



MANIFEST

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Good Practices for District Health Teams to Improve Quality of Service Delivery: Lessons from MANIFEST

KEY MESSAGE

The improvement of quality of health services at district level can only be realized by having committed district health teams



A recently established data centre in Kibuku District which has realised the importance of data in health service delivery (Image Credit: Kakaire Kirunda)

Background

Health systems in low-income countries are often characterized by poor health outcomes. While many reasons have been advanced to explain the constantly poor outcomes, management of the system has been found to play a key role. According to a WHO framework, the management of health systems is central to its ability to deliver needed health services. In decentralized systems of governance such as that of Uganda, district level managers such as the district health team play central roles in ensuring the delivery of quality health services. In response, Makerere University School of Public Health through the MANIFEST study sought to improve management practices among other targets. MANIFEST was a four-year study that was implemented in Kamuli, Kibuku and Pallisa districts using a participatory action research approach.

During the implementation of MANIFEST, improvements were demonstrated at different levels. The enhancement in the management of the health services was noted to have been one of the contributors to the quality improvements seen. The findings presented in this brief are taken from quarterly district implementation committee review meeting minutes (four from each district), interviews with nine district health team members and observations made by the research team during the implementation of the project. The raw data was analyzed qualitatively by reading through the material and identifying themes and patterns of convergence and divergence. This issue brief therefore shares lessons learned on how to enhance the commitment of district health teams.

Findings

- The study found that to improve the quality of health services in the district, the commitment of key players such as the district health officer and his/her team are critical. In many newly created as well as rural districts, commitment of civil servants is challenge. This is often related to the lack of social amenities and services in these districts, which makes it difficult for the staff to be fully committed to service delivery. It is therefore common to have district health officers that reside outside the district and only commute to the districts once in a while to undertake their duties. This threatens team building, mentoring, supervision and appreciation the local context of work.
- The active engagement of team members was found to keep them interested in continuously improving the quality of service delivery. This also served as an opportunity to mentor as well as supervise the work of subordinates and lower level service delivery centers or points.
- Holding quality meetings on a regular basis was another practice that was found to be useful for district level health managers. The quality of meetings was largely defined as those fostering free and open discussions among participants as well as yielding productive action points. Meetings were seen as opportunities for addressing issues, reflecting on progress, sharing information, receiving and acting upon feedback. Nonetheless, if not well managed, meetings favored those with an ease of expressing themselves and getting their opinions heard. Meetings were shown to provide a platform for reviewing progress as well as harnessing resources to tackle given challenges.
- Additionally, delegating roles to subordinates provided opportunities for learning by doing. This active involvement not only builds capabilities but also motivates the team members, which in turn was noted to create more commitment to ensuring better service delivery. For example identifying mentors with the district health team and attaching them to specific health facilities for oversight could be useful in ensuring that quality service provision is monitored and ensured through such accountability mechanisms.
- Fostering teamwork was believed to lend greater legitimacy to managers and give them more authority over the team. It was also seen as a means of sharing responsibilities, learning from others and having collective responsibility over the functioning the health system at district level. Fostering teamwork entailed that managers especially the district health officers are open to other team members' ideas, empowered others by delegating duties and offered support to others. Similarly, it involved outward looking strategies such

as collaborating with others, being transparent, appreciating others and sharing challenges with others to enhance the spirit of teamwork. This active involvement of others was noted to provide opportunities for mobilizing resources to implement activities both within the district and externally.

- The involvement of stakeholders such as politicians and other administrative and technical staff was found to be useful in harnessing and mobilizing more resources. For example, politicians were found to be a powerful resource in mobilizing communities to undertake particular health interventions as well as in influencing positive behavioral changes.

Lastly, the active use of data for quality improvement was noted to provide managers with an opportunity to positively influence quality service improvement. The use of evidence by the managers was seen as a legitimate ground for advocating for specific changes. For example routinely reviewing performance of lower level health centers provides opportunities to identify weak areas as well as accountability.

Key message

District health managers should be committed to improving quality of service delivery by providing leadership to subordinates through mentorships, supervision, involvement of other members in the running of the health system and creating an atmosphere for effective collaboration across stakeholders and creation of change.

Summary of the Good practices needed for a DHT member.

- Awareness of their mandate and a commitment to improve the quality of service delivery.
- Actively engaged team members.
- Mentoring and supervision of others
- Holding of quality evaluative and feedback meetings on a regular basis.
- Fostering of teamwork among team members and across other stakeholders.
- Developing of the skills of others by using effective delegation.
- Fostering and acting upon feedback from team members as well as clients
- Actively involved in mobilizing resources to implement activities both internally and externally.
- Actively using data for quality improvement.

About MANIFEST

MANIFEST was a 4 year study (2012-2015) involving the Makerere University School of Public Health and the districts of Kamuli, Pallisa and Kibuku. The study was funded by Comic Relief with technical assistance from the Future Health Systems Research Consortium. We used a participatory action research approach, in which the different stakeholders worked as partners rather than study subjects. In 2012, we engaged various stakeholders in the design of a sustainable and scalable intervention aimed at improving maternal and newborn health outcomes. The resulting design had three major components, with district health teams leading on their implementation. The components included:

- Community Mobilization and Sensitization
- Savings and Transport
- Health Systems Strengthening

Credits

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