




South Africa PY4 Summary & Results

|  | <p>Geographic Implementation Areas</p> <p><i>Regions</i></p> <ul style="list-style-type: none"> • Johannesburg, Gauteng Province <p><i>Facilities</i></p> <ul style="list-style-type: none"> • Nelson Mandela Children's Hospital | <p>Population</p> <p><i>Country</i></p> <ul style="list-style-type: none"> • 56.72 million <p><i>MCSP-supported areas</i></p> <ul style="list-style-type: none"> • 13.2 million | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|-----|--|----|--|----|---|----|---------------------------------------|-----|-------------------------------------|-----|-----------------------|-----|--------------------|-----|-------------------------------|-------|---|
| <p>Technical Areas</p>  | | | | | | | | | | | | | | | | | | | | | |
| <p>Program Dates June 2015–June 2019</p> <p>Cumulative Spending through End of PY4</p>  <p>Demographic and Health Indicators</p> <table border="1" data-bbox="215 989 553 1545"> <thead> <tr> <th>Indicator</th> <th># or %</th> </tr> </thead> <tbody> <tr> <td>MMR (per 100,000 live births)^[1]</td> <td>138</td> </tr> <tr> <td>NMR (per 1,000 live births)^[1]</td> <td>11</td> </tr> <tr> <td>IMR (per 1,000 live births)^[1]</td> <td>34</td> </tr> <tr> <td>U5MR (per 1,000 live births)^[1]</td> <td>41</td> </tr> <tr> <td>TFR (births per woman)^[1]</td> <td>2.3</td> </tr> <tr> <td>CPR (modern methods)^[1]</td> <td>60%</td> </tr> <tr> <td>ANC 4+^[1]</td> <td>87%</td> </tr> <tr> <td>SBA^[1]</td> <td>94%</td> </tr> <tr> <td>HIV prevalence^[1]</td> <td>18.9%</td> </tr> </tbody> </table> <p><small>Source: ^[1] UNICEF, <i>State of the World's Children Statistical Tables</i>, 2016.</small></p> | Indicator | # or % | MMR (per 100,000 live births) ^[1] | 138 | NMR (per 1,000 live births) ^[1] | 11 | IMR (per 1,000 live births) ^[1] | 34 | U5MR (per 1,000 live births) ^[1] | 41 | TFR (births per woman) ^[1] | 2.3 | CPR (modern methods) ^[1] | 60% | ANC 4+ ^[1] | 87% | SBA ^[1] | 94% | HIV prevalence ^[1] | 18.9% | <p>Strategic Objectives</p> <ul style="list-style-type: none"> • Strengthen the clinical leadership skills of newly appointed tertiary pediatric care nurses and other clinical care staff at Nelson Mandela Children's Hospital. • Support nursing management to strengthen practice management and governance, including systems, processes, and protocols at Nelson Mandela Children's Hospital. • Coordinate the establishment of a network in Southern African Development Community among USAID-supported implementing partners, national referral hospitals, and nursing associations. |
| Indicator | # or % | | | | | | | | | | | | | | | | | | | | |
| MMR (per 100,000 live births) ^[1] | 138 | | | | | | | | | | | | | | | | | | | | |
| NMR (per 1,000 live births) ^[1] | 11 | | | | | | | | | | | | | | | | | | | | |
| IMR (per 1,000 live births) ^[1] | 34 | | | | | | | | | | | | | | | | | | | | |
| U5MR (per 1,000 live births) ^[1] | 41 | | | | | | | | | | | | | | | | | | | | |
| TFR (births per woman) ^[1] | 2.3 | | | | | | | | | | | | | | | | | | | | |
| CPR (modern methods) ^[1] | 60% | | | | | | | | | | | | | | | | | | | | |
| ANC 4+ ^[1] | 87% | | | | | | | | | | | | | | | | | | | | |
| SBA ^[1] | 94% | | | | | | | | | | | | | | | | | | | | |
| HIV prevalence ^[1] | 18.9% | | | | | | | | | | | | | | | | | | | | |
| <p>Key Accomplishment Highlights</p> <ul style="list-style-type: none"> • Conducted skills-building exchanges for hospital nursing staff on topics such as pediatric dialysis. • Supported the development of quality and safety services, including nurses' participation in a Patient Safety Certificate Program. • Provided high-quality ongoing support to hospital staff through remote learning opportunities (webinars, tele-learning). • Supported nurses through mentorship. • Conducted onsite training on clinical and leadership competencies. | | | | | | | | | | | | | | | | | | | | | |

South Africa

Key Accomplishments

Nelson Mandela Children's Hospital starting seeing patients in June 2017, but operations picked up significantly in early 2018 with the opening of inpatient services. In PY4, MCSP focused on building the capacity of the nursing and leadership teams in the hospital by fostering clinical leadership skills in newly appointed pediatric care nurses and clinical staff of the hospital and by supporting nursing management to strengthen practice management and governance. MCSP provided support as the hospital navigated the opening of pediatric and newborn intensive care dialysis, surgical, cardiac, and day wards in addition to the radiology service that opened in PY3.

Successful Skills Building through Exchanges and Hands-On Training for Hospital Staff

MCSP provided hands-on, onsite training to build the skills of nurses across key competencies, with a specific focus on first-wave service areas. MCSP maintained routine communication with the hospital to respond to their shifting needs and, with the assistance of Johns Hopkins Medicine International, provided continuous support for sharing clinical and operational policies, talking through service requirements, and responding to ad hoc requests for advice and assistance. Together, MCSP and the hospital decided on the specific timing and topics covered in training, so that each training targeted competency areas related to units that were opening or services that were being expanded at the time.

In November 2017, in anticipation of opening the dialysis service at the hospital, MCSP coordinated a learning exchange so that several of the dialysis nursing staff, including the nurse unit manager, could visit the Johns Hopkins All Children's Hospital. Recognizing that training in pediatric dialysis is rare in South Africa and that Nelson Mandela Children's Hospital would be the first pediatric dialysis unit in the country, this exchange provided an important opportunity for the nurses to observe and share lessons with staff from an existing pediatric dialysis unit. To build on lessons from the exchange and to support the development of multidisciplinary teams, the hospital also arranged an exchange visit for the nephrologist in March 2018. Before inpatient services opened in early 2018, MCSP worked with Johns Hopkins Medicine International to lead hands-on training and readiness assessments on topics such as dialysis, pediatric intensive care, neonatal intensive care, catheterization, theater nursing, rapid cycle deliberate learning, and nursing quality infrastructure.

In June 2018, in response to an emerging need at the hospital, MCSP and Johns Hopkins Medicine International conducted a 2-week hands-on training focused on building skills on the extracorporeal membrane oxygenation procedure, a service that is not routinely covered in pediatric nurse training in South Africa. MCSP found strong interest in this training, not only from nurses but also from doctors, and was able to reach more than 30 staff with classroom and simulated learning.

Nelson Mandela Children's Hospital has a strong focus on quality, patient safety, and infection control, and is committed to incorporating international best practices for patient safety and satisfaction at the heart of its operational systems. MCSP supported this goal by providing an opportunity in March 2018 for several members of the nursing leadership team to participate in the Johns Hopkins Armstrong Institute's Patient Safety Certificate Program, which also included a weeklong leadership exchange at Johns Hopkins Hospital. To continue to build nurse leadership skills and support the development of best practices, MCSP also coordinated an exchange visit at the Johns Hopkins All Children's Hospital for the Deputy Nursing Director for Clinical Services and the Occupational Health and Safety Nurse Manager.

Continuous Support through Remote Learning and Mentorship for Hospital Staff

MCSP worked with key partners at Nelson Mandela Children’s Hospital to develop engaging remote learning opportunities focused on hospital needs. Throughout PY4, MCSP conducted webinars for nurse leaders and nursing staff, which were designed to link them with Johns Hopkins health system experts in topics of direct relevance, including managing transition and change in hospital settings, incorporating simulations as part of clinical learning, the science of patient safety, pediatric early warning signs, resilience in stressful situations, and evidence-based practice. PY4 webinar programs included skills for debriefing after simulation exercises, managing change and transitions, measuring nursing quality, the science of safety, and specific case studies and discussions on clinical topics.

Way Forward

Moving into PY5, MCSP will continue to support Nelson Mandela Children’s Hospital as the hospital expands its services and continues to hone staff specializations. To facilitate the hospital’s envisioned institutional growth, MCSP will continue to provide training and mentorship opportunities to staff, while supporting the development of effective professional development platforms at the hospital.

MCSP will also provide ongoing technical support to Nelson Mandela Children’s Hospital as it develops its nursing systems and will advise on the development and rollout of critical policies and guidelines, including ensuring that nursing policies reflect international best practices. By establishing incident and risk reporting and patient survey platforms at the hospital, MCSP will continue to provide technical and financial support to facilitate quality management at the hospital in PY5.

| Selected Performance Indicators for PY4 | |
|--|---|
| MCSP Global or Country PMP Indicators | Achievement |
| Number of NMCH nurses participating in nurse mentorship exchange visits | 5 (and two medical doctors, no targets defined) |
| Number/percentage of NMCH nurses and clinical facilitators trained by MCSP | 107 (no targets defined) |
| Number of remote mentoring and skills building sessions held (e.g., webinars, tele-learning) | 5 (no targets defined) |