>	<b>Recap</b>	<b>Recap</b>	<b>Recap</b>
8.30-9.30	Ground rules Expectations Joint session	<b>Module 3</b> Management of Lab Chemicals, Reagents & Supplies	<b>Module J2</b> Malaria: Programmatic Issues Joint session	<b>Module 10</b> Rapid Diagnostic Tests (RDTs): use & interpretation	<b>Module J3</b> <b>Training/supervisor visit to a health facility</b> Joint session	<b>Module J4</b> Sources of Errors in Patient Diagnosis Joint session
9.30-10.30	<b>Module J1</b> Essential Health Facility Management Joint session	<b>Module 4</b> Preparation of stains for blood films	<b>Module J2</b> Malaria: Programmatic Issues Joint session	<b>Module 10</b> Rapid Diagnostic Tests (RDTs): use & interpretation	<b>Module J3</b> <b>Training/supervisor visit to a health facility</b> Joint session	<b>Module J4</b> Sources of Errors in Patient Diagnosis Joint session
10.30 – 11.00 <b>Tea Break</b>						
11.00-12.00	<b>Module 1</b> Standards of Laboratory Practice	<b>Module 5</b> Blood film preparation, staining & examination	<b>Module 7</b> Cleaning, Disinfect Sterilisation, Disposal & Safety	<b>Module 11</b> Principles and concepts of QA/QC	<b>Module J3</b> <b>Training/supervisor visit to a health facility</b> Joint session	Post - test Joint session
12.00-1.00	<b>Module 2</b> Medical Laboratory Equipment	<b>Module 5</b> Blood film preparation, staining & examination	<b>Module 8</b> Laboratory Management Information Systems	<b>Module 12</b> QA/QC for malaria diagnosis	<b>Module J3</b> <b>Training/supervisor visit to a health facility</b> Joint session	Post - test Joint session
1.00-2.00 <b>Lunch Break</b>						
2.00-3.00	Pre-test Joint session	<b>Module 6</b> Blood film examination: species identification	<b>Module 9</b> Blood film examination: parasite quantification	<b>Module 13</b> Principles; development and use of checklists	<b>Module 14</b> <b>Feedback from visit to a health facility</b>	Way Forward Plan of action Joint session
3.00-4.00	Pre-test Joint session	<b>Module 6</b> Blood film examination: species identification	<b>Module 9</b> Blood film examination: parasite quantification	<b>Module 13</b> Principles; development and use of checklists	<b>Module 14</b> <b>Feedback from visit to a health facility</b>	Wrap up
4.00 – 5.00	Pre-test Joint session	<b>Module 6</b> Blood film examination: species identification	<b>Module 9</b> Blood film examination: parasite quantification	<b>Module 13</b> Principles; and use of checklists	<b>Module 14</b> <b>Feedback from visit to a health facility</b>	Closing

# Microscopy QC Component

- Slide review
  - Not designed to affect individual patient diagnosis
  - Some reviewed on site, by OS, remainder returned to Regional Base for review
  - Select 5 low density pos and 5 neg / facility for each month
  - 120 slides/year target
- Results are analysed as:
  - Number of slides in agreement, i.e. percentage of positive and negative slides correctly identified
  - False positive rate, False negative rate
  - Labelling of each slide
  - Quality of staining
  - Counting of malaria parasites
- Remedial action
  - Further laboratory supervision and/or
  - Laboratory refresher training

# RDT QC Component

- Observe adherence to manufacturer's instructions
  - RDT storage
  - Adherence to standard operating procedure
  - Biosafety
  - Interpretation of result
  - Registers
- Observe adherence to RDT results (if RDT-s are not treated)
  - Identify the proportion of febrile cases, RDT- that are treated anyway
  - Identify the causes: long turnaround time? Lack of confidence on RDT results?
- Remedial action
  - Further laboratory supervision and/or
  - Laboratory refresher training

# Laboratory Checklist (Initial)

**Tool One. Laboratory Outreach Training: Initial Visit**

**Identification: 1L—2008—08—12—Ashanti—Kumasi**

- 1. Laboratory, location and contact**
- 2. Laboratory structure and facilities**
- 3. Major laboratory equipment**
- 4. Minor equipment**
- 5. Supplies, consumables**
- 6. Safety, disinfection, sterilization**
- 7. Quality assurance**
  - A. Internal QC, B. External QA, C. Reference materials*
- 8. Documentation**
- 9. Laboratory staffing**
- 10. Continuing Professional Development (CPD), training, and supervision**
- 11. Tests and techniques**
- 12. Specimen referrals**
- 13. Laboratory data and workload**
- 14. Clinical information (if there is no clinical counterpart present)**

***Summary of work done during the visit***

# State and mission facilities surveyed in the 2009 Needs Assessment, Republic of Kenya

