

STRENGTHENING COMPETENCE OF FRONTLINE NUTRITION SERVICE PROVIDERS

Nutrition Assessment Counselling and Support (NACS)

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Presentation Outline

1. Nutrition Assessment Counselling and Support (NACS) and define terms
2. Process of strengthening competence of frontline nutrition service providers
3. Strengthening nutrition in pre-service training to align with service delivery and policy priorities
4. Summary

1) What is NACS?

- Client centered nutrition assessment, counseling, and support
- Focus is to integrating a set of evidence based nutrition interventions into health care delivery
- Emphasis on effective referral and optimal coordination

**NACS can be applied
Throughout the Lifecycle**



**Pregnan
cy**

**Birt
h**

Infancy

Childhood

Adolescence

Adulthood

Definition of Terms

- **Nutrition Competence:** The ability to apply knowledge and skills to produce a required nutrition outcome.
- **Nutrition Competency standards:** The range of skills needed to achieve a desired nutrition outcome or competency at different levels.
- **Frontline Nutrition Workforce:** a person or people responsible for direct delivery of nutrition services to individuals or communities on a day-to-day basis.

2) Process of Strengthening Competence of Frontline Nutrition Service Providers

Malawi Experience

Why?

1. Re-establish the national NCST (NACS) services
2. New national guidelines being developed
3. Strengthen quality of care
4. Very few nutrition service providers therefore a need to be focused on trainings and capacity development
5. Various groups of people are delivering nutrition services, hence a need to set minimum standards of delivering care

The Process

1. Drafted National Guidelines
2. Defined competencies, standards and verification criteria
3. Designed and conducted a baseline assessment
4. Analyzed results and prioritize gaps to focus on during training, developing job aids and training materials
5. Conducted classroom training sessions
6. Conducted post-training mentoring and coaching (integrated QI)
7. Conducted a post assessment to evaluate change
8. Refined guidelines, training materials, job aids and standards

Defining Competencies, Standards and Means of Verifying

Step 1:

- “what is a clinician, nurse, health surveillance assistant or expert client/volunteer required to know and do in nutrition?”
- Outlined knowledge and skills needed for the categories of staff, which were used to determine the required nutrition competencies

Step 2:

- Prioritization based on:
 - 1) What should the service providers know and do - bearing in mind task shifting

Step 3:

- **Defined competency standards** for under each required competence by identifying the minimum set of tasks a service provider needs to be able to undertake in order to perform his/her duties.
- After defining standards, **a verification criteria for each standard** was developed.

Minimum NCST Competencies and standards

Topic Area	Competency	Standards
Nutrition assessment and classification	Use anthropometry to assess & classify nutritional status	6
	Use biochemical methods to assess & classify nutritional status	2
	Use clinical methods to assess & classify nutritional status	3
	Use dietary methods to assess food intake and respond to nutritional status	1
Nutrition counseling and education	Use ALIDRAA checklist to counsel a client on nutrition	8
	Conduct nutrition education session	1
Nutrition care plans and support	Manage a client with normal nutritional status	4
	Manage a client with moderate malnutrition	4
	Manage a client with severe malnutrition without medical complications	4
	Manage a client with severe malnutrition with medical complications	4
	Manage a client who is overweight or obese	4
Quality of NCST service delivery at the facility level	Monitor and report NCST client and facility data	2

- Derived from the national guidelines
- Based on what service providers are expected to do
- Facilitate quality of care even with task shifting

A) Knowledge & Skills in Nutrition Assessment and Classification

1. Assess if the service provider uses anthropometric methods to assess and classify nutritional status

Instructions:

- To assess # 1-5, you will ask the service provider to demonstrate how to weigh, take height, and use the BMI chart to find the BMI and to take the MUAC of a volunteer who will act as a client. As the client conducts the assessment, observe and tick the procedures which are done correctly.
- To assess # 5 and 6, you will ask the service provider to explain to you how to calculate BMI and how to use BMI for age reference tables to look-up BMI for age z-score. Listen to the service providers' responses, compare with the procedure listed in the verification criteria below and tick those points mentioned.

Standard	Verification Criteria	Y/N	Comment
1. Service provider weighs a client	Observe if the service provider performs the following when measuring weight:		Skill
	Activates the scale and ensures that the scale is calibrated to zero		
	Ask the client to take off shoes, hats, scarves and head wraps and remove everything from pockets		
	Asks the client to stand straight, unassisted on the <u>centre</u> of the scale.		
	Records the weight to the nearest kg to the nearest 100g (0.1kg).		

B) Knowledge & skills in Nutrition Counselling and Education

5. Uses the ALIDRAA checklist to counsel a client on nutrition

Instructions:

- In this case, a volunteer will be provided with details of nutrition problem to present with, we will then ask the service provider to use ALIDRAA checklist as a guide when providing nutrition counselling to the client. You will observe the client when they counsel, use the standards and verification criteria below to identify and tick areas done correctly.

Standard	Verification Criteria	Y/N	Comment
12. Service provider establishes rapport with client	Observe if the service provider performs the following :		Skill
	Greets and welcomes client		
	Offers client a seat		
	Introduces oneself to client		
	Maintains eye contact when talking to client		
	Shows interest in client		
	Maintains professional conduct		
13. Asks questions on the clients nutritional status, food intake, nutrition problems and concerns	Observe if the service provider performs the following :		Skill
	Asks questions relevant to the topic of discussion		
	Uses open-ended questions		
	Uses closed-ended questions to get basic information, such as name of client, where they come from and age		
	Uses a questioning style that reflects interest, concern, and care, rather than interrogation		
14. Service provider listens and learns from the client	Observe if the service provider performs the following :		Skill
	Uses helpful non-verbal communication such as: <ul style="list-style-type: none"> Makes eye contact to indicate interest and care Pays attention to the client Nods head Takes time 		

Baseline - Assessment of Competence

- Objective structured clinical examinations were used.
 - Service provider observed as they performed various nutrition tasks
 - A few knowledge questions were also asked
- Establish a baseline level of competence among service providers
- Identify training needs, availability of job aids, equipment and supplies
- Findings of the assessment were used to design training materials and job aids

Building Competencies

- Classroom trainings focusing on the gap areas
- Targeted- modular trainings for the various groups of service providers
- Post-training mentoring and coaching from the district and national levels
- Learning sessions to exchange ideas across facilities

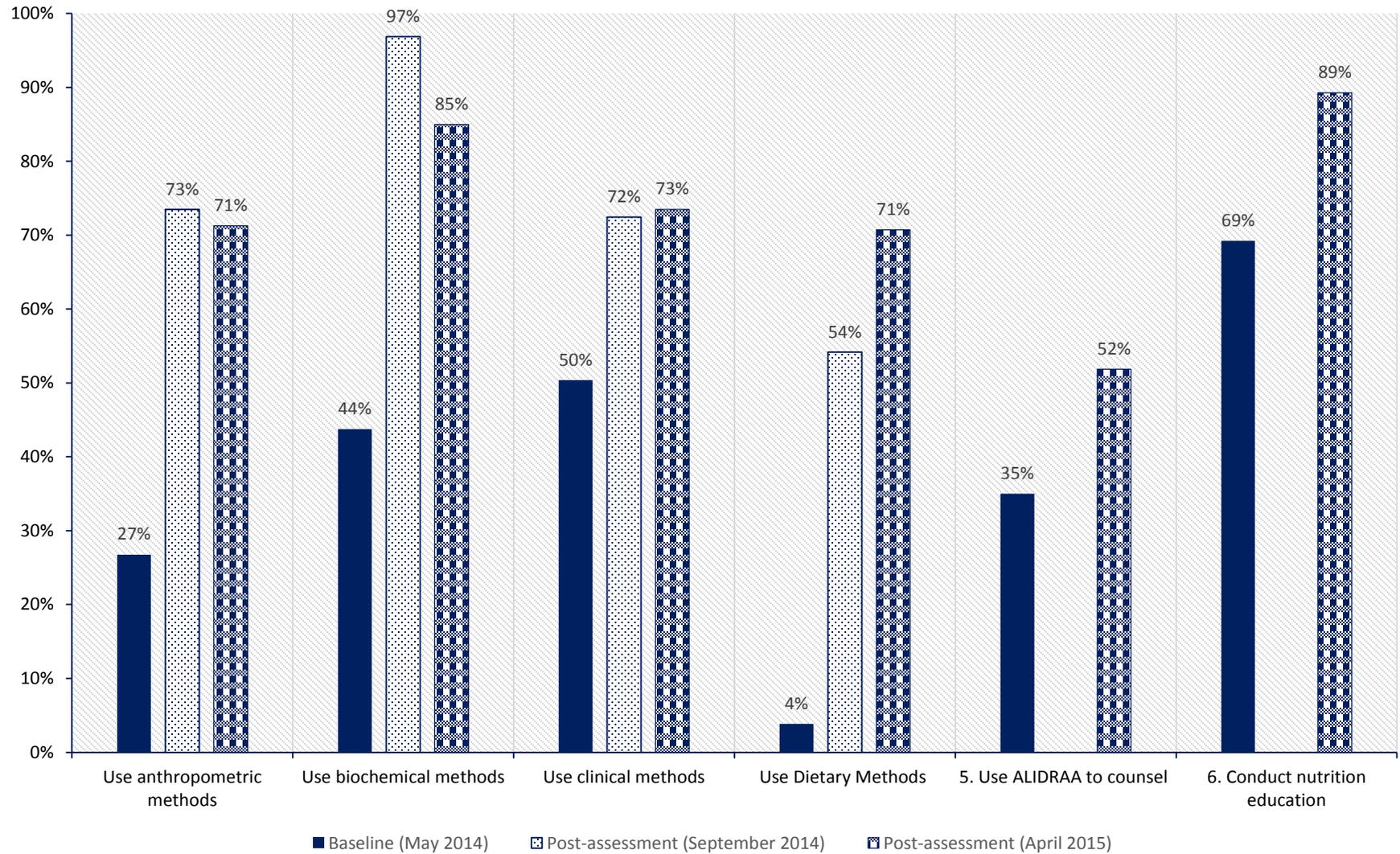
Quality Improvement Efforts

- Alongside strengthening competence of nutrition service providers, improvement efforts were ongoing in the same facilities and communities
- QI teams were developing and testing changes to improve how care is provided to clients

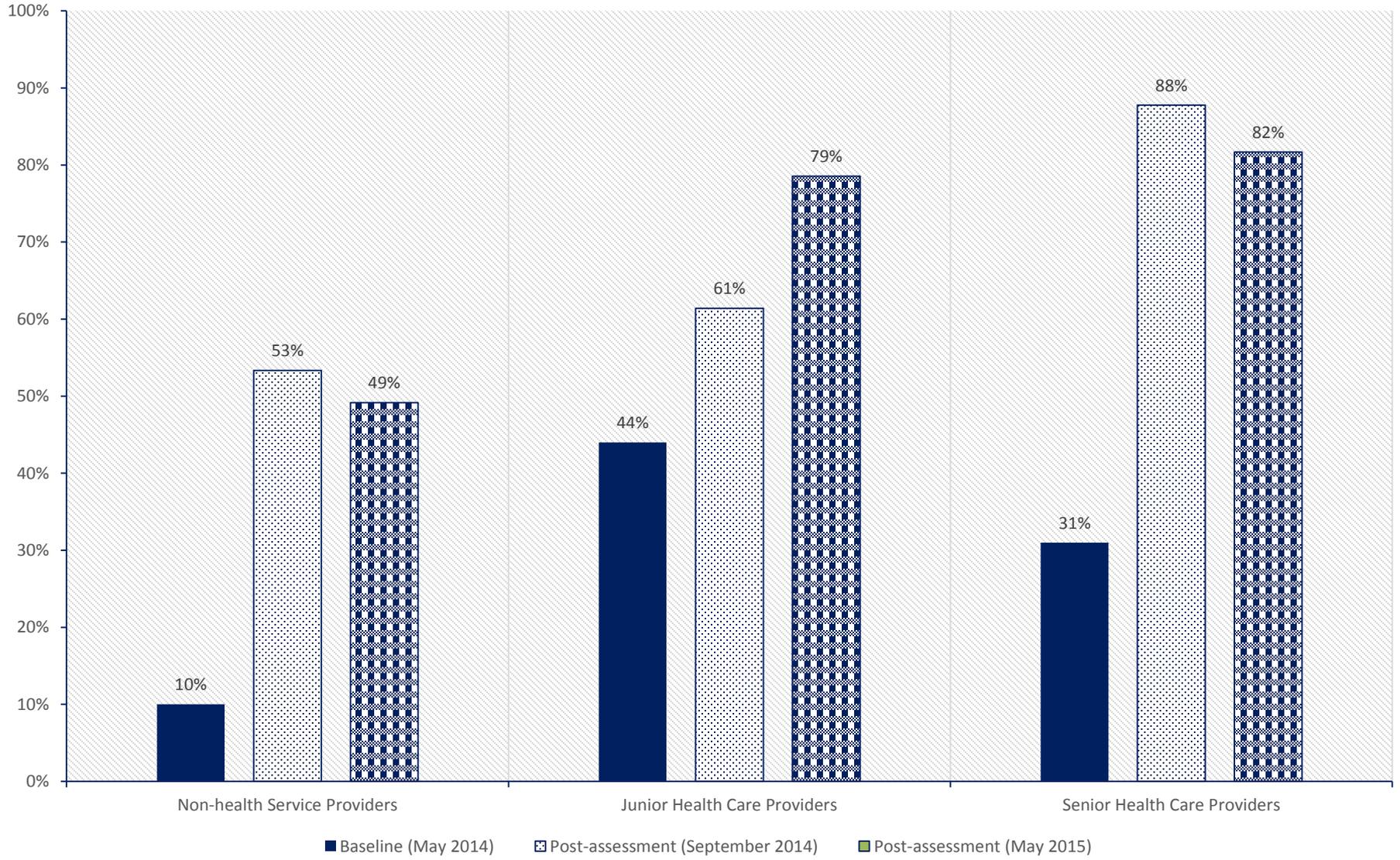
Post Assessment of Competence

- Evaluate change after the capacity building activities
- The same objective structured clinical examinations were used to assess competence of service providers
 - Service provider mainly observed as they performed various nutrition tasks
 - A few knowledge questions were also asked
- Findings of the post assessment indicated improvement

Comparison of Performance between the Baseline and Post-assessment



Service Providers Performance

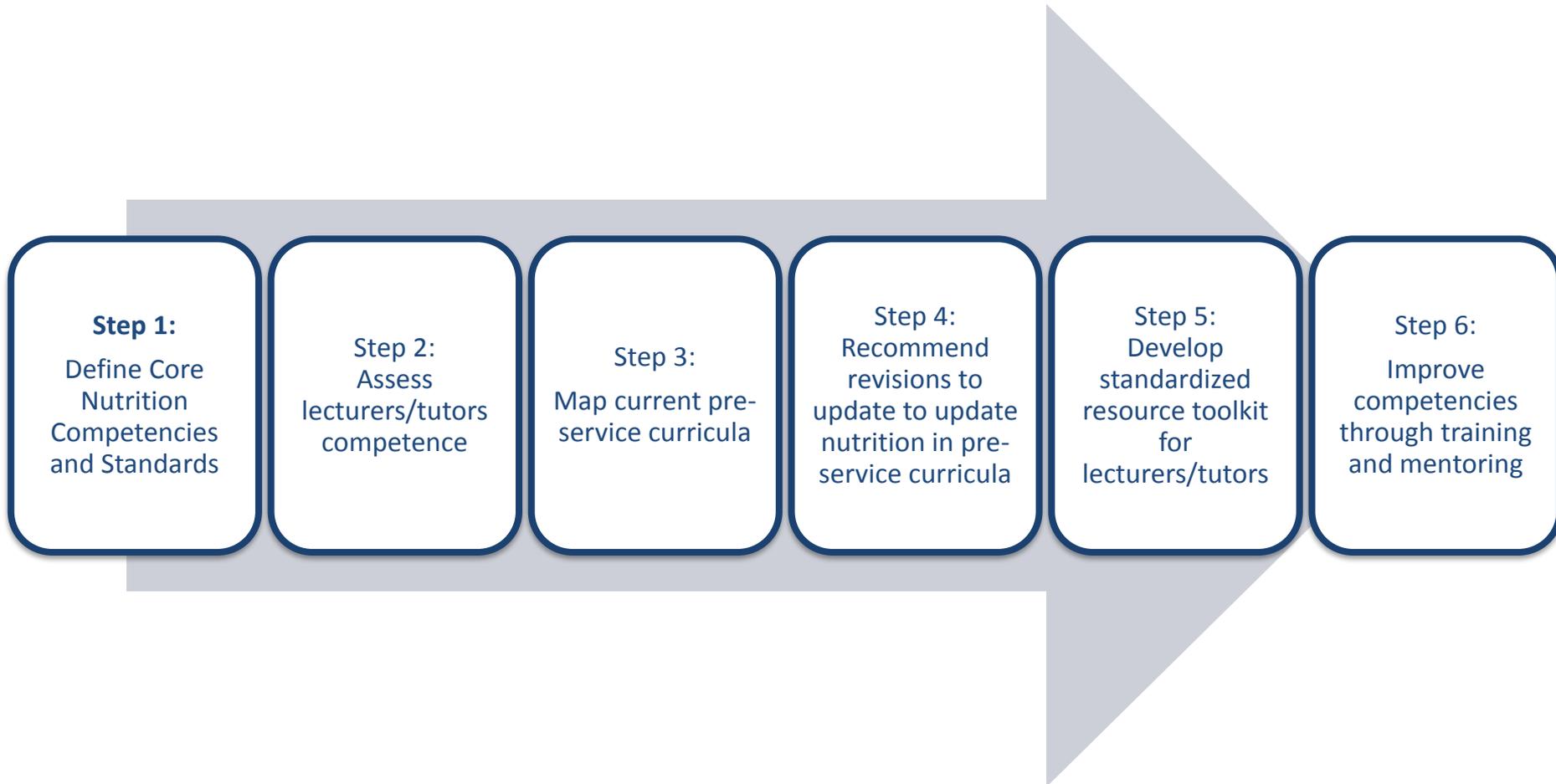


3) Strengthening Competence of Pre-service Training to align with Service Delivery

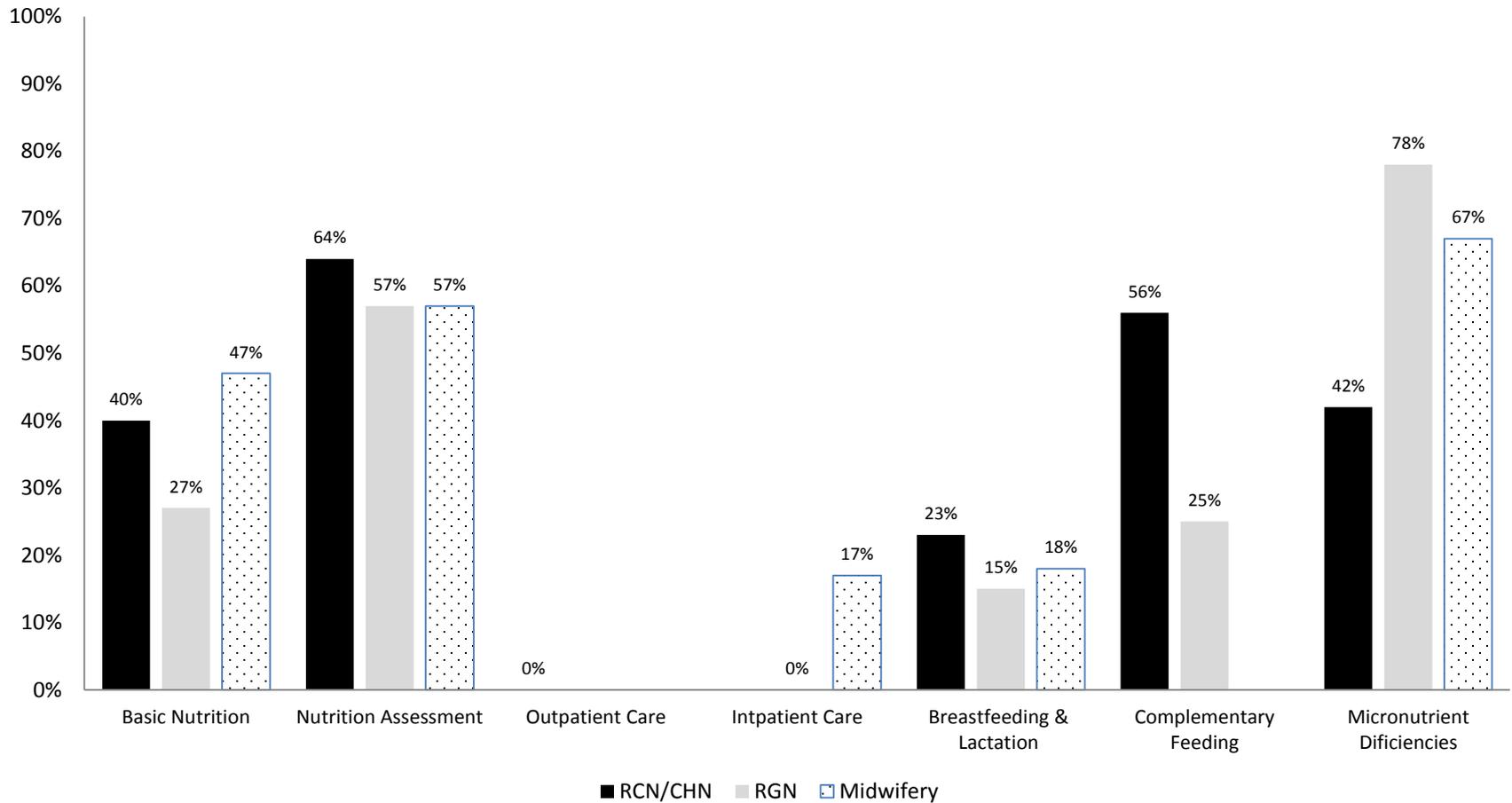
Why Pre-service?

- Limited or no nutritionist at forefront of service delivery
- Nutrition service providers often receive training in service
- However, a major challenge with in-service training is the high rate of staff attrition, leading to reduced quality of services and the need for frequent and repeated training.
- Service providers often perceive new skills acquired through in-service training as add-ons to their standard responsibilities
- Nutrition policies and guidance is frequently changing

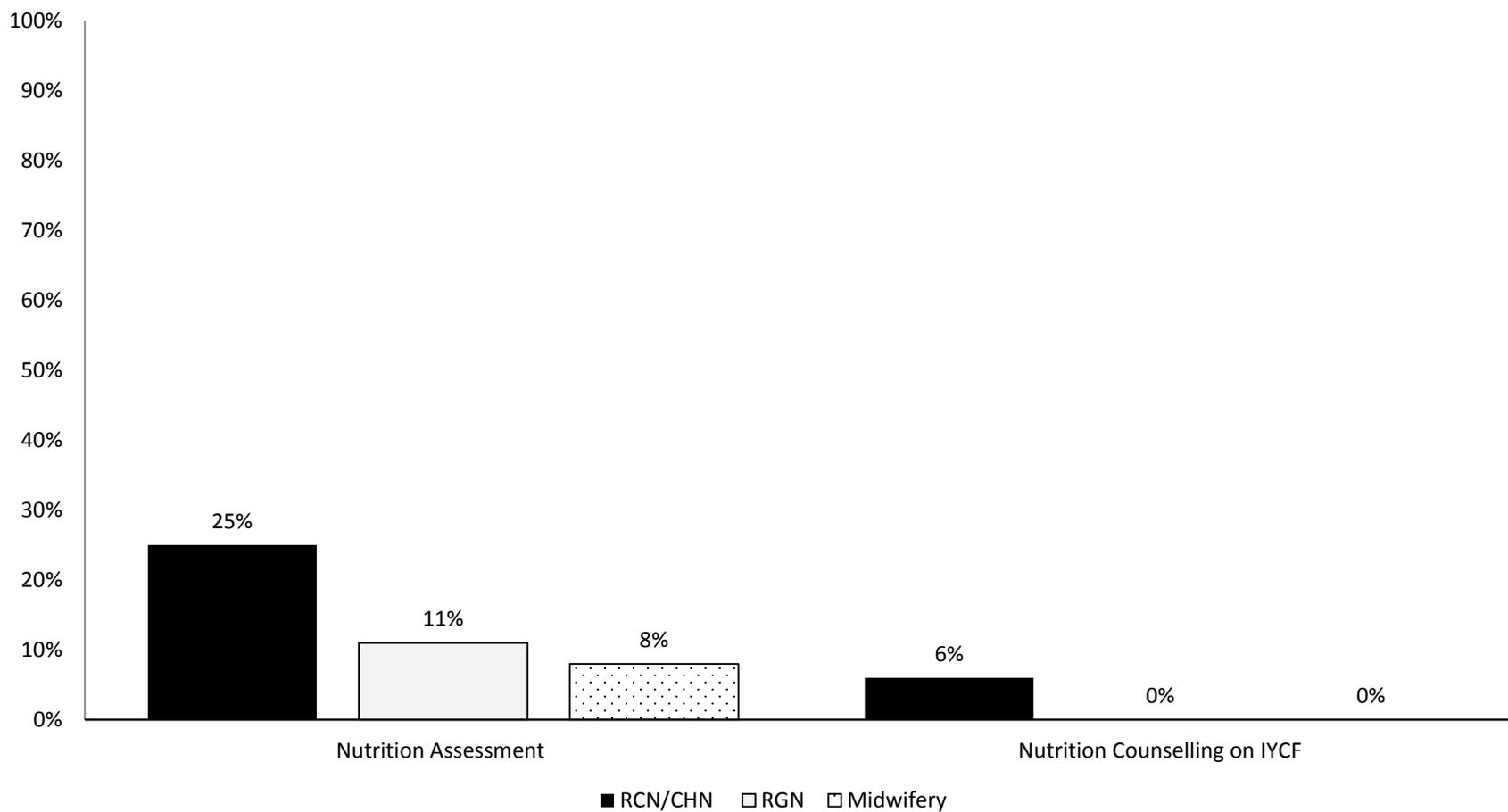
Process



Example 1– Comparison of Tutor’s Knowledge by Training Program



Example 2– Comparison of Tutor’s Skills by Training Program



Example 3– Curricula Mapping

- Nutrition teaching or reference materials are not always standardised
- Curricula are often knowledge based with limited nutrition field practice sessions
- National nutrition policies, guidelines, standards and tools are not always readily available to pre-service institutions

4) Summary

- It is important that capacity building of nutrition frontline service providers is focused, tailored and standardized to expectations
- Bridging the gap between pre-service and in-service is essential for improved quality of service delivery



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