



Assessing the Practices of Ghanaian Community Health Workers through Task Analysis

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My participation at this Congress has been supported by Jhpiego. The Maternal and Child Survival Program is funded by the United States Agency for International Development.



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Assessing the Practices of Ghanaian Community Health Workers through Task Analysis

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14-19 OCTUBRE 2018
RIOCENTRO | RIO DE JANEIRO | BRASIL

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Learning Objectives

By the end of this presentation, participants will be able to:

1. Describe the task analysis process and its implementation to understand the practice of Ghanaian community health workers
2. Describe how the results of the task analysis were used to make recommendations about the scope of practice, competency development, and maintenance of Ghanaian community health workers

Background—Task Analysis Study in Ghana

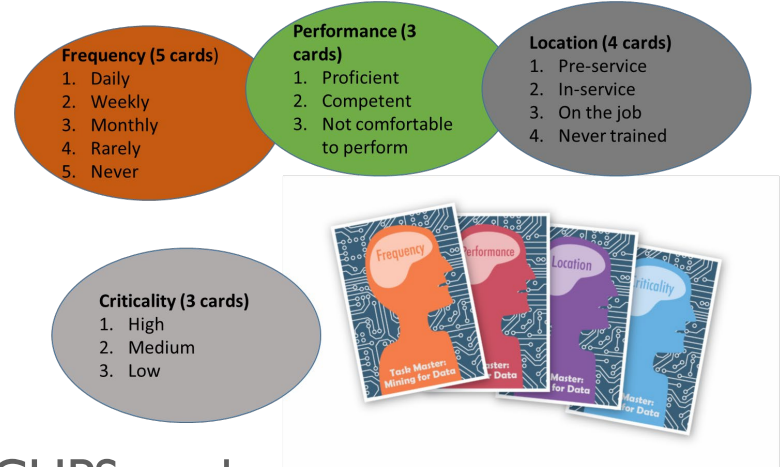
In March 2016, MCSP assessed knowledge, practices, and competencies of community health workers in five regions.

- Assessment sought evidence-based programmatic findings to strengthen the following:
 - Pre-service education, in-service training, and practice of workers in community-based health planning services (CHPS)
 - Regulations of CHPS workers
 - Health care services provided within CHPS zones

Study Methodology

- Used cross-sectional study design
- Purposively sampled from five regions
 - 401 participants from four health care cadres (midwives, nurse-midwives, community health nurses [public health], and enrolled nurses [clinical])
- Developed 87 tasks using curricula, training package, and job descriptions for CHPS workers
- Used Jhpiego's task analysis card game to identify task frequency, performance, training, and importance

Task Master: Mining for Data[©] Card Game



How Different Task Variables Relate to Each Other

	Frequency	Criticality	Location	Performance
Frequency	—	1	2	3
Criticality	—	—	4	5
Location	—	—	—	6
Performance	—	—	—	—

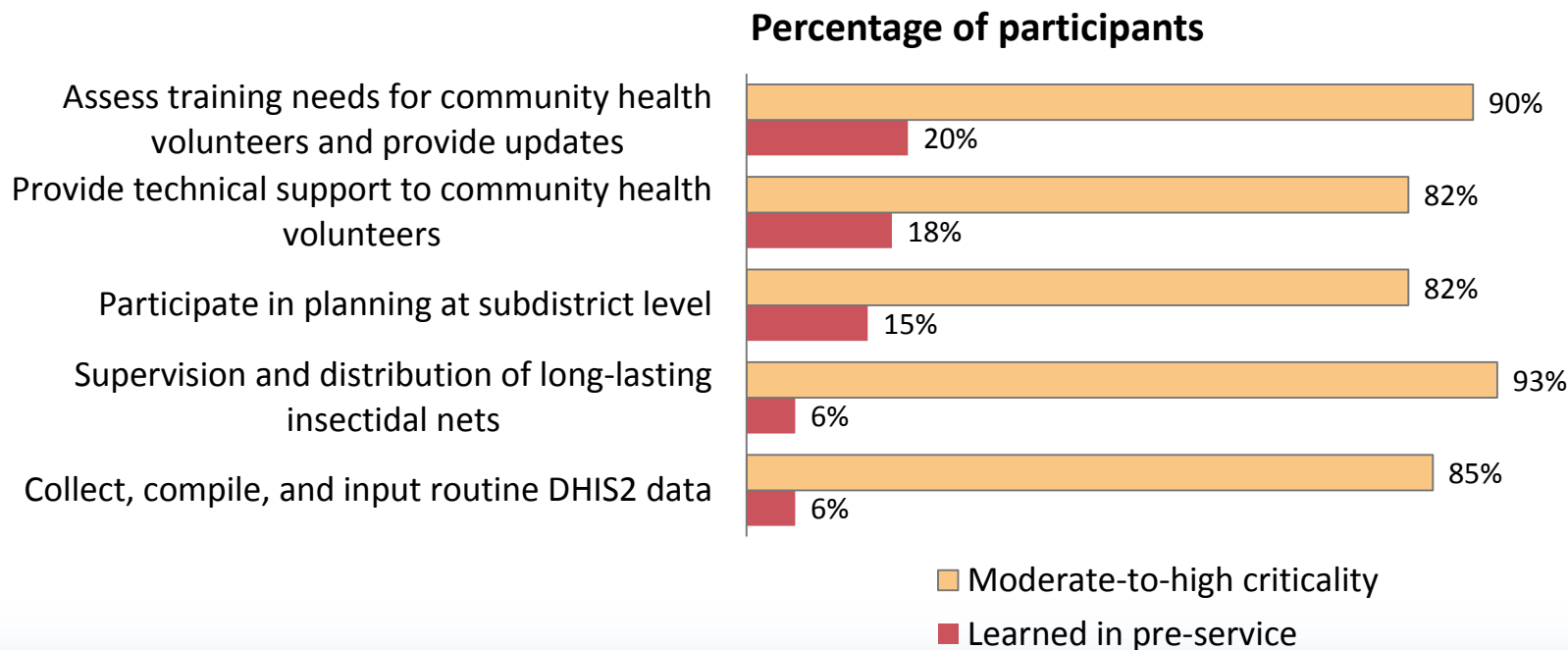


Photo by Kate Holt.

Category and Frequency of Tasks

Task category	Number of tasks per category	Daily	Weekly or monthly	Rarely or never
Communication	5	2	3	0
Administrative	12	0	12	0
Home visits	2	0	2	0
School health	5	0	4	1
Community and outreach	11	0	7	4
Supervision	3	0	2	1
Clinical/public health	49	16	15	18
Total number of tasks	87 (100%)	18 (21%)	45 (52%)	24 (28%)

Staff Performing Tasks Not Included in Their Pre-Service Education



Staff Performing Some Critical Tasks without Training

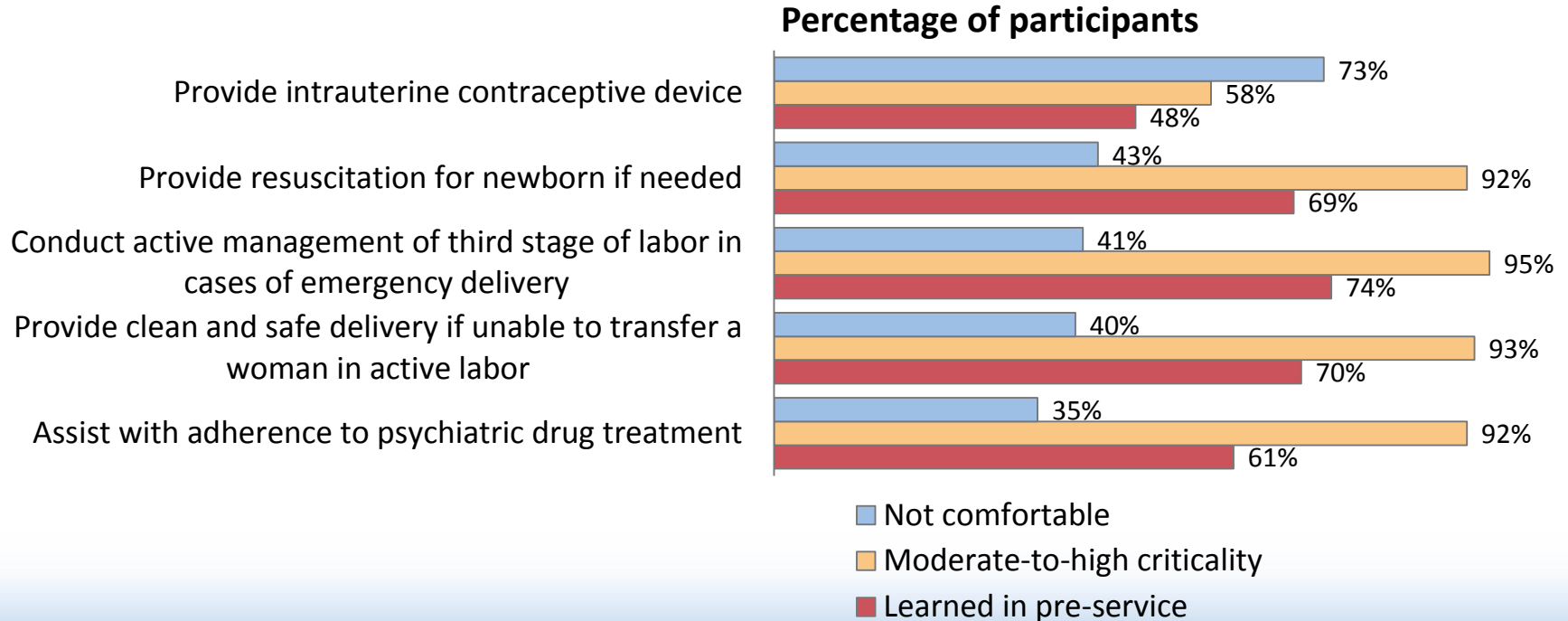
Task	Percentage of participants reporting:	
	Moderate or high criticality	Not trained
Provide intrauterine contraceptive devices (IUCD) ^a	58	36
Inspect food vendor certificates	87	31
Identify and treat syphilis in pregnancy	92	25
Participate in planning at sub-district level	82	20
Provide IUCD counseling and referral	76	20
Assist with adherence for psych drug treatment	92	18

^a In Ghana, nurses in community-based health planning and services zones are not allowed to administer intrauterine contraceptive devices; however, midwives and nurse-midwives are allowed.



Photo by Kate Holt.

Staff Trained on Critical Tasks but Do Not Feel Confident Performing Them



Conclusions

- Scope of practice
 - Stakeholders should consider tasks in relation to scope of practice for community health workers.
- Competency development and maintenance
 - Number of reasons why tasks, even highly critical ones, might be performed infrequently.
 - Some low-frequency tasks require emphasis in the pre-service education curriculum, so providers develop relevant competencies.
 - Providers may need to practicing tasks, as part of continuing professional development, to maintain competencies.



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Key Messages

1. Task analysis is a practical approach that can be used to generate evidence and data on health care workers' current responsibilities.
2. Evidence and analysis can be applied to change the scope of practice, curriculum for pre-service education, and prioritize in-service training and support.

For more information, please visit
www.mcspprogram.org

This presentation was made possible by the generous support of the American people through the United States Agency for International Development (USAID), under the terms of the Cooperative Agreement AID-OAA-A-14-00028. The contents are the responsibility of the authors and do not necessarily reflect the views of USAID or the United States Government.

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