

MODULE

Health Team Work and Team Training

For the Ethiopian Health Center Team



**Ethiopia Public Health
Training Initiative**

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PREFACE

Teaching–learning process cannot be thought of or achieve its purpose without the necessary textbooks and reference materials, which are one of the main problems for training in our situation. Having this problem in mind, experts from various departments of the institution came together to prepare this team training module that will help to address the solution to the problem.

The preparation of this module had gone through series of meetings and discussions with the relevant bodies in the institution. It is prepared in simple terms and expected to be distributed to users, both in teaching and service rendering institutions.

This module is prepared specifically for the health center team, which incorporates Health Officers, Public Health Nurses, Medical Laboratory Technologists, Environmental Health Professionals, Midwives and Pharmacists.

The Health Center Team would be deployed at the health center level and are expected to implement PHC at the community level. Their cooperative teamwork will enhance them to plan, implement and evaluate the health provision together and finally to achieve the intended goals.

This module on “Health Team Work and Team Training” has two major parts. The first part is the Core Module, which help all categories to perform their task as a team.

The second part is the Satellite Module, which is category-based that helps the different categories to exercise their own professional roles and covers those issues that are not addressed in the core module.

In addition, the satellite module for Health Service Extension Workers (HSEWs) is also attached expecting that they would be working at the community level as team members. However, this module is not expected to replace textbooks on teamwork. Rather it is prepared to enhance the teaching – learning process by making the users to learn more by using this module.

ACKNOWLEDGEMENT

Many people and institutions/ organizations had contributed towards the development of the teaching module. It would be relevant to mention and acknowledge those who devoted their time, money and other resources for the preparation.

First and foremost, we would like to express our deep appreciation and thanks to The Carter Center, Atlanta, Georgia, The Carter Center /EPHTI staff at the Resident Technical Advisor (RTA) Office, and specially Ato Akililu Mulugeta deserves appreciation for facilitating the work and arranging for necessary funding. Preparation of the module would have not materialized with out the collaboration and close follow up by the University of Gondar (UGR) and the College of Medicine and Health Sciences (CMHS). Hence, the group/authors would like to pass their deep appreciation to the UGR.

The authors would like to address their acknowledgement to all international reviewers, i.e. Professor Dennis Carlson and Dr Kinfe Gebeyehu for their invaluable contributions to the module. We also like to thank the national reviewer, Dr Mesfin Addise from Department of Community Health, Addis Ababa University, who had gone through the module deeply and came up with relevant and very important comments.

Finally, we would like to thank W/o Seada Gebiyaw and W/o Abeba Kasahun for their devoted secretarial work through out the preparation of this module.

ACRONYMS

AFS:	Acid Fast Stain
AIDS:	Acquired ImmunoDeficiency Syndrome
ANC:	AnteNatal Care
ARI:	Acute Respiratory Infection
ARH:	Adolescent Reproductive Health
BCC:	Behavioral Change Communication
CDD:	Control of Diarrheal Diseases
EHT:	Environmental Health Technician
EPHTI:	Ethiopian Public Health Training Initiative
EPI:	Expanded Program on Immunization
CMHS:	College of Medicine and Health Sciences
GCMS:	Gondar College of Medical Sciences
HE:	Health Education
HIV:	Human Immunodeficiency virus
H.O:	Health Officer
HSEWs:	Health Service Extension Workers
IEC:	Information, Education, Communication
IHCT:	Integrated Health Care Team
IMR:	Infant Mortality Rate
IMCI:	Integrated Management of Childhood Illnesses
KAP:	Knowledge, Attitude, Practice
MLT:	Medical Laboratory Technology
MMR:	Maternal Mortality Rate
ORS:	Oral Rehydration Salt
PNC:	PostNatal Care
PHC:	Primary Health Care
QA:	Quality Assurance
RH:	Reproductive Health

RPR: Rapid Plasma Reagin
PHN: Public Health Nurse
STIs: Sexually Transmitted Infections
TB: Tuberculosis
TBAs: Traditional Birth Attendants
TPHA: Treponema pallidum Hemagglutination
UGR: University of Gondar
VCT: Voluntary Counseling and testing
VDRL: Venereal Disease Research Laboratory
VIPL: Ventilated Improved Pit Latrine

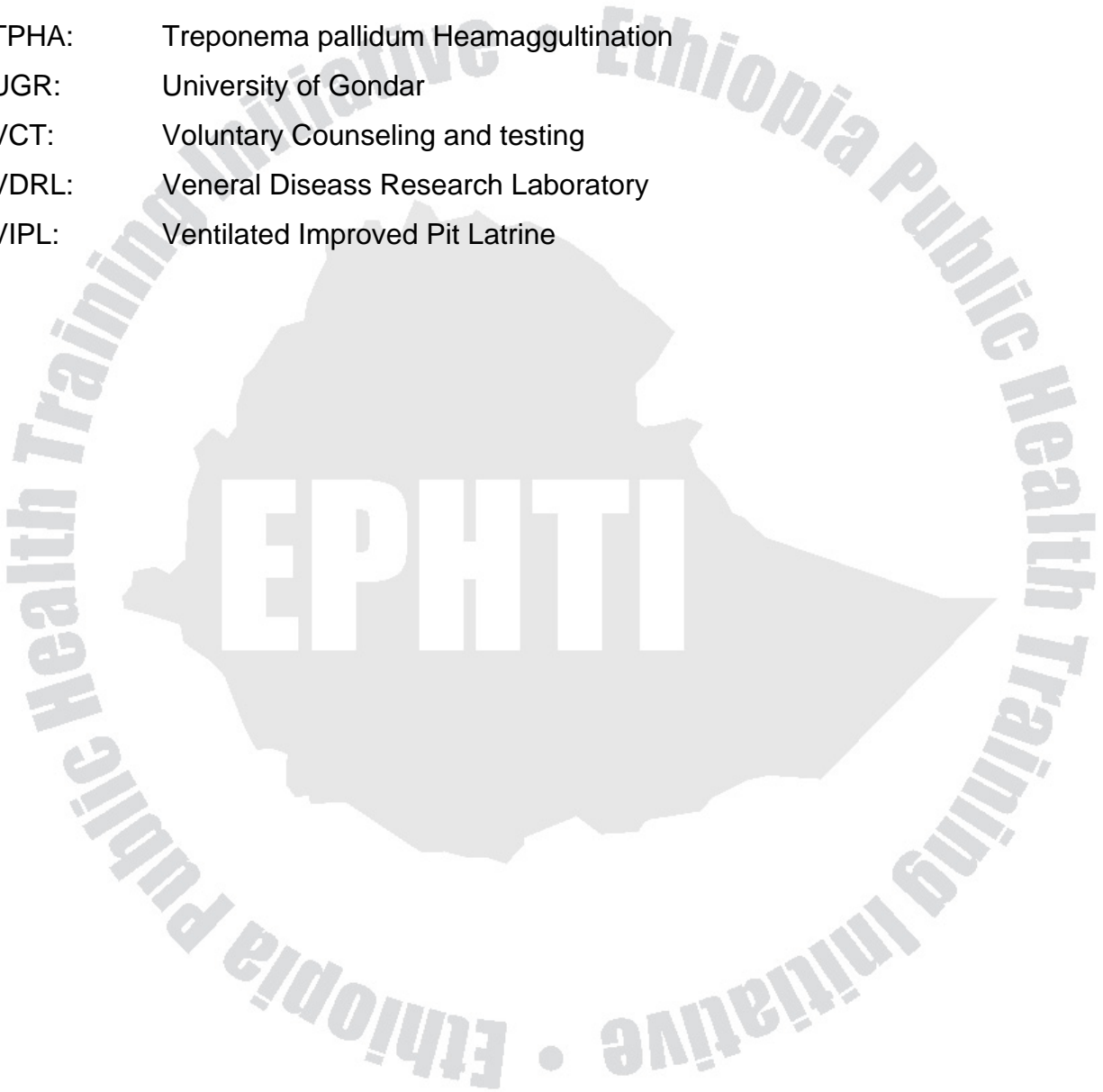


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UNIT ONE

INTRODUCTION

1.0 INTRODUCTION

1.1. Purpose and Use of the Module

The main purpose of the preparation of this module is to familiarize health professionals who could work as cooperative, collaborative and committed team especially at the health center level. The team members include Health Officers, Public Health Nurses, Environmental Health Professionals, Medical Laboratory Technologists, Midwives and Pharmacists. It can also be used by other health professionals including Health Service Extension Workers.

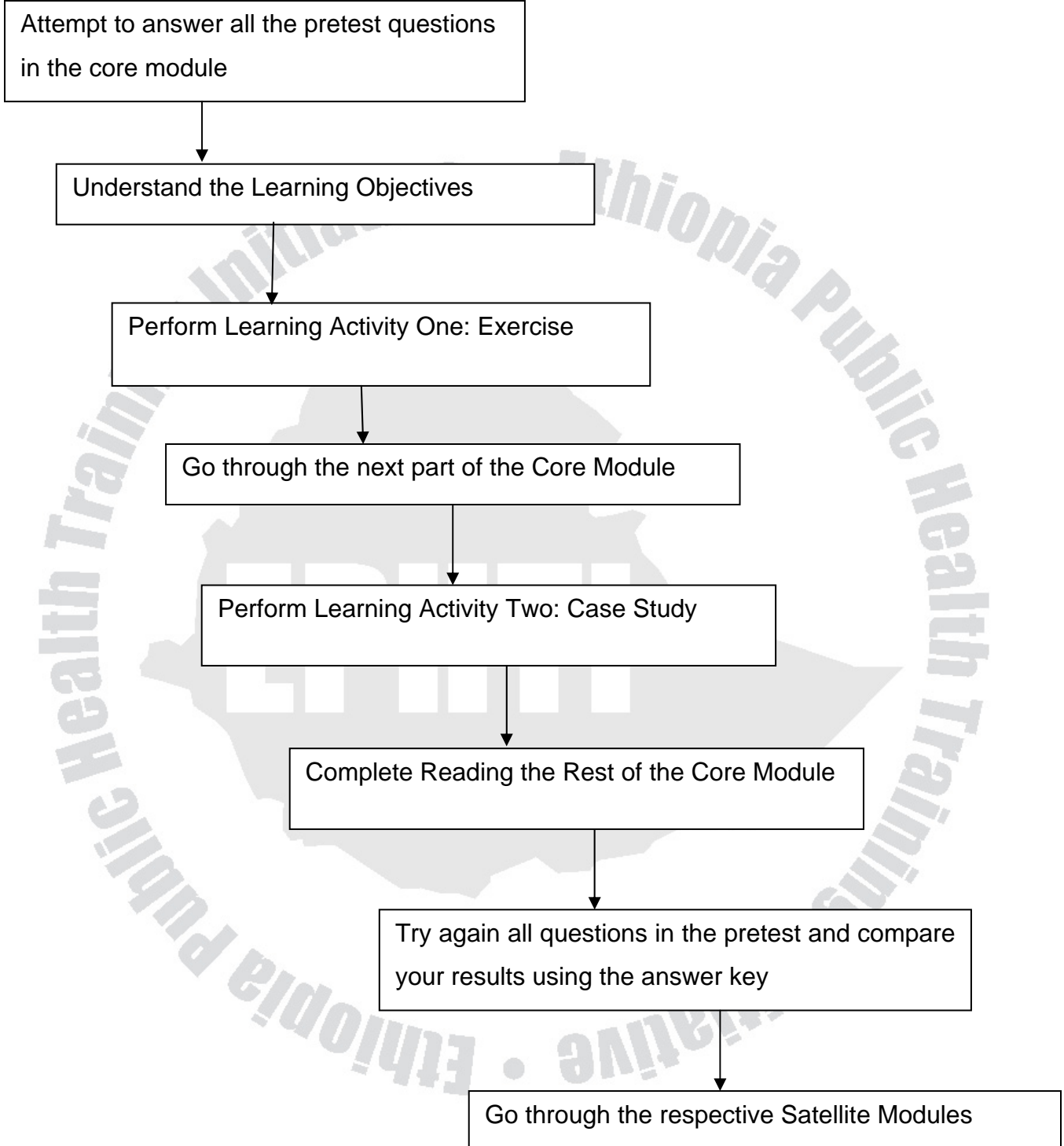
The module tries to show how an effective functioning health team could be defined, characterized and organized. It also shows the skills needed by the members, how to conduct team meeting and the over all activities to be performed by the health team.

The Core Module helps the different categories of health professionals how to work as a team. Hence, all team members are expected to go through the Core Module together before proceeding to the satellite modules.

The Satellite Modules concentrate on specific roles that need to be performed by each category. As much as possible, the Satellite Modules try to emphasize matters that are not fully covered by the Core Module. Hence, each category is expected to read and do the exercises that are put in the specific Satellite Module.

After going through the module, the health team members will be able to appreciate working in a team for the achievement of health goals and tackling public health problems of the community and the country at large. This module is not meant to substitute textbooks

1.2. Directions for using the Module



UNIT TWO

CORE MODULE

2.1. Pretest

Instruction

All categories of team trainees shall attempt to answer the questions presented below.

1. Which attributes of the health team are important in teamwork?
 - a) A principled leader
 - b) All members receive a job to be done.
 - c) All members participate in choosing the objective
 - d) All of the above
 - e) None
2. Which one is incorrect about a health team?
 - a) Has common goal and objective
 - b) People other than health professionals such as janitors and drivers are not parts of the team
 - c) Is guided by health needs of the community
 - d) Aims at alleviating community's health problems
 - e) None
3. Which of the following best defines a health team?
 - a) Is a group of people having common goal determined by community's health needs
 - b) Is a group of people whose goal is addressing professional development
 - c) Is a group of people from the same profession whose goal is to address community's health needs.
 - d) Is group of people whose aim is executing the duty assigned by the boss
 - e) None
4. Which one is incorrect about the difference between a team and a group?
 - a) In teams, members are mutually accountable for the outcome.

- b) In group, the leader is more authorized.
 - c) Teams have common approach to work.
 - d) In group, responsibility is focused on individuals.
 - e) Group and team are synonymous.
5. Which one is not the characteristic of an effectively functioning health team?
- a) A clear and elevating goal
 - b) Competent members
 - c) Unified commitment
 - d) Needs standards of excellence
 - e) None
6. Which one of the following is not an advantage of a team work?
- a) Increases self-actualization
 - b) Increases productivity
 - c) Increases autonomy
 - d) Increases individual confidence
 - e) None of the above
7. Which stage of team development is characterized by conflict and disagreement?
- a. Forming
 - b. Storming
 - c. Norming
 - d) Adjourning
 - e) None of the above
8. Which one of the following is responsible for monitoring performance of a team and removing barriers?
- a) Facilitator
 - b) Team leader
 - c) Institution
 - d) Team Members
 - e) None of the above
9. A health team in the operating room is an example of
- a) Primary team
 - b) Leadership team
 - c) Ad hoc team
 - d) All of the above
 - e) None of the above
10. One of the following is not characteristics of a useful team goal?
- a) Feasible
 - b) Measurable
 - c) Challenge team
 - d) Reflect the core purpose of the team
 - e) None of the above

11. Which type of skill is more important to view the organization/team as a whole and a total entity?
- a) Human relation skill
 - b) Conceptual skill
 - c) Technical skill
 - d) Communication skill
 - e) All of the above
12. Which type of team has shorter life span?
- a) Primary work team
 - b) Executive/management leadership team
 - c) Ad hoc Team
 - d) All of the above
 - e) None of the above
13. One of the tasks of a health team is to conduct community diagnosis. Which of the following is correct about community diagnosis?
- a) It provides a base line information for further works
 - b) It identifies community health problems
 - c) It indicates resources required for intervention of health problems
 - d) All of the above
 - e) None of the above
14. Health team members are expected to conduct health education. In which of the following settings can not be conducted?
- a) Market places
 - b) Schools
 - c) Health institutions
 - d) Churches
 - e) None of the above

15. Health team members provide outreach services. Which one of the following may not be included in outreach activities?

- a) Antenatal care
- b) Family planning service
- c) Vaccination
- d) Health education
- e) None of the above

2.2. Learning Objectives

At the end of the module, the student/user will be able to:

- Define team and health team.
- Differentiate between a team and a group.
- List the stages of health team development.
- Understand the approaches of team work in health.
- Understand his/her unique professional contribution to the achievement of team objectives.
- Appreciate that the inputs of each team member makes a difference in the achievement of the goal.
- Describe the characteristics of an effectively functioning health team.
- Describe the determinants of health team effectiveness.
- Understand the different skills that team members need.
- Understand and get involved in the different activities of a health team.

2.3. Learning activity one: exercise

Cooperative Square Exercise

This exercise is intended to demonstrate the importance of working in teams.

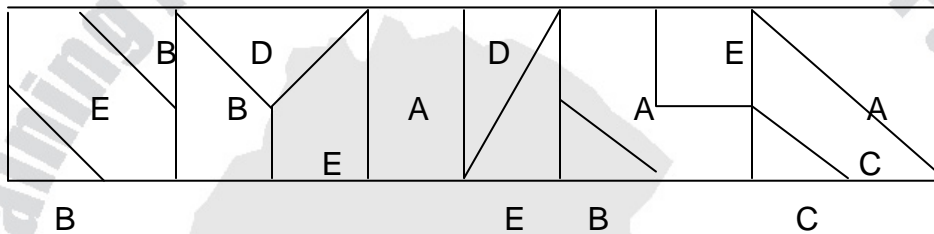
Essential elements to start the game

1. A facilitator
2. Groups of eight participants (five active players and three observers in each group)
3. Cardboard squares,

A set for doing the game/puzzle consists of five envelopes containing pieces of cardboard cut into different patterns, which, when properly arranged, will form five squares of equal size. One set should be provided for each group of five persons.

Procedure to prepare a set of cardboard squares, each 15 cm x 15 cm

- The square should be 15 cm on both sides.
- The pieces drawn to the halfway should be 7.5 cm, (note all marks are halfway).
- All similar pieces should be the same size.
- Place the squares in a row and make them as below:



After cutting the cards as labeled, put all pieces with letters marked into envelopes labeled A,B,C,D, and E.

4. Instructions/Procedures

A. For Participants in the Game

1. Each group need to receive an envelope which has pieces of cardboards for forming squares,
2. After opening the envelope, each group has to form 5 squares of equal size,
3. No member is allowed to speak when the game is started,
4. You can give pieces to others but you can not take/ask for a piece from any other person,

B. For Observers of the Game

1. Observe the person you have chosen to observe by sitting or standing opposite to him/her.
2. Notice and write down when the person does any of the tasks, such as behavior of the person you are observing was helpful or not.
3. Write what the person did and how it affects the team.

4. Also observe the entire team and how they did or did not work together.
5. Do not comment on personality.
6. Do not assist in doing the game.
7. If a participant is breaking the rules, gently tell the person or if necessary call the facilitator.

C. For the Facilitator

1. Read the instructions to all team members.
2. Give each group of five a set of squares in the five envelopes labeled A, B, C, D, E.
3. Fix time
4. Ask the group to start the game.
5. When the task is completed, ask each group to discuss the following questions
 - a. In what ways do you think each of you helped/hindered the group in completing the tasks?
 - b. How did members feel when someone holding a key piece did not see the solution?
 - c. How did members feel when someone completed the square incorrectly and then sat back without helping the group further?
 - d. What made the difference between not solving the game and solving it?
 - e. What did the observers see?
 - f. How are some of the things you learn from the game which is true of a real health team life? (Players/Participants first and observers next).

(Adapted with some modification from Notes and Guidelines for Developing Training of Trainers Programs with particular focus on Community Health Care in Ethiopia by Dennis Carlson and Beulah Downing, Poulsbo, Washington, Revised Novemeber1997.)

2.4. Definitions

Team

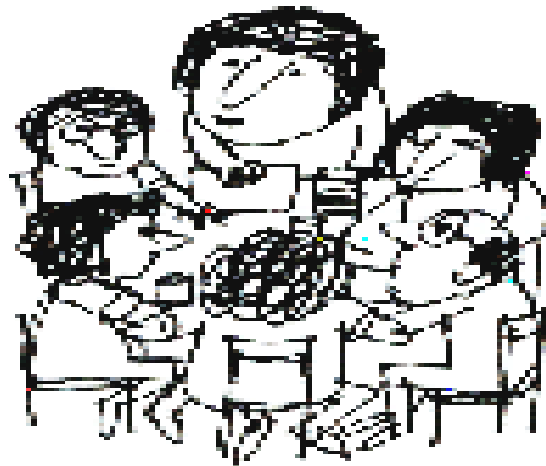
A **team** is a small number of **consistent** people **committed** to a **relevant shared purpose**, with **common performance goals**, **complementary and overlapping skills**, and a **common approach** to their work. Team members hold themselves mutually accountable for the team results or outcome.

Key terms of the definition are described below:

- **Relevant Shared Purpose:** The purpose or goal is defined by the members of the team working collaboratively; within this purpose each team member has specific tasks which are discussed and agreed upon.
- **Consistent Membership:** Members become comfortable with and knowledgeable about each others' skill levels and more committed to sharing their knowledge and skills to develop fellow team members as long as the team exists.
- **Complementary and Overlapping Skills:** Include technical or functional expertise, interpersonal skills, supervisory or management skills.
- **Commitment to a Common Approach to the following areas:** working methods and team process (documenting each work and individual work, methods for problem solving); roles and responsibilities (team versus job roles); behavioral expectations; the environment of the team which includes trust of each other.
- **Mutually Accountable:** Everyone is accountable all the time for the accomplishment of the results of the team, the process and functioning of the team as well as their own responsibilities. Other team members will compensate or contribute if some members are not able to achieve their specific responsibilities.

- **Common performance goals:** Needs to have a common performance goal that is closely related to the team's purpose.

The WHO definition of **Team Work** states as “Team work is coordinated action carried out by two or more individuals jointly. It implies commonly agreed goals, clear awareness of, and respect for other's roles and functions. It also implies that on the part of each member of the team, adequate human and materials resources, supportive cooperative relationships, open, honest and sensitive communications, and provision for evaluations is practiced”.



Health Team

The health team is a group of people who have common goal/objectives, determined by the community health needs, to the achievements of which each member of the team contributes, in accordance with his/her competence and skills and in accordance with the functions of others.

Integrated Health Care Team /IHCT/

It integrates a group of individuals with diverse training and backgrounds who work together as an identified unit or system. Team members consistently collaborate to health and health related problems of their clients that are too complex to be solved by

one discipline or many disciplines in sequence. In order to provide care as efficiently as possible, an IHCT creates formal and informal structures that encourage collaborative problem solving. Team members determine the team's mission and common goals; work interdependently to define and manage health problems; and learn to accept and capitalize on disciplinary differences, differential power, and overlapping roles. To accomplish these, they share leadership that is appropriate to the presenting problem and promote the use of differences for confrontation and collaboration. They also use differences of opinion and problems to evaluate the team's work and its development.

Health workers trained to follow the principles in team work are more responsive to the needs of the community they serve. The services they provide are more cost effective and are more satisfied in their career paths and their profession.

“COMING TOGETHER IS A BEGINNING, KEEPING TOGETHER IS A PROGRESS, AND WORKING TOGETHER IS A SUCCESS” Henry Ford

2.5. Similarities and Differences of a Team and a Group

The terms team and group are not exactly the same.

A group is a collection of two or more individuals interacting and interdependent, which has come to achieve a particular objective. It is characterized by frequent communication among members over time and a size small enough to permit each member to communicate with all other members on a face to face basis as a result each group member influences and is influenced by others.

Basically a group is a collection of individuals who come together for a joint effort but whose outcome relies primarily on individual contribution of its members. On the other hand a team has members who work collectively in a way it magnifies the group's

impact, above and beyond that generated only from individual effort. More specifically we can see differences in the following table.

CHARACTERISTICS	GROUP	TEAM
1. Accountability	- Members may not be accountable to the action of the group. They are only accountable for individual effort of action.	- Members share a common goal and purpose, therefore, each team member is mutually accountable for the team's outcome.
2. Areas of responsibility	- Focus on individual roles, tasks and responsibility, even though group may cooperate	- Individuals cooperate, communicate and share responsibility among each other.
3. Approach to work	- They communicate the assessment and tasks are distributed to individuals. Individualized approach to work.	- They discuss as a team and determine goals. They jointly develop action plan. They have common approach to work.
4. Level of authority	- The leader is more responsible and authorized than the members.	- The leader is equally responsible and authorized like any member of the team.

2.6. Characteristics of Health Teams

Effective functioning health teams share similar characteristics with other teams and the following eight basic characteristics are identified:

1. **A clear, elevating goal.** All members of the team should be able to visualize the results of gaining the goal. The goal should be challenging and should make a difference.
2. The team should be driven by the **results of their efforts.**
3. **Competent members;** the team should be made up of people who can perform the roles in which they are functioning.
4. **Unified commitment;** all members of the team agree on the goal and feel a strong, urgent, and personal commitment to reach the goal.
5. **A collaborative climate;** To create a good relation and working environment, members of a team need to maintain honesty, openness, consistency, competence and respect.
6. **Standards of Excellence:** involve standards from many different sources.
7. **External Support and Recognition:** A team functions much better when it is recognized for its accomplishments by the greater organization or by the society. It is important to have ways to provide this recognition.
8. **Principled Leadership:** The right person in a leadership role can add tremendous value to any collective effort. Leaders are responsible for sustaining the vision of the team. They empower the members of the team to enhance their creative and functioning abilities. They establish trust in their leadership by showing honesty, openness, consistency and respect. The leader must have high energy and intellect as well as good social skills to relate to the team members.

In general all teams need:

1. Clear roles and accountabilities.
2. An effective communication system.
3. Methods for monitoring individual performance and providing feedback.

4. An emphasis on fact-based judgments.

2.7. Advantages of Team Work

ONE IS JUST ONE AND TWO ONES MAKE ELEVEN

There are at least five advantages of teamwork in health care setting, which are listed below:

1. Improves performance outcomes

Improved performance outcomes are the most important reason to implement team functions. When the work to be accomplished requires a collective effort (i.e. more than one person to do it), the best outcomes occur when there is synergistic teamwork, with each team member contributing to the effort and each team member's quality of contribution being improved or enhanced as a result of ideas and stimulus others bring to the process.

2. Increases employee's acceptance of responsibility

Teams have the capability of increasing employees' level of responsibility acceptance for several reasons. When real responsibility and authority is transferred to the team, members feel more ownership.

3. Empowers teams

Acceptance of accountability, responsibility and authority increase in a team-based organization. Leaders who have shared responsibility with employees in the past can transfer more responsibility and authority to a team.

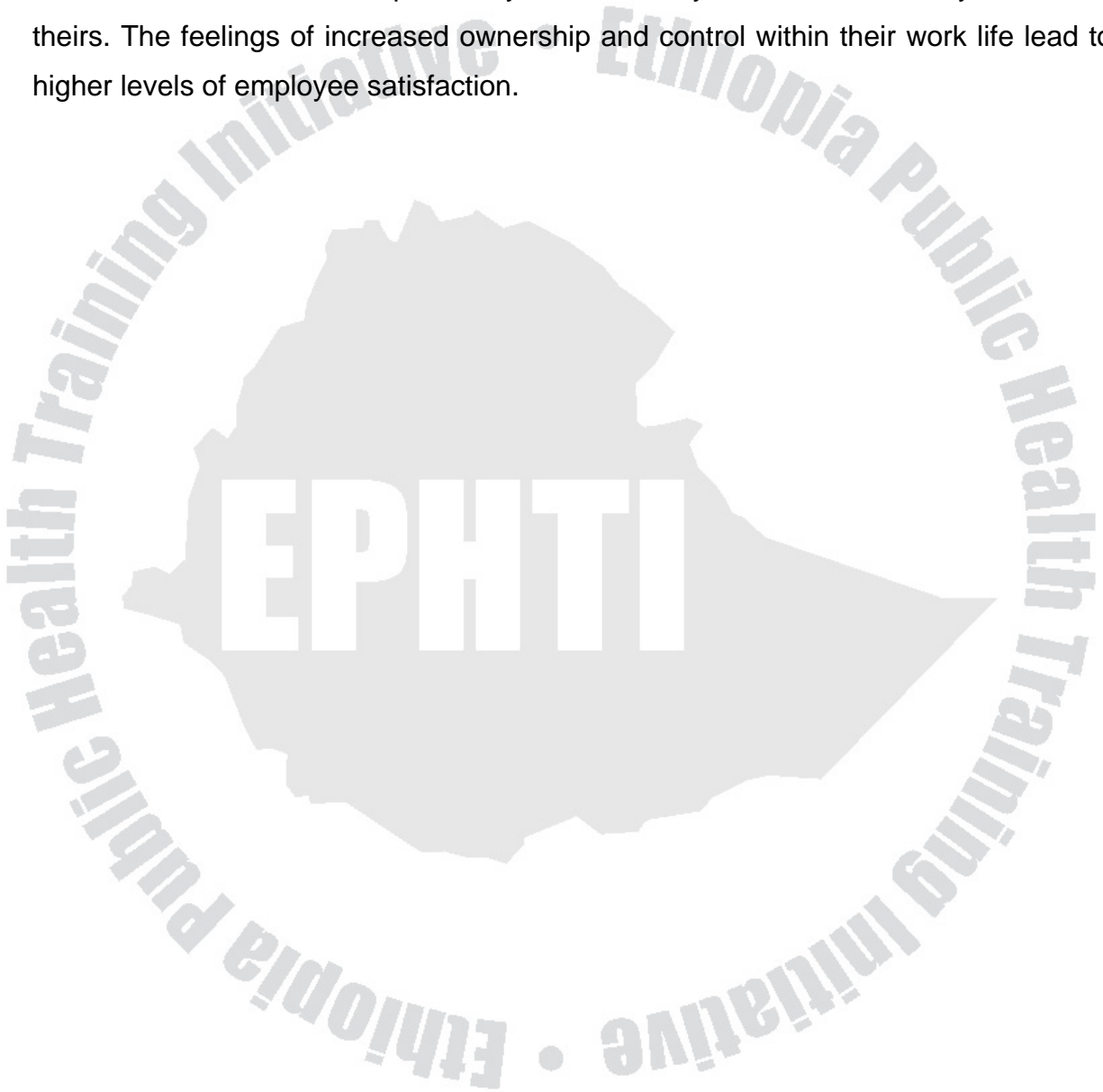
4. Frees Managers for other functions

If teams take over responsibilities of the manager in a day to day operation, managers can focus on long neglected aspects of their jobs such as coaching,

mentoring and teaching employees, or developing long-term plans for their work area.

5. Creates higher employee satisfaction

When teams have real responsibility and authority, the decisions they make are theirs. The feelings of increased ownership and control within their work life lead to higher levels of employee satisfaction.



Advantages of having a teamwork approach for individuals, managers and organizations

Individual Advantages	Managerial Advantages	Organizational Advantages
<ul style="list-style-type: none"> - Increases self-esteem, self-actualization - Opportunity to learn new skills - Greater ability to affect decisions - Greater job satisfaction - Increases autonomy - Sharing of knowledge - Increases peer respect - Increases creativity - Increases sense of belonging - Increases feeling of control - Improved flexibility - Increases confidence - Increases appreciation of other's efforts - Moved from I/me concept - Better utilization of skills 	<ul style="list-style-type: none"> - More flexibility to do own job - Can concentrate on "managing" - Can draw from a variety of perspectives - Problems solved at "local" level - A way to share the load and responsibility - No longer wasting time - Increases time for coaching/mentoring - Wealth of experience broadened - Less confusion - Less blaming, we/they behavior - Increases learning opportunities - Increases creativity - Give a new perspective - Moved from being a director to a facilitator - Freedom to concentrate on other things - Able to do more 	<ul style="list-style-type: none"> - Less affected by staff turnover - Increases productivity - Better ideas/decisions due to work group synergy - Increases accountability - Input broader perspective, diversity, multidimensional - More goal consistency - Less expense - Improves value - Ownership, shared responsibility and accountability, collective problem solving - Increases commitment - More heads better than one - Improves quality - Increases client satisfaction - Decisions better, well-through-out - Uniformity

2.8. Team Approach

Team approach is defined as the way that management attempts to bring about balance among the different people concerned. Well developed and efficient teams are those

that can quickly evaluate a complex situation and decide how to state the problem, so the members of the team can use their skills to focus on an integrated approach.

The success of team's work depends to a great extent on how well its members work together and with the people they serve. Good management can help a team to work together harmoniously and efficiently through:

- Setting and sharing objectives
- Encouraging good personal relations
- Distributing tasks
- Coordinating the activities of the team
- Applying sound organizational principles

Team approach is not a recent innovation. Team work has existed for a long time perhaps for hundred of years in many countries.

History of Health Team Approach in Ethiopia

The concept of team approach in health care institutions in Ethiopia dated back to the mid of 1950's with the establishment of Gondar Public Health College and Training Center, which trained competent health team, composed of Health Officers, Community Nurses, and Sanitarians. Ever since the establishment of the college, **Team Training** is one of the corner stones and base of the Philosophy of Public Health.

This Philosophy is further strengthened and more emphasized in GCMHS, University of Gondar and put as one of the **Educational Principles**. It is stated as "Training of health professionals in **Rural and Urban** teaching and service settings so that graduates acquire knowledge and skills relevant to the needs of the community and practice setting, providing **Community Oriented Teaching** that enable a graduate to identify health problems of the community and intervene to improve the patterns of health care. Training different health professionals together as a **Team** to establish and enhance the ethos of **Teamwork**, early professional socialization, and respect for colleagues."

At present, however, team training of health care professionals is practiced in almost all Ethiopian Universities that train health professionals.

2. 9. Types of Health Team

Team can be classified in many ways. In this module, it is classified as: *Primary Work teams, Executive or Management Leadership teams and Ad-hock teams.*

Primary Work Teams

It comprises the basic structural unit in a team-based organization. When people refer to self-directed work teams, they usually mean a primary work team.

Primary work team members are selected because they possess skills and talents needed to help this team do its work. Team members don't have another primary job because this is their work.

Examples of primary work teams include patient care teams, a specialty team in the operating room, or trauma team in the emergency department.

Executive or Management Leadership Teams

The primary purpose of executive and management teams is to provide management and leadership at some level in the organization. Members of these teams often have other primary work in the organization and may be members of many teams.

Leadership or management teams include the executive team or the department leadership team. The University Management Committee is one example of executive team. These teams exist to lead others or to manage specific functions or processes.

Ad-hoc Teams

Ad-hoc teams are teams that have shorter life spans and may be either problem-solving teams, such as quality teams, or creative teams such as a design or project team.

These are temporary teams that are formed to meet a specific purpose. When the work is finished the team disbands. These temporary teams may exist for years, but they are not permanent organizational structures.

Other types of teams are *Innovative Teams, Work Teams and Problem Resolution Teams.*

2.10. Members of Health Team

There is no universally applicable composition of a health team. The composition could be defined by many factors: task to be performed, the nature of the working place, quality of the expected outcome, availability of particular professionals, etc. The members of health team include all those working together; e.g. health workers and the supporting staff: clerks, drivers, and cleaners are all parts of the team. It may also include a community health worker chosen by the village people. It is important that their work and contributions be recognized as those of the technical staff. For example, the Gondar 'Health Center Team' comprises of health officers, environmental health, nurse and laboratory departments.

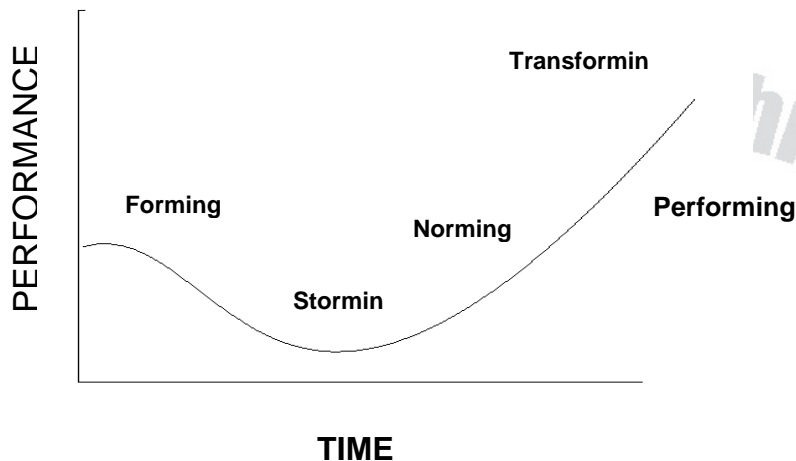
2. 11. Development of Health Team

For team development to occur, members need to learn to handle the various feelings and behaviors in each of the different stages. To help them, the coach needs to make them aware of the stage they are in and what needs to be done in order to move on.

Another term for team development is team building. High performing teams do not just spring up ready to go. Teams generally need to pass through several developmental stages before they become productive or a well functioning unit.

Team development can be seen in terms of persons' life span; toddler hood to childhood to young adulthood to maturity. Things happen at each stage, but it is only at the maturity stage where performance takes off. Teams move like these stages in a few months.

Stages of Team Development



(Adapted from the book entitled as “Team-Based Health Care Organizations Blueprint for Success, 1996, USA).

The figure indicates the stages of team development. It starts with forming stage whereby team members start to feel for one another and yet individual performance predominates. The second stage is storming stage that is characterized by conflict and disagreement thereby the performance of the team will be much lower than the previous stage. The last three stages show good performance of the team.

There are five stages of team development:

Stage 1. Forming

When a team is forming, members cautiously explore acceptable group behavior. People’s role change from “individual” to “member”. They may change the authority of the leader to coach, but they also tend to be dependent on them for orientation and direction.

When a group is just being formed, members generally have these feelings:

- Excitement, anticipation, optimism.

- Pride in being cohesion for the project.
- Tentative initial achievement to the team.
- Anxiety, fear, or even suspicion about the job ahead... and demonstrate these behaviors.
- Polite, fairly formal interactions with other members.
- Attempt to define the task and decide how it will be accomplished.
- Attempt to figure out what is acceptable group behavior and how to deal with group problems.
- Make first decisions about what information need to be gathered.
- Discuss concepts and issues.
- Discuss issues not relevant to the task; difficulty in identifying relevant problems.
- Complain about the organization and barriers to the task.

Useful activities/tools the team leader can use to help forming groups are:

- Introduction/inclusion activities.
- Clarify the mission
- Establish ground rules for team behavior.
- Provide any needed training.

Stage 2. Storming

The Storming stage is critical to effective group development, but usually is a difficult time for the team. The task seems harder than they expected. They become impatient and argumentative. They resist collaborating with each other. At the same time, as a result of conflict, individuals establish their own expertise within the group, they forge ways of working with one another, and they learn to respect one another's point of view. If the team gets stuck here and does not resolve its interpersonal and role issues, it will never reach optimal performance.

At the Storming stage, members generally have these feelings:

- Resistance to the task and to Quality Assurance approaches.
- Varying (though often negative) attitudes about the team, the team members and the project's chance of success and demonstrate these behaviors.

- Arguing among members, even when they agree on the real issues.
- Defensiveness, competition, withdrawal.
- Questioning the purpose of the project.
- Unrealistic goal setting; concern about excessive work.

Useful activities/tools in the Storming phase are:

- Conflict management techniques.
- Clarification/teaching of QA concepts, tools, team dynamics, meeting methods, and roles.

Stage 3. Norming

During this stage, members begin to accept the team, their roles on the team, and the individuality of fellow members. Conflict is reduced as members become more cooperative. If the team stalls here, effectiveness may be reduced because of the members' new desire to please one another. At this point, the team leader needs to manage team dynamics-such as balancing participation-and also continue to provide necessary training and feedback.

At the Norming stage, members generally have these feelings:

- Acceptance of membership in the team.
- Relief that everything is going to work out...and exhibit these behaviors.
- Commitment to working out differences.
- Giving and receiving feedback constructively.
- More expression of feelings.
- "Playful" interactions.

Useful activities/tools the team can use in the Norming phase are:

- Continue the fostering of shared responsibility.
- Refocus on the agenda or purpose (when necessary).
- Provide training in QA tools or group process as needed.

Stage 4. Performing

At this stage, the team starts diagnosing and solving problems, and choosing and implementing changes. Members accept each other's strengths and weaknesses, and know what their own roles are. They gain insight into personal and group processes. The coach helps the team to perform more self-evaluation and accept more leadership responsibilities.

During the Performing stage, group members generally have these feelings:

- Satisfaction with the team's progress.
- Trust in one another... and exhibit these behaviors:
- An ability to anticipate group problems and prevent them or to work through them constructively.
- A willingness to take risks.
- Commitment to process and goals.

Useful activities/tools for the Performing phase are:

- Training in QA tools or concepts as needed.

Stage 5. Transforming This stage is often called a stage of change and it is added here to reflect the truly synergistic result of highly performing team. In this stage, functions are loosely defined with team members moving freely among those responsibilities. There may be change, such as losing a team member or redefining the teams' mission.

ADJOURNING: belongs to the transforming stage, in which the team finishes its job and prepares to disband. This stage normally occurs in teams established for special purpose in a limited time period. E.g. Task groups, special committee, etc.

2.12. Goals of a Health Team

Goals are the intended end result or achievement of programs or activities. Setting goals should be seen as a means to an end rather than an end in itself.

Criteria for effective goals:

All goals are not equally effective in achieving what we want to achieve. So how do we frame goals that work best? Some important characteristics of effective goals are as follows:

Goals should be positively framed: A positive goal for example might be to ensure the efficient use of team time by conducting meetings briskly and punctually. It is very difficult to work to negative objectives. For instance, a negative goal might be to stop wasting time by poorly conducted meetings and unpunctuality.

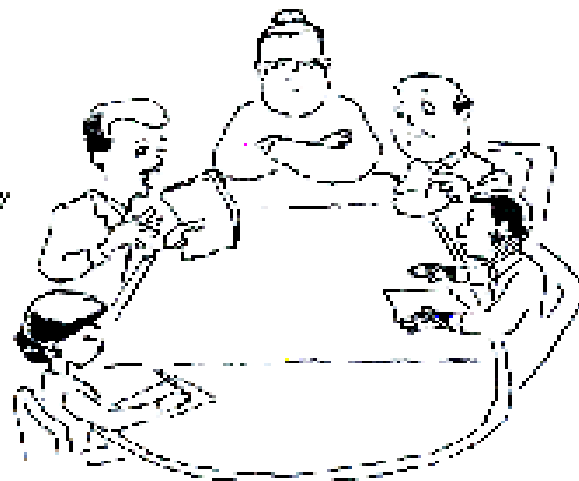
Goals should be acceptable: Goals must be acceptable in the context of personal and professional values, other activities, both within and outside working lives.

Goals should reflect the core purpose of the team

Goals should be feasible

Goals should be measurable

Goals should challenge the team. Team that faces significant challenge or that develops an ambitious goal has a greater sense of urgency that forces them to focus efforts in a unified direction. The true strength of a team is realized when it faces and overcomes seemingly unbreachable obstacles to attain a worthy goal.



2.13. Roles of Agents in a Health Team

The number and type of people or professionals in a team may depend on the nature of the tasks to be performed and the goals to be achieved.

The members of a team include all those working together. There are about four agents that have roles in achieving successful teamwork to undertake which are also true for a health team. These are the institutions, facilitator, team leader and team members. The duties/ activities and responsibilities of each agent are discussed below:

I. The Institution

The institution is represented by the manager who has set up or empowered the team. An institution is not actually a member of the team, but has the following responsibilities:

- Remove barriers
- Give permission to training
- Ensure implementation
- Monitor performance and
- Provide long-term support, recognition and rewards.

II. Facilitators

These are “team experts” who help the team get started and serve as resource to help to function as a team. Their activities and responsibilities are:

- In meetings, they assist the team leader, performing such tasks as: helping to make sure everyone has a voice, including the “quiet” members.
- Keeping the team on target and moving toward its goals
- Serving as process expert, and
- Providing stability for the team.

III. Team Leaders

The team members select their leader whose duties and responsibilities are:

- Calling and conducting meetings
- Preparing for meetings
- Setting up the agenda and physical space

- Participating with other members in discussing agenda items and making decisions.
- Serving as official record keepers of all documents that come to or from the team.
- Representing the team to the management/institution.
- Serving as the interface with other teams or sectors/departments.
- Act as role model, providing vision, problem solver, and liaison among other teams, team leaders and management.

IV. Team Members

These are the people who are “experts” in the activities in which the team is engaged and who do the work. The duties and responsibilities of team members are:

- Perform tasks assigned to them.
- Share their experience and knowledge with other members.
- Work with other members to standardize and document process.
- Work with others to identify ways that can improve the process and collaborate to make those improvements.
- Work with others in identifying and prioritizing problems of the community, plan, implement, try to solve them and evaluate together.
- Abide by the time assigned for the program.

2.14. Learning Activity Two: Case Study

Chairman of Sabiya Giorgis Peasant Association reported to Lay Armachiho Woreda Health Office that many people are dying from a disease whose manifestations are fever and headache. He said that about fifty people died in two weeks time. They had reported the case to the nearby clinic but there was only one health assistant in the clinic that he couldn't come to the area to assess the problem. Since the situation was worsening, the chairman was obliged to bring the case to the Woreda Health Office. In the woreda, there is a health center known as Tikil Dingai Health Center.

The Woreda Health Office is staffed by a health officer, pharmacist, environmental health, nurse, laboratory technologist and midwife. In Tikil Dingai Health Center, the above mentioned categories of health professionals are available.

Questions:

1. What do you think is the problem?
2. Who should be involved in the investigation and management of this problem?
3. What do you need for the investigation and management of the problem?
4. What roles can be played by all members of the team?
5. What specific roles can be played by the health officer, laboratory technologist, nurse, environmental health professional, pharmacist and midwife?

2.15. Determinants of Health Team Effectiveness

The following factors can determine the effectiveness of health team work

1. Appropriate designing and planning of the team work
2. Commitment of the team members
3. Relation of the team members with each other and with the community
4. Skill of the team leader and members
5. Coordination
6. Working environment of the team work
7. Motivating and dissatisfying factors
8. Monitoring and evaluation of the team's work

1. Appropriate Designing and Planning of the Health Team Work

Planning is always the first critical stage of any program. Carefully prepared plan helps to attain the goals/objectives of the team. When planning team work, things like setting goals and objectives, defining the members; roles and responsibilities, designing monitoring and evaluation methods, scheduling of the work, etc. should be considered.

1.1. Setting of Appropriate Team Goals and Objectives

Clear, elevating goals/objectives should be set by the health team and all members of the team should be able to visualize the results of gaining the goal. The goal should be challenging and should make a difference.

1.2. Identifying the Members and Defining Their Roles

The team needs to comprise competent members who can perform the task to which they are assigned. The roles and responsibilities of each member of the team should be clearly mentioned from the outset so that each member of the team knows what to do and duplication of roles will be avoided. Similarly, if the roles are clearly defined, no important role will be missed by the team. Everyone is accountable all the time, for the accomplishment of the results of the team, the process and functioning of the team as well as their own responsibilities. If the team failed to do this, they may not successfully achieve their goals/objectives.

2. Commitment of the Health Team Members

Commitment of the team members is crucial for the success of the teamwork. All members of the team need to agree on the goal and feel a strong and personal commitment to reach the goal.

3. Relation of the Team Members with each other and with the Community

There must be good relationship among team members and between the team and the community. To establish good relations, a health team needs to work with the community and this comprises of the following four steps:

Step 1- Listen, learn, and understand

To work with people and help them, it is essential to understand their ways of life. These can be learned only by living with people, listening and watching. It is not recommended to ask too much questions, this annoys people. Health team may observe and learn about communities concerning their work and living standards, family life, social and political structure, population structure, value, beliefs and customs, and health attitudes.

Step 2- Talk, discuss, and decide

The health team should work with the community towards recognizing its health problems and putting them in order of priority. Discussion can be formal or informal:

Informal discussion with families, people, political leaders and religious leaders, etc. will produce further ideas. From these talks it is possible to make a list of the main problems that concerns the community.

Formal meeting conducted by a community leader could be held to try to decide which the most serious problems are and what can be done about them. This could be difficult and several meetings might be needed before any clear decision can be reached. In this way the people are encouraged to participate in solving their own health problems. However, health staff should be cautious in such meetings, as community leaders are likely to try to persuade the people to agree with them about which problems should be given priority.

Step 3- *Encourage, Organize and Participate*

When the people have decided what the main health problems are and agreed to their order of importance, a plan of action must be prepared. The health team works with the community to put the plan into action, to make changes that will lead to improvement over a period of time.

Step 4- *Inform*

Once a plan of action has been proposed, discussed and accepted, the community should be informed of its objective and of any decisions taken. If people do not know what is intended, they are unlikely to do anything to help in achieving it.

4. Skills of the Health Team Leader and Members

A skill is an acquired and learned ability to translate knowledge into performance. It is the competency that allows for performance to be superior in the field where the worker has the required skill. All health team members and leaders need to have technical, human relation and conceptual skills. The degree of skill required may vary between the members and the leaders, for example, conceptual skill is highly needed by the leader.

Technical Skill: It basically involves the use of knowledge, methods and techniques in performing a job effectively. This skill is acquired through education and training.

Human Relation Skill: It is the ability to work with other people in a cooperative manner. It involves understanding, patience, trust and genuine involvement in interpersonal relationships.

Conceptual Skill: It is the ability to view the organization/team as a whole and as a total entity. It also reflects the mental abilities of team members to visualize the complex interrelationships in work areas, relationships among people, among various organizations in the health system and even between its external environments. It permits team members to understand how the various factors in particular situations fit together and interact with one another.

In addition to the above-mentioned skills, **communication, decision-making and problem solving skills** are required for effective functioning of health team.

Communication Skill

It is common experience that personal relations within a team can be difficult. Difficulties are often caused or made worse by poor communication within the team and between the leader and the team members. In the same way, difficult relations may cause, or make worse, poor communication. A team leader should, therefore, pay special attention to the quality of team relations, and of communication as a means of maintaining good relations.

To encourage communication, the team leader should always observe certain principles:

- All team members should be free to express and explain their views and should be encouraged to do so.
- A message or communication, whether oral or written, should be expressed clearly and in the language and terms that can be understood by all concerned.
- Communication has two elements - sending and receiving. When the message that is sent is not received, communication has not taken place. Therefore, the team

leader (or other communicator) should always use some means of checking that the intended effect has taken place.

- Conflict or disagreement is normal in human relationships; it should be managed in a way that will achieve constructive results.

Some Communication Skills and Techniques

Disagreeing with Respect

- **Reveal discomfort immediately.** Don't store up feelings and then dump them all at once on the other person.
- **Stick to the present.** It is not helpful to bring up the past during disagreements.
- Don't just complain, but offer a plan for change. The goal is constructive problem solving, not griping.
- **Use active listening.** Before you respond to a person's statements, repeat it back to him/her using your own words.
- Communicate feelings using "I" statements. Think "How does this make me feel?" and state that to the other person, rather than accusing them of making you feel a certain way. Take responsibility for how you feel.
- **Allow time to finish the disagreement** without walking out in a huff, ending with a sarcastic comment, or becoming violent.
- Learn the difference between "time out" and abandonment: "time out" says, "I need a break. Let's start the discussion again in ten minutes." Abandonment is walking out not saying where you are going or when you will be back to continue the discussion.
- Allow for differences in communication style. Do you talk out a problem out loud, or do you reflect on it quietly and state the conclusion of your thinking?
- **No audiences.** Do not involve another person in your disagreement unless it is a third party you have both agreed to involve.
- No name-calling, threats, or "silent treatment."
- **Focus on behavior, not character.** "Do not attack another person's character. Talk only about the behaviors involved.

Example of attack on character: "You are thoughtless and stupid."

Example of focus on behavior: “I am irritated because the work you did was incomplete and did not include changed we agreed you would make.”

- **Agree to disagree.** It is possible to understand another person’s point of view without agreeing with it. You may not be able to resolve every issue to your liking, but you can respect another person’s right to a viewpoint with which you do not agree.

Decision - Making Skill

Making a sound team decision is a challenge for any team. Hence, team members, be it in big or small team, need to have minimal decision-making skill. Team members need to attain consensus around a course of action. This means they have to know how to work together to identify options and come to shared agreement on which options make the most sense.

The decision-making process comprises the following steps:

1. Identifying an existing problem
2. List possible alternatives for solving the problem
3. Select the most beneficial of these alternatives
4. Implement the selected alternatives
5. Gather feedback to find out if the implemented alternative is solving the identified problem.

Problem Solving Skill

Many times, people consider problem solving to be the action an individual or a team takes to take care of a situation. Though action is important, understanding the problem and suggesting for the action is more important.

Generally, the team will undertake the problem solving process as part of the team meetings. Each stage of the process will involve discussion and coming to various consensus decisions among team members. Individual members will also take on assignments, usually involving gathering and analyzing information on some part of problem that they report back to the entire team.

The steps in the problem solving process

1. Recognize and define the problem
2. Collect information and analyze current process
3. Identify possible causes for the problem
4. Generate alternative actions to eliminate causes
5. Select the actions that seem best and implement them
6. Assess the change and learn
7. Make the change permanent and start over

5. Coordination

To coordinate activities or groups of activities is to bring them in to proper relation with each other so as to ensure that everything that needs to be done is done and that no two people are trying to do the same job. Coordination helps work to progress smoothly. Coordination is the means of:

- Distributing authority
- Providing channels of communication and
- Arranging the work so that
 - The right things are done (what?)
 - In the right place (where?)
 - At the right time (when?)
 - In the right way (how?)
 - By the right people (by whom?)

When an activity is coordinated, everything works well: a coordinated activity is orderly, harmonious, efficient and successful. When an activity is not coordinated, it is liable to fail in its objective: an uncoordinated activity is disorderly, discordant, inefficient and unsuccessful.

6. Working Environment of the Team Work

Both the internal and external environment should be conducive to achieve the goals and objectives of the team. Factors in the internal environment that can influence success are like the relation between the members, relation between the members and the team leader, trust among the members and leader of the team.

Trust can be gained when the following attributes are present:

- **Honesty:** truth telling, integrity, and no exaggerations among team members;
- **Openness:** a willingness to share opinion, ideas and feelings, even when it is uncomfortable to do so, receptivity to new information and to the perceptions and ideas of others.
- **Consistency:** predictable behavior and responses. Congruence between what you say and what you do.
- **Competence:** Capable of doing what is expected and can do the job for which he/she is assigned.
- **Respect:** treating all people with dignity and fairness.

Examples of factors in the external environment, which can influence performance of the team, are like the health policy, the political environment, availability of resources and infrastructure, support and recognition by the community. External support and recognition can enhance the performance of the team. The team's performance will increase when it is recognized for its accomplishments by the greater organization or by the society.

7. Motivating and Dissatisfying Factors

Motivation factors

Motivation is an inner impulse that makes a person to act in a certain way. There are two groups of factors that encourage people to apply their ability and energy to work, and that makes people dissatisfied at work. These are motivators and dissatisfiers.

Some of the common motivators in work are:

1. **Achievement-** most people like to do things well. They like to succeed. Their satisfaction in success and in getting things done well comes largely from achieving what they expect to be able to achieve and what they aim at achieving.
2. **Recognition** – very few people are satisfied with simply knowing in their own minds that they have been successful. Most people like others also to know of their success.

3. **The work itself**-people like to do useful and worthwhile work; helpful to other people and helping themselves achieve their ideas. The staffs of an organization like to do work that they can see as contributing to the objectives of the organization.
4. **Responsibility**- to have responsibility is to be able to accept the consequences, good or bad, of a decision or an action. Most people welcome responsibility; some fear it.
5. **Advancement** –it is a form of recognition. Recognition without reward is not very convincing. People prefer recognition that comes in a tangible form such as an increase of salary or more responsibility, with freedom to use their own initiative, which leads to job satisfaction.
6. **Self - improvement**- people like to become mature, to develop as people. Many make great sacrifices to improve themselves and their families.
7. **Incentives**- Incentive is one of the motivating factors to have effective functioning of health team. Incentives motivate the member for better achievement of the team's goal/objective. The following are some of the incentives:
 - Material and financial incentives
 - Recognition for better performance given by the superiors and the community

Dissatisfying Factors

Things that make people displeased with their work are known as dissatisfiers or demotivating factors. The team members should try to avoid dissatisfying factors and be aware in advance.

Some of the common causes of dissatisfaction are:

1. Incompetent supervision
2. Poor personal relations
3. Poor leadership quality
4. Low pay
5. Bad working conditions



THE DANGER TO “Team Work”

There were four people named **EVERYBODY**, **SOMEBODY**, **ANYBODY** And **NOBODY**.

There was an important task to be done and **EVERYBODY** asked to do it.

EVERYBODY was sure **SOMEBODY** would do it.

SOMEBODY got angry about that, because, it was **EVERYBODY'S** job, but **NOBODY** realized that **EVERYBODY** thought **ANYBODY** could do it.

It ended up that **Everybody** blamed **Somebody** when **Nobody** did what **Anybody** could have done it.

8. Monitoring and Evaluation of the Team's Work

Monitoring

It is observing, measuring, recording and taking corrective actions. Many health activities take place at the same time, and the health team needs certain 'tools' to watch, or monitor, the work. The purposes of monitoring are as follows:

Monitoring of inputs which ensures:

- Resources are available as planned.
- Community groups or individuals participate as expected.

Monitoring of process which ensures:

- The expected functions, activities and tasks are performed in accordance with set norms and schedule

Monitoring of outputs which ensures:

- Services are delivered as planned
- Training results in new skills or higher levels of skill
- Decisions are timely and appropriate
- Records are reliable and reports are issued
- The community is satisfied.

Evaluation

It is judgment of value, based on observation or measurement or examination. To evaluate teamwork for its effectiveness is to judge the value of results achieved by the health team. It necessitates measuring the extent to which people get the services that were planned to meet their needs, and assessing how much they benefited from the services. The information obtained is used to improve the quantity, quality, accessibility, efficiency, etc. of services.

The general approach to evaluate for effectiveness consists of the following five steps:

- Deciding what aspects of the program are to be evaluated and how effectiveness is to be measured
- Collecting the information needed to provide the evidence
- Comparing the results with the targets or objectives
- Judging whether and to what extent the targets and objectives have been met

- Deciding whether to continue the program unchanged, to change it, or to stop it.

Recording and reporting are important for monitoring and evaluation of the team performance. Records are usually written information kept in notebooks or files; they may also be kept on tapes or be computerized. Records help to:

- Learn what is taking place
- Make effective decisions
- Assess progress towards goals
- Take corrective action for improvement.

2.16. Activities of a Health Team

The activities of a health team depend on nature and type of works. Some of the most common activities to be undertaken by a health team with emphasis on a health center team are the following:

2.16.1. Community Diagnosis

Community diagnosis is a method of identifying health problems in a community or group of individuals. This provides basis for decision on the need for intervention, the type of intervention needed and target group at whom it should be directed, as well as giving an indication for resources that intervention will require. It forms baseline information for future comparison.

Objectives:

- Outline the distribution of health problems and health indicators
- Define the health status of the population
- Identify major health problems and set priorities
- Look for correlates of health and disease.
- Identify the drugs or substances abused and/or misused by the community
- Identify community resource.

Activities:

- Selection of study community.

- Introduce to community leaders and get information about the community
- Develop questionnaires.
- Standardizing and pre testing the questionnaire/ instruments
- Mapping and zoning the study area and numbering of houses
- Collecting data
- Data cleaning, compilation and analysis
- Write up
- Selecting priority problem
- Design an action plan

2.16.2. Health Education

A process with intellectual, psychological and social dimension relating to activities that increases the ability to make informed decision based on scientific principles affecting their personal or family well being. This process facilitates learning.

Objectives:

- To identify community health problem suitable for health education
- To identify health education services available in the community
- To plan, implement and evaluate impact of health education
- To target misconception related to health issue in the community.

Activities:

- Conduct health education at health institutions
- Conduct relevant health education while dealing with patient/client
- Arrange health education for different community.
- Create concept message, message and material for health education.
- Selecting appropriate materials and methods for health education.
- To provide health education based on individual's illness and/or needs.

2.16.3. Home Visit

Most illnesses that force a patient to visit a modern medical practitioner have most of their determinant basis in the psycho-socio-cultural and economic environment. Dealing

with the patient at health care institution is part of the whole health care effort. During the home visit, the health team will see the patient/client in his living and working environment. They will get first hand information about the factors that determine health and disease.

Objectives:

- To create close relationship with communities and families
- To follow progress of illness
- To develop skills in family diagnosis, identifying problems and prioritization.
- To demonstrate new skills like home based management.

Activities:

- Prepare check - list to look at individual household
- Health team visits houses in different villages on a regular turn.
- Fill the check-list
- Provide treatment for minor illnesses; give health education on major health problems.
- Immediately refer cases with life threatening situations.
- Apply communication skill to create good relationship with people.
- Inform the community about events in which their participation is required.

2.16.4. School Health

By the time children reach school age, they have already passed most dangers but still more likely than adults to suffer from health problems. A child who is not well enough will not get the benefit of education.

Objectives:

- To conduct school health service at school.
- To provide health instruction to school community.
- To respond to health related questions

- To identify and prioritize health and health related problems in school including substance abuse and adolescent reproductive health
- To inspect school environment.
- To organize health service for school children
- To create and strengthen health and health related clubs and activities.

Activities:

- Team leader will arrange schedule for school health program.
- Topics for class room education will be selected by discussing with school administration and student representatives.
- The team shall inspect compound sanitation e.g. classrooms, washing facilities, latrine, play grounds,
- The team should screen students for common health problems and give first aid treatment.
- Activities should be documented and feedback should be prepared.
- Establish health clubs and strengthen existing clubs.

2.16.5. Prison Health Service

Prison health in Ethiopia should be given due attention because of different problems arising in the prison environment such as over crowding and epidemic outbreaks.

Objectives:

- To identify health problems in the prison
- To maintain the area hygienic/clean
- To break disease transmission
- To educate and keep the prisoner to be healthy

Activities:

- Health education about
 - Personal hygiene
 - House keeping
 - Campus sanitation

- Lice control
- Communicable diseases
- Screening
- Steaming
- Treatment
- Patient referral

2.16.6. Outreach

It is a program carried out by a health team out side of the health institution at regular interval for communities usually living in the catchments area.

Objectives:

- To extend comprehensive community health services to people living at various distances from the health institution especially to women and children.
- To increase health service coverage in the catchments area

Activities

- Provide family planning service
- Vaccination for children and women of child bearing ages
- Growth monitoring
- Health education on pertinent health problems; promotion of health for infants, young children, pregnant women, lactating mothers, etc...
- Antenatal care

2.16.7. Polyclinic

The team in the polyclinic is expected to provide promotive, preventive, curative and rehabilitative services. In the polyclinic:

- The team can deal with conditions/illness that need more investigations and attention.
- The individual patient can benefit from inter disciplinary approach.

- Maintain team cohesiveness by dealing with individual and group patient /client problems.

Objectives:

- To maintain good relationship with patient client and his/her family.
- To use the theoretical knowledge and epidemiological information gained in diagnosing, managing of health problems and determining prognosis.
- To gauge the level of occurrence of disease from polyclinic attendance.
- To organize team skills/interdisciplinary skills in managing patient/client health problems
- To gain maximum exposure and experience on spectrum of disease.
- To give individual and group health education

Activities:

- Communicate effectively with patients/clients and families to maintain good relationship.
- Working in a team/task group in different sections of the health facility with the staff members or other teams
- Applying effective professional skill in identifying and managing patient/client problems including follow up visits
- Exchange reports and referrals with in and out side of the team
- Arrange discussions, seminars and /or morning session on common problems identified
- Conduct individual or group health education sessions
- Refer patients using appropriate referral system
- Record appropriately patients/clients/ information and document for future use
- Conduct environmental health activities in the institution

2.16.8. Primary Health Care (PHC) program Evaluation

Primary health care is an essential health care made universally accessible to individuals and families in the community by means acceptable to them, through their full participation and at a cost that the community and the country can afford. It forms an integral part of both the country's health system of which it is the nucleus and of the over all social and economic development of the community.

Primary health care addresses the main health problems in the community, by providing promotive, preventive, curative, and rehabilitative services. PHC includes: promotion of nutrition and adequate supply of safe water and basic sanitation, family health, including family planning, EPI, prevention and curative approaches locally endemic diseases, education concerning prevailing health condition, appropriate treatment for common diseases, provision of essential drugs, mental, dental and occupational health, and HIV/AIDS prevention.

Primary health care evaluation is the judgment made on the value of the result achieved by the health team regarding to PHC components. Evaluation is a continuous function. Evaluations are performed by health staff, which are collecting and analyzing information.

Objectives:

- To know which specific PHC component is achieved
- To measure the efficiency and effectiveness of different programs
- To promote intersectoral collaboration
- To develop good skills in planning, implementing and evaluating specific health program.

Activities

- Select different indicators, input, process, out put and impact, for evaluating the different components of PHC.
- The team will look at documents, review reports and interviews

- Evaluation will be made at regional/district level then health facility and community level.
- Interview households regarding the components of PHC, e.g. household food security.
- Review activities in different sectors, e.g. agricultural sector during evaluation of nutritional status.
- Inform other responsible bodies on out come of the implemented program.

2.16.9. Family Health

Family health is a state of complete physical mental and social well-being and not merely the absence of disease or infirmity in all members of the family. There are different components in the family health, such as antenatal care, postnatal care, family planning, EPI, adolescence care, and STIs. In family health, mother and children under age of 15 years are estimated to constitute 70% of the whole population of Ethiopia. Not only do they constitute a large percentage of the population but also mothers and children are particularly exposed to ill health and high mortality.

Objectives:

- To identify magnitude of family health problems
- To develop knowledge and skills of the team about family health
- To share the knowledge and skills among the different categories of the team
- To alleviate family health problems

Activities:

- Implement different components of family health
- Examining mothers during the antenatal and postnatal cares.
- Giving family planning services
- Giving health education in every activity
- Advising the mother on continuing breastfeeding
- Checking the cold chain
- Giving different types of vaccines

- Manage STIs and pay special attention to the prevention of HIV/AIDS using various approaches including formation of educating clubs.

2.16.10. Health Institution Supervision

Health service supervision is defined as a process for guiding, helping, training and encouraging staff to improve their performance in order to provide high quality health services.

SUPERVISION IS NOT A FAULT FINDING MISSION

It is concerned with operational running of the unit and should deal with the following key questions:

- Do staff understand the responsibilities and objectives of their jobs?
- How do staff organize their work and what tasks have to be assigned to them?
- How do staff deal with the problems and difficulties in their jobs?
- Do staff achieve high technical supports that are required for effective performance and outcome?
- What measures can be taken to improve the performance of the staff?

Objectives:

- To improve health services that are rendered by the institution.
- To guide staff in order to achieve institutional goals.
- To support and encourage staff with the necessary resources
- To monitor and evaluate the activities performed.

Activities:

- Organize the team for supervision.
- Prepare check-lists, schedule and other relevant logistics to run the supervision effectively.
- Conduct the supervision directly or indirectly. Directly by discussing with the staff, the community or other stakeholders. Indirectly through observation, document

review, etc.

- Summarize the outcome of supervision
- Report and give feedback to the relevant bodies

2.16.11. Epidemic/Out Break Investigation

Epidemic is the occurrence of diseases in excess of its usual occurrence in a specific locality. Handling outbreak/epidemic will prevent further dissemination and its impact in the community.

Objectives:

- Acquire necessary theoretical and practical aspects of detection of the cause, source, method of spread and management of an epidemic.
- To prevent the dissemination of communicable diseases.

Activities

- Team need to be formed
- Logistics have to be ready
- Decide the time of departure
- Contact the health worker in the locality
- Interview the community
- Identify cases and contacts
- Communicate to the community about the outbreak.
- Document the case profile
- Develop a case definition applicable for the specific outbreak.
- Take different specimen from the cases and make tentative diagnosis.
- Contact the higher bodies for possible support
- Prepare spot map
- Develop epidemic curve
- Manage the epidemic
- Write final report.

2.16.12. Traditional Medicine

Traditional medicine is described as the total combination of knowledge and practice, whether explicable or not used in diagnosis, preventing, or eliminating a physical, mental or social disease and which may rely exclusively on past experience and observation handed down from generation to generation verbally or in writing.

Traditional medicine, like western medicine, aims at healing or preventing disease. In this respect, both types of medicines have the same objective but they differ in their concept of the cause of disease, their approach to healing, as well as in the healing methods used.

Objective:

- To assess the community health care needs and the role of traditional practitioners in primary health care.
- To intervene and identify harmful traditional medicine malpractices
- To be aware of the roles of traditional medicine in the community

Activities:

- Get information about traditional healers.
- Identify the common traditional medicinal practices.
- Intervene on harmful traditional medicine malpractices.
- Identify the sources of knowledge and the medicine used by traditional practitioners.
- Know how traditional practitioners diagnose, treat and prevent disease.
- Train/educate the community and traditional practitioners on their health delivery and involvement of traditional practitioners on prevalent diseases, i.e. HIV, Malaria, TB, etc.
- Give feedback on important findings to the responsible bodies.

2.16.13. Environmental Health

Environmental Health is the prevention of disease and promotion of health by eliminating or controlling the environmental factors, which form links in the chain of disease transmission.

Objective:

To promote health and prevent disease transmission through the participation of the community.

Activities:

- Numbering and mapping of village/town/
- Visit and inspect water source
 - Protection of water source
 - Maintenance of previously constructed springs and wells.
 - Sanitary survey of water source
 - Treatment of water
- Visit and evaluate waste handling of the community
 - Selection of waste disposal site.
 - Construction of disposal system
 - Evaluate collection and waste storage system.
- Visit and inspect individual and communal latrines
 - Construct model latrines.
 - Maintenance of previously constructed latrine.
- Visit and inspect eating and drinking establishments
 - Develop a check list
 - Prepare recording format for writing, problems, recommendation given, etc.
- Visit vector-breeding sites in the community
 - Carry out mosquito larva survey
 - Demonstrate different techniques of vector control
 - Mobilize the community to control vector.
- Visit and inspect local cottage industries, and other working areas where many people work.
- Conduct school health activities.
- Conduct home visit.
- Mobilize communities through health education.
- Conduct prison health service.

- Vector control method
- Personal hygiene
- Demonstration of steaming to control lice
- Health education
- Assess general sanitation of town /community/ institutions.
- Assess the sanitation of health center.
 - Infectious waste management
 - Construction of incinerator
 - Construction of placenta and stillbirth pit.
 - Sterilization techniques.

2.16.14. Mini – Project (Small Scale Students’ Intervention Projects)

Project is a piece of work that needs skill, effort and careful planning, especially over a period of time. A mini - project is a small project that will be devised by the health team to alleviate health and health related problems, which was identified during community diagnosis/community work.

Some of the characteristics of a mini-project:

- It is planned by a health team
- It will be prepared, implemented and evaluated within a short period of time.
- Most of the resources needed for implementation have to be found from the community, government sectors and non-government organizations working in that specified area
- It will try to solve the health problem(s) identified
- It involves active participation and contribution of all team members
- It is connected with prioritized public health problems
- It provides a means for collaboration between the teams and facilitators, community and other stake holders

A common outline for a mini-project includes the following items:

- Establishing criteria and standard
- Selecting the project
- Locating and selecting resources

- Performing or implementing the selected project
- Writing the report
- Demonstrating, orally presenting and defending the project.

Objective:

To bring the different disciplines together, find out problems, and try to solve them with in the limited resources available in the community

Activities:

- Identifying health and health related problems.
- Prioritizing the problems
- Identifying different resources needed for implementation
- Devising action plan, presenting it to the relevant bodies and getting approval.
- Implementing the plan.
- Monitor and evaluate the project.
- Writing the final report of the project.

2.16.15. Research

Research means to discover information through designing, collecting, analyzing data, and interpreting of findings.

Objectives:

- To develop the skill of conducting research
- To study the magnitude of health and health related problems of the community
- To notify and give feedback from the out come of the result to the community
- To recommend and suggest for further work based on the findings
- To compare different approaches in health care provision.

Activities:

- Topic selection
- Proposal presentation for funding agencies
- Ethical clearance
- Data collection

- Data processing
- Presenting the results
- Recommendation

2.16.16. Presentations

Presentation is the way in which something is said, offered, shown, explained, etc., to others. There are different activities, which should be presented in the health team. Presenters use various media to convey information or carry their points across.

Objectives:

- To plan, implement and evaluate topics to be presented
- To present and explain the topics identified on health and health related matters
- To disseminate important findings to concerned bodies

Activities:

- Arranging seminars, morning sessions, tutorials, etc.
- Presentation will be made by the assigned team/team members
- Discussion will be carried out.
- Summary will be made by the team leader/supervisor.

2.16.17. Documentation and Reporting

Documentation

Documentation is written information kept in notebooks or files; they may also be kept on tapes or be computerized. It is important to document both for immediate use or future reference.

Objectives:

- To develop the habit of recording
- To develop documentation skill

Activities:

- Standardizing documentation process
- Record all the activities of the team

- Filing

Reporting

A report is useful to assess the factual knowledge gained by individuals and groups.

Objectives:

- To develop reporting skill
- To develop the habit of on time reporting

Activities:

- Writing the activities of the health team
- Submitting the reports to be documented
- Disseminates the information to concerned bodies.
- Give feedback to all stakeholders



UNIT THREE

SATELLITE MODULES

3.1. HEALTH OFFICERS

3.1.1. Introduction

1. Purpose

This satellite module is prepared to equip health officers with knowledge and skill to be effective member and leader of health team. The module emphasizes only on areas that were not covered in the core module.

2. Directions for using the modules

- You have to study the core module before going through this satellite module.
- You are advised to refer to the core module whenever required.
- Read and understand the learning objectives.
- Do learning activity: case study
- Go through the satellite module.

3.1.2. Learning Objectives:

At the end of this module the health officer will be able to:

- Identify main tasks of the health officer in a health team activity.
- Know the importance of organizing a team
- Develop skill in coordinating and controlling health team.

3.1.3 Learning Activity: Case study

It was a small and remote town around the Semen Mountain, which is the coldest and the highest mountain in the country. The town has a health center with relatively good number of staff, budget and drugs.

In mid-February, 2005 the head of the health center received an urgent letter from one of the Peasant's Association from the other side of the mountain. The letter stated that many people were sick and were dying of unknown health problem and asked for help.

The head was shocked by the letter and immediately requested the nurse and the administrator to prepare for him some drugs and arrange means of transportation. When everything was ready, he started his trip on a horse back. He reached at the locality after 12 hours of difficult trip. He was exhausted but people could not allow him to rest because of the problem.

After sometime, he walked from tukul to tukul and tried to observe and examine patients. He started to provide anti-malaria drugs for 100 patients in two days but a number of them died after the treatment and many more patients were coming.

At the end of the day, he understood and found out that the outbreak was fatal and he could not make any conclusive diagnosis. This condition frustrated him and finally he decided to send a message to the health center.

Questions

1. How do you evaluate the action taken by the head of the health center?
2. What could you do if you were the head of the health center?
3. What do you think is the problem?

For Team Roles and Behaviors

Roles in the team clarify what behavior is expected from each member. For example, each team member is expected to:

- Attend and participate in all meetings,
- Help build the agenda,
- Help evaluate and improve the meeting process,
- Share experience and knowledge,
- Participate in team activities,
- Complete assignments on time,

- Apply the steps of the quality improvement process,
- Encourage other team members to participate.

Effective team members:

1. Support the team leader,
2. Help the team leader to succeed,
3. Ensure that all viewpoints are explored,
4. Express opinions, both for and against,
5. Compliment the team leader on team efforts,
6. Provide open, honest and accurate information,
7. Support, protect, and defend, both the team and the team leader,
8. Act in a positive and constructive manner,
9. Provide appropriate feedback,
10. Understand personal and team roles,
11. Bring problems to the team (upward feedback),
12. Accept ownership for team decisions,
13. Recognize that they each serve as a team leader,
14. Balance appropriate levels of participation,
15. Participate voluntarily,
16. Maintain confidentiality,
17. Show loyalty to the company, the team leader, and the team,
18. View criticism as an opportunity to learn,
19. State problems, along with alternative solutions/options,
20. Give praise and recognition when warranted.

In addition, some team members have special roles that are necessary to keep a team working towards completing its task: team leader, team recorder, and time keeper.

Team Leader

He/she has the same responsibilities as other team members and also manages the administrative details of the team. He/she is involved with the team skills, the problem solving process and the content. The team leader:

- Prepares for meetings (scheduling, site location, etc.),
- Conducts meetings,
- Provides directions,
- Oversees assignments, and
- Ensures that meetings are documented.

The leader's role is not to make all the decisions but simply to lead the team through the problem solving journey:

Effective team leaders:

1. communicate,
2. are open, honest, and fair
3. make decisions with input from others,
4. act consistently,
5. give the team members the information they need to do their jobs,
6. set goals and emphasize them,
7. keep focused through follow-up,
8. listen to feedback and ask questions,
9. show locality to the organization and to the team members,
10. create an atmosphere of growth,
11. have wide visibility,
12. give praise and recognition,
13. criticize constructively and address problems,
14. develop plans,
15. share their mission and goals,
16. display tolerance and flexibility,
17. demonstrate assertiveness,
18. exhibit a willingness to change,
19. treat team members with respect,
20. make themselves available and accessible.

3.1.4 Activities

Team building can promote motivation, morale and commitment. If one or two of the training team members are really motivated and committed, they can influence the others so that the program will be successful. The Health Officer, being responsible to handle matters related to the health team undertakes the following activities in addition to the activities listed in the core module.

1. Community Diagnosis

- Organize the team to make community diagnosis
- Select the health problem to be addressed
- In collaboration with other members of the team, make an action plan based on the identified problems and take action.

2. Health Education

- Plan health education at different levels using models
- Apply behavior change models in BCC
- Select the type of message to reach the target audience
- Provide basic patient education to improve quality of service and compliance

3. Home Visit

- Organize the team for regular home visit.
- Assess the health of family members at the household level.
- Make diagnosis of illness particularly among children and mothers
- Give preventive and treatment services, e.g. Vitamin A, for malnourished children and mothers.
- Give health education regarding health problems in the family and as to its possible cause and means of averting it
- Involve family members to encourage patients to comply with their treatment
- Hold group discussion in the village to encourage participation

4. School Health

- Organize the team to launch regular school health program.
- Screen children for disabilities that interfere with education, like; vision problem, and progressive hearing problem... etc.
- Screen children for health problems like trachoma, communicable diseases and others.
- Strengthen the school clinic to give regular service
- Identify materials /drugs/ that are important in the school clinic and communicate to the responsible bodies to make it available
- Establish a link between the school and health institutions in the vicinity for maintaining the service
- Organize different health clubs in the school.
- Identify pertinent health education topics in collaboration with other stakeholders.

5. Prison Health Service

- Plan, organize and conduct the activities at the local prisons
- Give health education
- Control outbreaks of diseases
- Screen for possible communicable diseases like relapsing fever, typhus etc.
- Promote personal hygiene and sanitation in the prison.

6. Outreach

- Organize the team for regular outreach services.
- Collect reports from other team members and hold meeting to discuss on issues of concern.
- Identify services that can be provided as outreach program
- Identify the places where you can provide outreach service.

7. Polyclinic

- Coordinate the team for polyclinic service
- Properly greet and create good relationship with patients

- Lead morning sessions
- Refer patients and accept referred patients without delay and give feed back to health worker who referred the patient
- Attend seminars organized by different organization regarding to new development in management of specific health problems
- Use clinical skill in identifying diseases and request relevant laboratory investigations
- Prescribe drugs using generic names
- Give proper information about the prescribed drugs.
- Consult senior /other professionals in area where his/her competency is not strong
- Assess the quality of services in the health facility
- Document patient records; report to the statistician for analysis

8. Primary Health Care Evaluation

- Get acquainted with the PHC programs.
- Develop the skills of regularly evaluating health programs with team members.
- Involve all responsible people during evaluation.
- Discuss the findings with the local authorities.

9. Family Health

Refer to the core module

10. Health Institution Supervision

- Organize the team for supervision
- Refer to previous report of supervision results
- Develop check-list, in collaboration with other team members
- Conduct supervision
- Identify areas to be improved
- Praise health workers for activities which were done properly.
- Give feedback to health workers and institutions orally and in written
- Keep the result of supervision for future use

11. Epidemic/Outbreak Investigation

Refer to the core module

12. Traditional Medicine

Refer to core module

13. Environmental Health

Refer to core module

14. Mini project

Refer to core module

15. Research

- Develop the skill of conducting research
- Identify topics for research.
- Prepare proposal.
- Secure funding
- Conduct the research
- Make recommendations based on the findings
- Take action based on the findings of the research when ever possible.

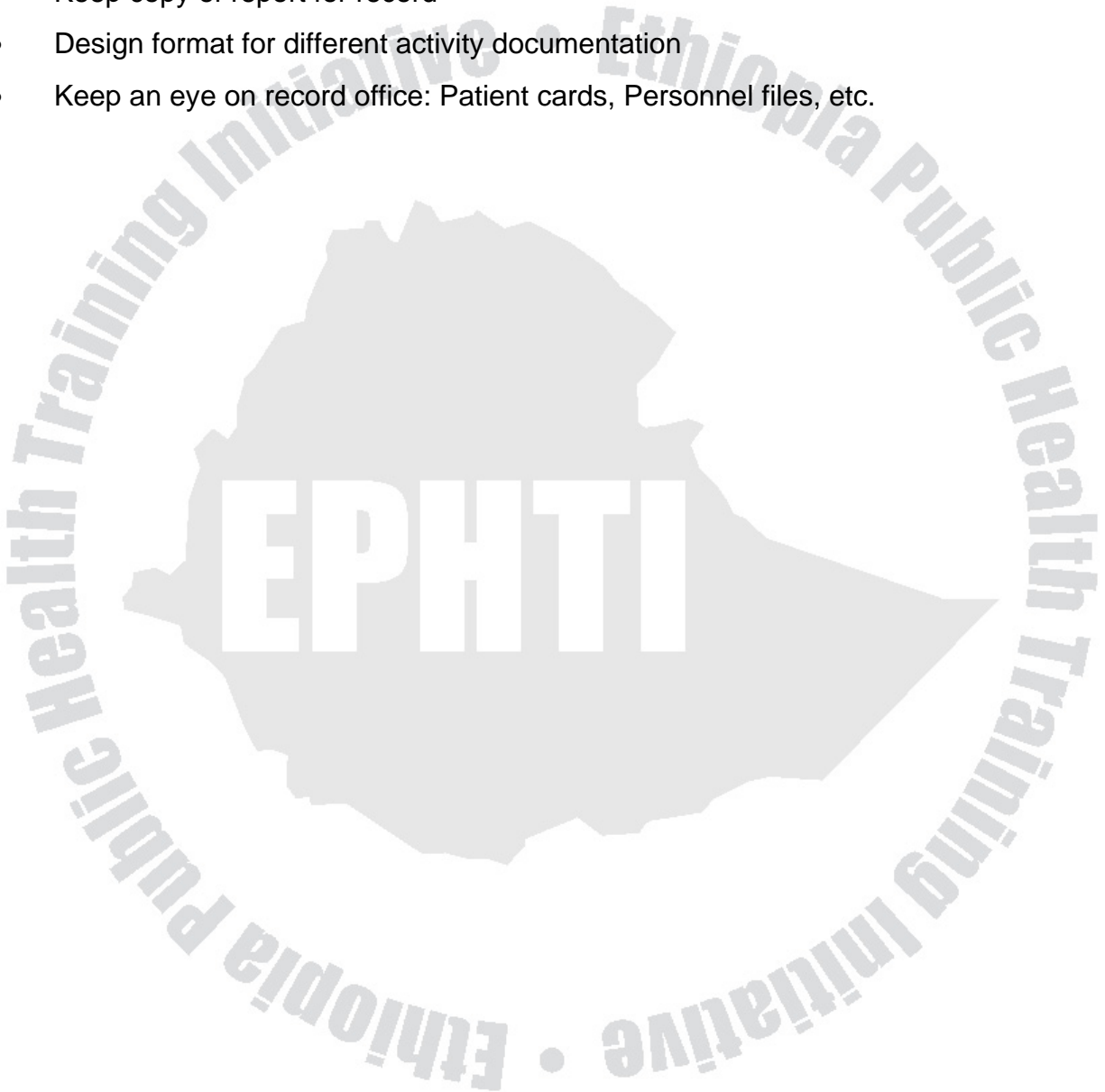
16. Presentations

- Plan and organize the presentations
- Participate in any presentations/discussions
- Summarize and make report on the presentations
- Act as resource person

17. Documentation and Reporting

- Give answers to the following questions before records are made
 - Will the information be used?
 - What will the record help in decision making?
 - Will the information be collected accurately?
 - Cost of keeping records?

- Identify and prepare a record that has to be communicated/reported weekly, bimonthly, monthly
- Design proper surveillance system for detecting national and internationally notifiable diseases
- Keep copy of report for record
- Design format for different activity documentation
- Keep an eye on record office: Patient cards, Personnel files, etc.



3.2. NURSES

3.2.1. Introduction

The role of the nurse in a health team is to work integrally with the team and particularly giving attention to identifying the sick person for treatment and giving nursing care according to the case.

1. Purpose and use of the module

The purpose of this module is to equip nurse students with adequate knowledge and skills on how to work in team in general and particular roles in the team.

2. Directions for using the module

For better understanding of this satellite module, the nurses are advised to follow the following directions.

- Do the pretest in the core module
- Read and refer the core module carefully
- Evaluate yourself by doing post-test in the core module
- Understand the learning objectives of the satellite module
- Read the activities you are expected to perform.

3.2.2. Learning objectives

For effective understanding of a health team work, the nurse will be able to:

- Define and describe team
- Describe his/her role in team
- Perform different activity in the outreach and in polyclinic session.
- Alleviate community health problems

Activities

In the health team program, most of the activities are performed in a team. Some of the main activities which need emphasis by the nurse are presented as follows:

1. Community Diagnosis

In community diagnosis, nurses should use their theoretical and practical knowledge and skills that they have learned in class, demonstrations and wards. The nurses' special contributions in community diagnosis are identifying cases, managing minor cases, referring cases, give health education, etc...

2. Health Education

The nurse can conduct health education in different places such as:-

- School
- Home visiting
- Community diagnosis
- Health institutions
- Public gatherings, such as churches, mosques, etc.

The nurses need to play important roles in demonstrating certain procedures to the mothers such as how to give ORS and how to prepare weaning foods.

3. Home Visit

In home visiting, the nurse should be able to identify family problems or living conditions giving special attention to children and mothers, such as in:-

- Pregnancy
- Nutritional status of the child
- Vaccination of mothers and children
- Family planning services.

4. School health

The team can investigate the school for different purposes. The nurse in the school health program gives special attention to screening of students for community health problems such as:

- Trachoma
- Scabies
- Parasites

- Personal hygiene
- HIV/AIDS
- Reproductive health
- Etc.

After screening, the nurse can conduct health education and treat the students using the available drug and refer cases if they are out of the scope of the team.

5. Prison Health Service

Refer to the core module

6. Outreach

Outreach program can be conducted by the team to provide different health services when the community or community members are unable to come to the health institution due to different reasons such as:

- Long distance
- Unable to know the availability of the service
- Can not afford expenses, etc.

The nurse in the outreach program can conduct different activities such as:

- Vaccination
- Family planning
- Vitamin A supplementation
- Antenatal examination
- Child health care, etc.

7. Polyclinic

In the polyclinic, the nurse should be able to work in a team with other categories of health workers. But sometimes due to his/her own job descriptions, they can actively work in some fields of activity like giving nursing care.

In the polyclinic, the nurse should participate in different activities because in the polyclinic, patients can present with various series problems. Sometimes it becomes difficult to handle multiple problems. When that happens, the nurse should prioritize the

problems and handle according to the nursing knowledge and skills they have learnt in basic nursing arts, ethics, etc.

The nurse should approach the patient/client and give special attention to nursing care in emergency situations and in the wards such as:

- Bed making
- Shaving and preparing patients
- Giving bed bath
- Morning, afternoon and evening cares.
- Admission and discharge cares, etc.

8. Primary Health Care Program Evaluation

Refer to core module

9. Family Health

Family health has the following components: Maternal care (antenatal care, delivery care, postnatal care, family planning, EPI), child care, adolescent reproductive health, violence against women, geriatrics.

For the detail refer to the core module.

10. Health Institution Supervision

The nurse, as part of the team, should participate in the supervision of health care institutions. To conduct this activity the nurse need to:

- Have a checklist for supervision
- Identify the areas which should be supervised
- Give feed back to the health workers, the concerned bodies and institutions.

11. Epidemic/Outbreak Investigation

The nurse is one of the main team members in controlling outbreaks. Therefore, in order to carry out these with competency, the nurse should:

- Give health education on how to control epidemics
- Collect information about epidemic outbreaks

- Detect and report priority diseases
- Characterize epidemics in terms of person, place and time.
- Confirm the existence of epidemics
- Make spot map/sketch map for epidemic distribution
- Communicate with local administration for support and cooperation

12. Traditional Medicine

Refer to the core module

13. Environmental Health

Refer to the core module

14. Mini - Project

Refer to the core module

15. Research

Requires involvement of the nurse in:

- Topic selection
- Proposal presentation
- Data collection
- Data processing and write up.

16. Presentation

This involves:

- Giving or participating in seminars
- Giving or participating in tutorials.

17. Documentation and Reporting

These include:

- Documentation
- Recoding
- Have a format for different activities and document properly.

- Report all activities daily, monthly, quarterly and annually for the respective bodies
- Keep the document properly.



3.3. ENVIRONMENTAL HEALTH PROFESSIONALS

3.3.1. Introduction

1. Purpose and use of the module

The main purpose of this module is to equip the learner with knowledge and skill required to work in health team to prevent disease transmission and promote the health of the community.

2. Direction for using this module

- A. The learner is advised to read the core module thoroughly first, then the satellite module.
- B. The learner is advised to see environmental health activity written under the core module.
- C. Do learning activity given in the satellite module

3.3.2. Learning objectives

After completing the module, the learner or user will be able to:

- Identify the role of environmental health worker in health team work.
- Know how to work in a team.

3.3.3. Learning activity: Case Study

In a certain health center, there were different health professionals including environmental health professional. Two patients from the prison visited the health center to get treatment. They had similar signs and symptoms. After physical examination, both of them were found to be cases of relapsing fever and they were admitted to the inpatient department. Treatment was carried out accordingly. It was suggested by the head of the health center that a health team must be established to solve the problem at the prison.

Questions

1. What health professionals should be included in this team?
2. As environmental health worker, what will you do for patients in the health center?
3. How do you prevent transmission of relapsing fever at the inpatient department?
4. Do you think a health team should go to the prison and visit the prisoners?
5. If your answer for question number four is yes, as team member what will you do for the prisoners?
6. What interventions will you take in order to prevent the occurrence of such a problem again?
7. Do you think health education is necessary for the policemen/guards at the prison related to the problem arise? Why?

3.3.4. Roles of environmental health professionals in health team work

1. Community diagnosis

Environmental health professionals will carry out the following activities during community diagnosis.

- Mapping and numbering of study area.
- Preparation of questionnaires related to environmental health.
- Data collection and analysis.
- Dissemination of information to the concerned bodies.
- Based on the findings, prioritize the problems.
- Designing action plan for the prioritized problems.
- Carrying out intervention based on the action plan.
- Monitoring and evaluation of the out come of intervention.

2. Health Education

Usually Environmental Health professionals are assigned to coordinate health education service at health center level in Ethiopia. As a program coordinator, the responsibilities of environmental health professionals are:

- Consulting different professionals in the health center to select health education topics.
- Arrangement of time and space to conduct health education.
- Assigning individuals for the selected topics
- Preparing program or schedule for health education.
- Monitoring the program
- Prepare Registration Books
- Proper registration and documentation (topic, date, name of educator, number of attendance, place, etc. should be listed)

As a health educator, Environmental health professionals should give health education related to environmental health problem.

3. Home Visit

During home visiting, environmental health professionals are expected to perform the following activities.

- Preparation of checklist
- Evaluation of housing condition such as ventilation, lighting, cleanliness of the house, etc.
- Inspection of handling and utilization of water
- Inspection of hygienic practice of the family
- Inspection of waste handling
- Health education, etc.

4. School Health

The activities in school health include

- General sanitation of the school compound

- Evaluation of classrooms (ventilation, lighting, cleanliness, overcrowding, arrangement of chairs and tables, space between chairs, distance of black board from the last chairs, etc.)
- Inspection of sanitary facilities.
- Inspection of waste disposal systems.
- Encouraging establishment of environmental health club in the school.
- Health education

5. Prison Health

The activities in prison health include:

- Evaluation of sanitation of the prison.
- Evaluation of housing condition of the prison (ventilation, lighting, overcrowding, etc)
- Vector control (good house keeping controlling fleas and bedbugs, steaming to control lice, etc.).
- Evaluation of sanitary facilities
- Evaluation of food handling practice in the prison
- Identifying significant health problems and advising as to the solutions.
- Inspection of water supply
- Mini - project
- Giving health education

6. Outreach

Usually most of the activities of environmental health professionals are in the community rather than at the health institutions.

During outreach service, as a health team member environmental health professionals will do the following activities.

- Community mobilization
- Health education
- Participate and coordinate vaccination activities.
- Advising and demonstrating of some sanitary facilities.

7. Polyclinic

Activities may include:

- Giving health education for patients and their families related to their cases
- Participate and evaluate in campus sanitation.
- Participate and evaluate in sterilization techniques.
- Evaluation of prevention of diseases transmission from inpatient and outpatient departments.

8. Primary Health Care Program Evaluation

As a team member, environmental health professionals should evaluate the following:

- Sanitation coverage of the community
- Percentage of access to excreta disposal
- Percentage of access to safe water
- Prevalence and prevention of occupational injuries
- Vector control measures
- Food service establishment inspection.

9. Family Health

Refer to the core module

10. Health Institution Supervision

The activities include:

- Evaluation of sterilization technique
- Inspection of compound sanitation
- Inspection of waste management system
- (Infections waste and other waste)
- Evaluation of sanitation facilities such as incinerator, placenta and stillbirth pits, toilets, controlled dumping, etc.
- Evaluation of housing condition
- Give valuable feedback

11. Epidemic/Outbreak Investigations

During epidemic investigation environmental health professionals will carry out the following activities with the team.

- Mapping and censusing the area.
- Identify source of infection (water, food, vector, etc)
- Identify potential source of pollutant
- Describe the pattern of disease distribution in the area.
- Prepare action plan for appropriate intervention to control the outbreak.
- Apply appropriate intervention to control the problem.

12. Traditional Medicine

Refer to the core module.

13. Mini - Project

If the project needs construction, the drawing and cost estimation of the project should be done. Some of the examples are: construction of waste disposal site, construction of model VIP latrine, protected spring, protected well etc. For other information refer to the core module

14. Research

Refer to the core module

15. Presentation

Refer to the core module

16. Documentation and Reporting

How to document and report refer to the core module.

Some of the examples to be documented include:

- Map of the working area
- Map of health institution in the area
- Map of waste disposal sites in the area
- Map of vector breeding sites, e.g. marshy areas, ponds, etc.

- Record of disease related to sanitation such as, food born, water born, vector born, etc.
- Record of activities performed.



3.4. MIDWIVES

3.4.1. Introduction

1. Purpose and use of the module

The ultimate purpose of this module is to help midwives to effectively participate and execute roles in health team so as to identify, plan, implement and evaluate health and health related problems of a community. It emphasizes areas not touched by the core module.

2. Direction for using the satellite module

For better understanding of this satellite, midwives are advised to follow the following directions.

- Do the pre-test in your satellite module, i.e. 3.4.3
- Read and understand the core module thoroughly before you go to the satellite module.
- Read the satellite module and evaluate your self by doing learning activity exercise
- Compare your result with the answers given.

3.4.2. Learning objectives

After going through this satellite module, the midwife is expected to

- Have a clear idea of his/her own job and how it relates to the works of others,
- Maintain good relationship with team members,
- Identify reproductive health components and design method to achieve them,
- Identify activities of health center team and his/her objective in each activity,
- Participate in identifying, analysis, planning, intervention, evaluation, and reporting of community health problems.

3.4.3. Pre-test

Pretest questions for midwives

1. A midwife in a health team
 - a) Should execute only her/his own goal
 - b) Should execute her/his and the team's goal.
 - c) Should execute the teams goal only
 - d) None.
2. In health team activity one is not the concern of midwife.
 - a) School health
 - b) Prison health
 - c) Epidemic investigation
 - d) PHC evaluation
 - e) None
3. Why does a midwife need to work with a team?
 - a) To share inter-professional knowledge and experience
 - b) To know how to work together
 - c) Many problems are difficult to deal with alone
 - d) To live on other's effort
 - e) All except d.
4. In supervising family planning service delivery of a health center, the following are important areas except:
 - a) Method mix
 - b) Availability of trained staff
 - c) Counseling
 - d) privacy
 - e) none
5. For effective communication of groups and teams, one is not true.
 - a) Recognize group and personnel goals
 - b) Promote desirable norms
 - c) Encourage excessive conformity
 - d) Encourage creativity
6. List the steps in health institution supervision
7. List components of reproductive health.
8. What are the roles of a midwife in the design and execution of a mini-project?

3.4.4. Learning activity: Case study

The following report was heard from the annual report of Meket woreda.

- The police station reported the main problems of the year were adolescent delinquencies, rape, abduction, etc.
- The statistics bureau reported that the population growth is very high compared to other woredas and the national.
- The health bureau reported that the number of cases due to STI's /HIV/AIDS/. Abortion and intestinal parasitic infection are very high compared to the other population and the national figure. Then they agreed that the health center should take measures to alleviate these problems. The head tries to establish a team of different professionals that will be led by the midwife nurse.

1. Is the problem a health concern? Why?
2. Do you think it is important to include other sectors? If yes, which sectors?
3. Which categories of professionals/sectors should be team members?
4. What do you think is the main causes of the problems?
5. What are the main activities the team, can take?

3.4.5. Roles of midwives in health team work

The midwife has enormous roles to contribute for achieving the goal of the team. Even though the midwife is part and parcel of the team, there are also some areas where his/her expertise and skills are required to achieve the goals of the team as a whole. Some of the roles of midwives as team members are listed below.

1. Community Diagnosis

In the process of community diagnosis, the midwife will be expected to get involved from initial exploration and interaction with the community, planning the survey in detail (for example preparing a questionnaire on reproductive health), pre-testing the methods, executing the survey, analyzing the results. The final task is feeding the conclusions back to the community and as a team to initiating a process for intervention and planning of health service activities.

2. Health Education

The midwife will be involved in individual and group health education.

A midwife should equip him/her self with good communication skills and knowledge of his/her audience and his/her subject matter. The role of the midwife will be:

- Plan, organize and conduct group or individual health education with the team
- Get involved in topics of family health and other topics where his/her expert skills are required.
- Give effective counseling in family planning and VCT centers.

3. Home Visit

As women are happy and responsive when served in their home, the role midwives play in home visiting are the following:

- Prepare check-list and midwifery bag.
- Conduct ANC examination
- Conduct postnatal care
- Conduct home delivery
- Assess and check women's family planning or ANC card, children's immunization card.
- Refer high-risk mothers.
- Follow up defaulters of EPI, family planning, ANC.
- Check nutritional status of mothers and children
- Assess housing, environmental and socio economic status of the family.
- Assess and manage illness in collaboration with other team members.
- Assess KAP of mothers/family members identify intervention areas, specially give health education on Nutrition, family planning and other Reproductive health concerns.

4. School Health

There are various important areas in school health that the midwife can actively be involved as a member of the team. Schools are best places where adolescents can be found in group. So a midwife with his/her team members can

- Execute adolescent reproductive health activities, for example can organize adolescent youth friendly centers in schools, teach reproductive health topics such as family planning, HIV/AIDS and STIs, Abortion, Rape, etc.
- Execute screening for nutrition, hygiene and communicable diseases especially in primary schools.
- Help adolescents with problems, for example adolescents with STIs by giving counseling and providing them with available services or referrals.

5. Prison Health Service

Refer to the core module

6. Outreach

It is an important opportunity of reaching people and communities that have limited or no access to the health institutions usually mothers, children and older people. Moreover, it is an important opportunity to visit mothers in their homes and to expand health service coverage like the most important family planning and EPI coverage.

Activities

- Family planning services
- Home visiting
- EPI services
- Control of diarrheal diseases
- Nutritional assessment
- Health education
- Investigation and management of illness including specimen collection, etc.

7. Polyclinic

The midwife needs to be involved in the following activities during the polyclinic session: Antenatal care clinic, EPI, Delivery, STIs clinic, Postnatal, VCT center, Family planning clinic, Out patient, Child health clinic /well and sick/, Inpatient.

The role of midwife as a team member in polyclinic activity of the team will be dealing with the above areas as sub-group to provide diagnostic and management services.

- Give individual health education or group health education
- Participate effectively with other areas of the team activity for example compound sanitation, drug dispensing, and so on.
- Give nursing care after assessment, diagnosis, implement and evaluate nursing care using the nursing process and different models as a framework.

8. Primary Health Care Program Evaluation

As most elements of primary health care are concern to the midwife, e.g. MCH, FP, she/he can contribute a lot to the team by designing tools such as questionnaire, check-list, etc. for evaluating primary health activities in their area. Some examples of such elements for evaluation are:

- Indicators of health status, e.g. MMR, IMR, proportion of infant born with low birth weight, crude birth rate, death rate, etc.
- Indicators of provision of health care such as accessibility and availability.
- Socioeconomic indicators

9. Family Health

It includes components of reproductive health and geriatric health

A. Safe motherhood initiative

- Antenatal care
- Child health care, e.g. EPI, CDD, ARI, IMCI, etc...
- Postnatal care

B. Family planning

- Assessing contraceptive prevalence rate to determine quality of service
- Counseling and distribution of contraceptives including outreach service
- Information on method mix.

- Strategic management which takes into account contraceptive demands, public and political support, the logistic and supply system etc.
- Effective IEC
- Collaboration with private sector

C. STIs and HIV/AIDS

- IEC
- Condom distribution and social marketing
- STI and HIV management
- Syndromic management of STI
- Management of opportunistic infection
- HIV counseling and screening
- Partner notification

D. Abortion care: management, including post abortion counseling and care.

E. Infertility counseling and management including referral

F. Women empowerment /gender violence

G. Men involvement

H. Newborn care

I. Adolescent RH

J. Geriatric health

N.B. Please refer to WHO Reproductive Health Manual and Mother Baby Package for more information.

Roles of Midwife in Family Health

A midwife with his/her concern to family health can be a good facilitator/leader of the team in family health activities, with team members design strategies to address reproductive health components

For example: - Peer group education, Youth friendly centers, ARH clubs at school and out of school, community based ARH, etc.

- Monitoring and evaluation of RH activities
- Curative services

10. Health Institution Supervision

- Determine the need, objective and purpose of supervision
- Prepare check-lists with team members,
- Midwife assessment areas for example can include
 - Delivery service, ANC, PNC – availability of supplies, equipment, cleanliness and sterilization.
 - Immunization, cold chain system, availability of vaccines, monitoring charts, plan and achievements, etc.
 - Child health, ORT corners present, functional, etc.
 - Family planning: use the criteria for quality assessment
 - Analyze and compare your findings and give appropriate feed back and referral.

11. Epidemic /Outbreak Investigation

Refer to the core module

12. Traditional Medical Practices

Drugs at first trimester of pregnancy should be avoided as much as possible. Traditional medicines, unless their safety margin is well studied, should not be used especially by pregnant mothers.

- Give health education on harmful traditional medical practices especially avoiding use of traditional medicines by pregnant mothers.
- Identify harmful traditional practices which are carried out against women including pregnant and children, e.g. female genital mutilation, early marriage, and intervene accordingly.

13. Environmental health

Refer to the core module.

14. Mini - project

After completing community diagnosis, the team may design mini- projects.

The role of the midwife will participate in

- Identifying health concerns which need mini-project
- Planning
- Implementing
- Evaluating
- Reporting of mini-project

Midwives can design the following mini-projects:

- Training and or establishing TBAS, Anti-AIDS clubs, reproductive health clubs, etc.
- Training junior nurses on components of RH services.
- Condom promotion, etc.

15. Research

A midwife with his/her team members should actively be involved in research, starting from topic selection to write up and giving recommendations or proposing implementations. The following areas could be good topics for midwifery research, HIV/AIDS, abortion, ANC quality evaluation and determinants, adolescent reproductive health etc...

16. Presentations

A midwife should participate in

- Designing topics for seminars and tutorials
- Present seminars and tutorials required by the team according to the selected topics.

17. Documentation and Recording

The midwife is required to keep records of observations and decision made such as cares given out, medications, or any other records of her/his clients.

- Should report all necessary information to the team, team leader, or any stakeholders
- Serve as a reporter or record keeper if selected by the team.

3.5. MEDICAL LABORATORY TECHNOLOGISTS

3.5.1. Introduction

1. Purpose of the module

This module helps laboratory technology students to know their specific tasks and roles in the health teamwork, with particular emphasis on the laboratory investigation of various infectious and parasitic diseases.

The module is prepared with due consideration of the task, role and responsibilities of laboratory technologists and all types of laboratory workers.

2. Direction for using the satellite module

For a better understanding of this satellite module, the laboratory technology students are advised to follow the following directions after going through the core module

- Read and understand the learning objectives
- Do the learning activity: case study
- Go through the satellite module

3.5.2. Learning objectives

After the students have studied this satellite module, they should be able to:

- Know the concept of laboratory diagnosis in health team work
- Describe the procedures of collecting, labeling and handling of specimens in major activities in polyclinic laboratory.
- Explain the major activities in epidemic investigation.
- Implement the major activities in community diagnosis
- Identify the major activities in family health.
- Implement activities in out reach program.
- Identify the activities in school health.
- Implement activities to be done in health education.
- Able to conduct research project in team.
- Practice proper reporting and recording systems of results.

3.5.3. Learning activity: Case Study

Kola Diba is a small town, which is situated 30 kilometers far from Gondar town. A village, which is about 12 kilometers far from Kola Diba, had an outbreak of malaria. As a result many people were affected. So the health team from Kola Diba health center decided to go to the area to control the epidemic and prevent further occurrences of cases. Unfortunately, important facilities and supplies were not available in the village health post.

Based on the above information, answer the following questions.

1. How do you alleviate the problem with the health team members?
2. There was no light in the locality, how do you investigate the malaria parasites?
3. If it is difficult to get solar microscope and rapid test like immunochromatography tests, what are the steps/measures that you would take?

3.5.4. Role of Medical Laboratory Technology in Health Team

Laboratory tests are useful tools for public health because they can support or confirm diagnosis. Even well trained and experienced health professionals may be unable at times to make the correct diagnosis since there are several diseases with the same or similar signs and symptoms. Therefore, proper laboratory service increases the likelihood that the diagnosis is correct, and the public health action will be efficient and appropriate.

As a member of a health team, medical laboratory technologists are expected to perform the following activities:

1. Community diagnosis

In community diagnosis, the medical laboratory technologists make large contribution in identifying community health assessment needs by:

- Data collection
- Data analysis
- Interpretation
- Feedback and action plan development.

2. Health education

With other health team members, the medical laboratory technologists can give health education on selected topics:

Example: HIV/AIDS, malaria, tuberculosis, intestinal parasites, etc.

3. Home Visit

During home visiting, the medical laboratory technologists help the team in collecting information from individuals or families. If there is health and health related problems which need laboratory investigation, for example, febrile individual/s in the home, they should collect blood for blood film to investigate hemoparasites and give relevant health education to the families.

3. School health

The medical laboratory technologists can visit school to identify health and health related problems in school children. The following activities would be done:

- Health education
- Pilot studies for
 - intestinal parasites
 - Diarrheal diseases
 - Anemia
 - Others depending on the conditions at the specific school.

4. Prison Health

A laboratory technologist can do different activities with the health team members and specifically technologists can investigate various problems related to the prisons. For instance, blood film for relapsing fever, since it is common in over crowded populations, Such as prisons.

5. Outreach

Major outreach laboratory activities for medical laboratory technologists:

- Health education

- Investigating:
 - Diarrhea, if any
 - Anemia to evaluate nutritional status of the community
 - Water pollution
 - Evaluating pregnant women for anemia
 - Malaria epidemic
 - Relapsing fever, etc.

6. Polyclinic

The roles of medical laboratory technologists in health center polyclinics are encompassing and include investigations:

- Blood films
- Hematocrit reading/Packed cell volume determination
- White blood cell count
- Differential for white blood cell
- Hemoglobin determination
- Stool examination
- Urine analysis
- Blood glucose determination
- Gram stain
- AFS
- Widal test
- Weil – Felix test
- VDRL /RPR/TPHA test
- Determine/Capillus for HIV test
- Blood Grouping
- Cross matching
- Specimen referral such as
 - Water for bacteriological analysis
 - Stool for culture

N.B. The medical laboratory technologists are also expected to collect and identify nasocomial infection from different departments/wards areas and can give health education in the institution.

7. Primary Health Care Program Evaluation

There are fourteen important elements of PHC, which will obviously need to be evaluated. Therefore the medical laboratory technologists in collaboration with the health team members are expected to evaluate the essential elements of PHC based on the health and health related indicators in their catchments area.

8. Family Health

Health education on:

- Personal hygiene
- Family planning
- Nutrition,
- Evaluating anemia in the family
- Gram stains if expected STIs in the family, etc.

9. Health Institution Supervision

Supervising clinic laboratories on the following activities

- Reagent management
- Sample collection, processing, shipment and analysis
- Quality control
- Introducing new laboratory methods if any
- Reporting and recording of results
- Feedback
- Working with team depending on the demand from the health team

10. Epidemic /Outbreak Investigation

Medical laboratory technologists play a crucial public health role during epidemics.

Laboratory activities for epidemic investigation:

- Blood film for haemoparasites
- Urinalysis
- Stool for bacteriological and parasitological investigation
- Gram stain
- Referring specimens etc.

11. Traditional Medicine

- To give health education for the traditional healers.
- To refer traditional medicine for investigation in higher laboratories, like the National Research Institute of Health in collaboration with the health team and the faculty.

12. Environmental Health

The medical laboratory technologists make large contributions in collaboration with the health team with special focus on:

- Health education
- Survey, if any need, in specific locality
- Case detection
- Training of community health agents
- Proposing construction of pit latrine based on parasitological survey findings, etc.

13. Mini - Project

The following can be taken as mini-project for the team

- Parasitological investigation for school children
- Evaluating anemia in pregnant women at specific locality
- Prevalence of anemia in under five children...etc

14. Research

The medical laboratory technologist can do different researches based on the problems of the local area, for instance, prevalence and risk factors of malaria, other parasites and determination of hemoglobin among pregnant women in specific area, etc.

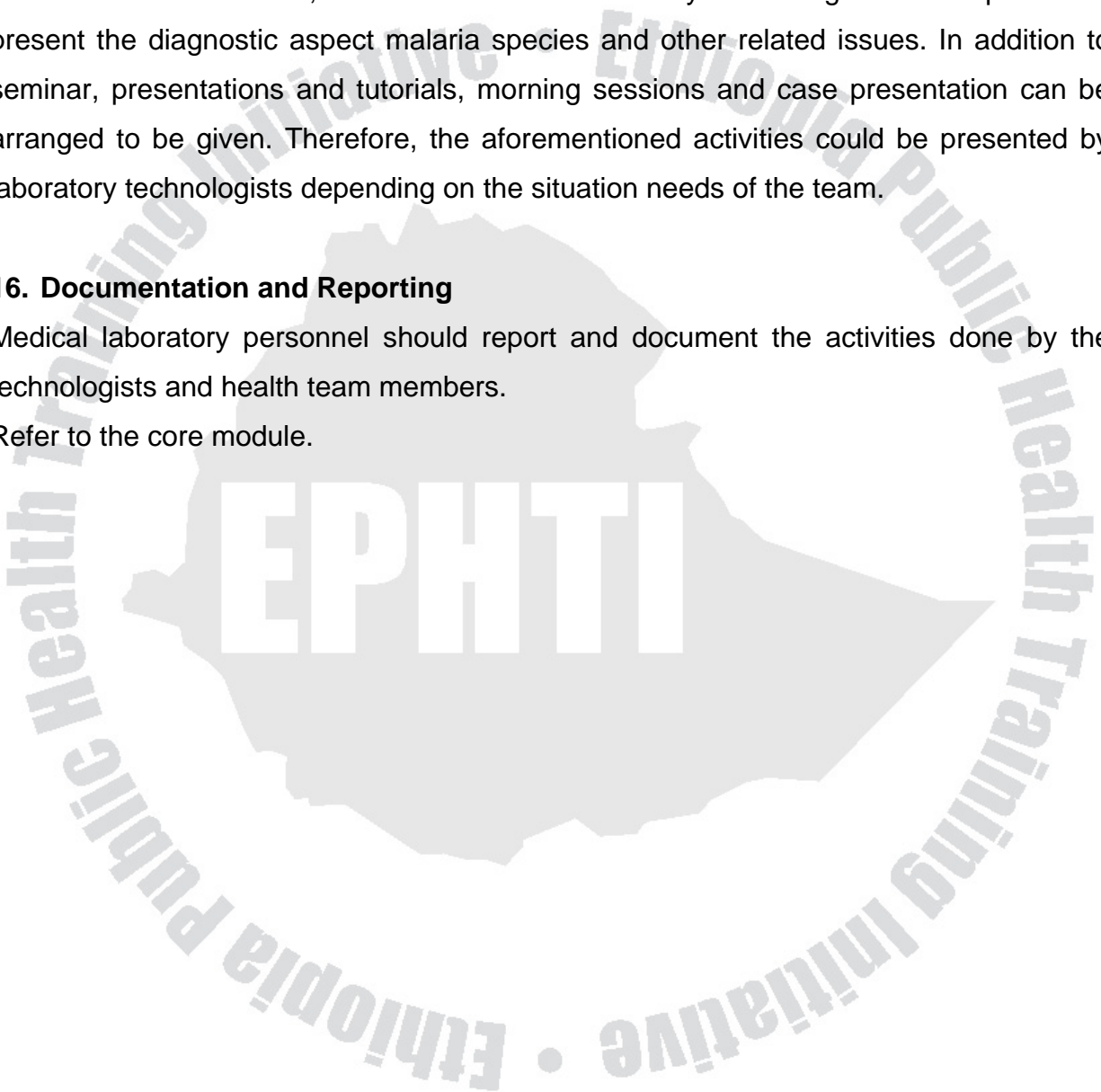
15. Presentation

Depending on the type of health problem identified in the community, seminar topics would be selected every week during the team training programme time to be presented by health team members from each category. For example, if the seminar topic for the second week is malaria, then the medical laboratory technologists are expected to present the diagnostic aspect malaria species and other related issues. In addition to seminar, presentations and tutorials, morning sessions and case presentation can be arranged to be given. Therefore, the aforementioned activities could be presented by laboratory technologists depending on the situation needs of the team.

16. Documentation and Reporting

Medical laboratory personnel should report and document the activities done by the technologists and health team members.

Refer to the core module.



3.6. PHARMACISTS

3.6.1. Introduction

1. Purpose

This satellite module is prepared for pharmacists. The satellite module stresses on equipping the role of the pharmacists in the health team activities with knowledge on problem identification and solving, managing drugs and other related issues in their carrier.

2. Directions for using the satellite module

Students must study the core module before going to the satellite module.

- Read and understand the learning objectives
- Do the learning activity: case study
- Go through the satellite module

3.6.2. Learning Objectives

After completing this satellite module activity, the pharmacists should be conversant with and able to:

- a) Identify their main roles in the health team
- b) Know the extent of traditional medicinal use coverage in the community with the health team
- c) Perform different activities with the health team such as
 - Increase awareness of the community on the harmful effect of drugs/substances abused from recent and previous scientific research findings/information
 - Increase awareness of health and non-health professionals on irrational use of drugs at the health delivery institutions
 - Understand and practice in managing drug supply at health institutions

3.6.3. Learning Activity: Case Study

North Gondar Zonal Health Office undertakes health service supervision two times a year to government and private health service institutions within the zone. A team (task force) was formed and departed from Gondar town for supervision. When the task force supervised Dabat Health Center, which is found in Dabat District, 75 km away from Gondar town to the north; in the pharmacy department the following findings were reported by the team:

- Presence of expired drugs in the dispensing area and store
- Frequent shortage of drugs in the health center
- The pharmacist is working both as store keeper and dispenser
- Presence of narcotic and psychotropic drugs in the pharmacy shelf/dispensary areas
- All types of prescriptions are handled by the record keeper

Questions:

- Who should be involved in the health service supervision?
- Discuss the main shortcomings of the above-mentioned findings and their solutions.

3.6.4. Role of Pharmacists in the Health Team Activities

The main roles of pharmacists in the health team are in providing drug information, selecting, quantification and dispensing of drugs. In addition, controlling or giving feedback on irrational prescription and administration of drugs by the members of health team. They provide health education on proper/rational use of drugs by patients and the community. Some of the roles and contributions of pharmacists in the health team are described below.

1. Community Diagnosis

The main role of the pharmacists in the community diagnosis activities of the health team is in identifying the main community problem in relation to drugs and drug related issues. To do such activities the following procedures could be considered:

- Data collection
- Data analysis
- Interpretation

- Feedback and action plan

2. Health Education

The pharmacy personnel provide health education on drug and drug related issues to the community or individuals as part of the health team. The role of the pharmacy personnel during health education are:

- Providing appropriate information to the community on the different techniques of family planning
- Promoting the establishment of drug and alcohol free groups in school and workplaces
- Identifying inappropriate practices of the community on drugs and drug related issues and education

3. Home Visit

When the health team has home visit activity, the pharmacy personnel can have a role in:

- Family/individual education from direct observation in the home in relation to drug and drug related concerns, e.g. when there are improper storage sites of already dispensed drugs, fail in application of instruction given by the health professional on frequency, route, dose and contraindications and precautions of dispensed drugs.
- Providing education on cheap and available home remedies for malnutrition, diarrhea, constipation, and vitamin deficiency cases, etc.

4. School Health

The pharmacy personnel, during school visit, may identify health and health related problems of students. The following activities would be contributed with collaboration with the health team.

- Education on substance abuse and proper use of drugs

5. Prison Health Service

Refer to the Core Module

6. Outreach

Based on information provided from other health team members and other sectors in the outreach sites; the pharmacists can do the following activities to accomplish the health team objectives:

- In selecting drugs,
- In providing proper storage conditions,
- In quantification and dispensing of drugs,
- In evaluation of proper labeling, packaging and expiration and manufacturing date of the already industrially manufactured drugs.
- In evaluating use of traditional medicines.

7. Polyclinic

The role of the pharmacists in the polyclinic activities of the health team to mention few are the following:

- Dispensing drugs,
- Extemporaneous preparation of medicine,
- Preparation of essential drug list for the specific clinic,
- Drug selection and quantification,
- Drug utilization evaluation of the clinic, etc.

8. Primary Health Care Program Evaluation

Refer to the Core Module

9. Family Health

The role of the pharmacists as the health team member concerning family health would be the following.

Education on family planning methods, nutrition, home remedy for minor ailments, etc.

10. Health Institution Supervision

Pharmacists have the following roles in the health institution supervision activity of a health team:

- To evaluate the type and number of personnel in the pharmacy department (dispensing)
- To evaluate premises of the pharmacy (appropriate areas/rooms for storage, dispensing, compounding)
- To evaluate equipments and facilities required for proper storage, dispensing, compounding, drug inventory control.
- To evaluate the practices of pharmacy: proper dispensing, labeling and packaging, documentation, record keeping and reporting
- To evaluate the proper handling and disposal of drugs and medical supplies unfit for use/sale

11. Epidemics/Outbreaks Investigation

The role of pharmacists in the epidemic investigation activities of the health team could be:

- Selecting and dispensing emergency drugs to the community (epidemic area).
- Proper emergency drug utilization and quantification based on their demand.

12. Environmental Health

Pharmacists contribute much in collaborating with health team members on environmental health issues of the community. The activities would be the following:

- Identifying chemicals used for environmental health
- Education on proper use of these chemicals and
- Proper storage, distribution and utilization, etc.

13. Traditional Medicinal Practice

Refer to the Core Module

14. Mini-Project

The following activities would be taken as mini- project for the team:

- Drug utilization pattern in the health institutions
- Investigations on the degree of substance abuse in the community

- Traditional malpractice identification and preventive actions
- Drug/Substance Abuse

The role of pharmacists in the health team concerning drug/substance abuse:

- In giving an introduction on definition and impact of drug/substance abuse, dependence and addiction in the community.
- In identifying the main risk factors that directs the community to abuse drugs/substances
- In coordinating the health team in identifying common drugs of abuse in the community on gender, age and educational bases
- In coordinating the health team in managing drug abuser and dependents
- In searching the source/root and distribution line of drugs that are commonly abused
- In running community education on the basis of major findings on prevention, treatment and withdrawal of dependent/addicted individuals

- Managing Drug Supply

The roles of the pharmacists in the health team in proper drug utilization are:

- In identifying irrational prescribing practices
- In providing good dispensing practice
- In encouraging appropriate dispensed drug use by patients through education
- In preparation of essential drug list for specific health institution. Hence, minimizing procurement of drugs that are not very essential, etc.

15. Research

Refer to the core module

16. Presentations

Refer to the Core Module

17. Documentation and Reporting

Refer to the Core Module

3.7. HEALTH SERVICE EXTENSION WORKERS

3.7.1. Introduction

1. Purpose

This satellite module is prepared to produce competent Health Service Extension Workers (HSEWs), who can effectively undertake basic primary health care activities at community level. The module helps HSEWs to understand the advantage of working in team.

2. Direction

- Understand the learning objective for this satellite module.
- Evaluate yourself by doing the pretests specifically designed for HSEWs
- After going through the satellite module, answer the post-test questions.
- Compare your pre-test and post-test answers.

3.7.2. Pre-test

1. Team and group are one and the same. (T/F)
2. Working in team increases job satisfaction among health workers. (T/F)
3. A community health team should concentrate on health care delivery rather than PHC activities. (T/F)
4. A community health team will not succeed without active participation/ involvement of the community (T/F)
5. HSEWs should only identify community health problems but should not look for resource in the community for intervention. (T/F)
6. During community diagnosis, HSEWs should make prioritization of problems. (T/F)
7. Team approach is bringing a balance between the same health professionals in every level of health care. (T/F)
8. A health team should always have one person as a leader. (T/F)
9. Group work well as a team if members know each other. (T/F)
10. Data collected at community level by HESW should be sent to higher level without analysis or making sense of data. (T/F)

3.7.3. Learning Objective

At the end of this satellite module, the HSEWs will be able to

- Define what team and health team are
- Appreciate the difference between group and team
- Understand the advantages of working in team
- Understand and properly apply the skills used in health teamwork.
- Identify her/himself as a member of the health team.

3.7.4. Definition of Terms

Team is a small number of consistent people committed to a relevant shared purpose with common performance goals, having complementary and overlapping skills.

Health team is a group of people who have a common goal and common objectives, determined by the community health needs, to the achievements of which each member of the team contributes, in accordance with his/her competence and skills and in accordance with the function of others.

Group is a collection of two or more individuals interacting and interdependent, which have come to achieve a particular objective.

The terms” **Group and Team**” are not synonymous (same).

Team versus Group

Basically a group is collection of individuals who come together for a joint effort but whose outcomes rely primarily on individual contribution of its members. On the other hand a team has members who work collectively in a way it magnifies the group’s impact, above and beyond that generated only from individual effort. More specifically we can see differences in the following table.

Team approach is defined as the way that management attempts to bring about balance among the different people concerned. Well developed and efficient teams are those that can quickly evaluate a complex situation and decide how to state the

problem, so the members of the team can use their skills to focus on an integrated approach.

3.7.5. Advantages of team work in health care setting

- Increases performance of tasks
- Increases responsibility among members
- Frees busy managers for priority decision
- Creates higher job satisfaction among health workers

3.7.6. Role of a Health Team

A Health team exists for the community. The community has health needs and it is the function of the health team to respond to those needs. No one person can acquire all the necessary skills, or have enough time, to do everything that must be done to satisfy the health needs of even a small community.

The aim of a community health team must be to help communities attain and maintain health by means of essential or primary health care.

Primary health care is essential health care made universally available to individuals and families. It includes those services that promote health such as keeping a clean environment, basic education in health, good water supply, care of women, nutrition, immunization and early treatment of disease, with provision of essential drugs and control of major public health diseases including HIV/AIDS, TB, and Malaria. The success of such service, however, depends on active participation or involvement of communities and individuals. Health team has an essential role in such services but could not alone ensure their success.

Members of a health team should work closely with workers from other sectors concerned with community welfare and development, such as teachers, agriculture extension workers, community development workers, religions leaders, etc.

A health team must

- **Understand and communicate with the community**
- **Encourage community participation in identifying problems and seeking solutions**
- **Work with the community.**

3.7.7. Activities of a Health Team

A community health team, while working with in a specific community, needs to take part in the following activities by itself or involving others.

1. Community Diagnosis

For any team to work in a specific community, it needs to know the main problem of the community or segments of the community, like children, mothers, etc. It also needs to know whether the problem would be solved by pooling resources from the community or not and for making comparison. Therefore, any health team needs to diagnose its community before discharging any responsibility.

Objectives

- Identify major health problem
- Understand the morbidity and mortality pattern in community
- Look for community resources

Activities:-

- Selection of study community
- Make contact with community leaders
- Inquire information from community leaders
- Zoning and numbering of study area
- Collecting data
- Making sense of data
- Identifying major health and health related problems
- Work with community in prioritizing problems
- Work with community on the intervention

2. Health Education

Health education is a voluntary change of behavior conducive to health. When working in a community a HSEW needs to undertake health education as the main weapon to fight ill health and poverty.

Objectives

- Identify major community health education needs.
- Plan health education session with different groups.
- Target misconceptions and harmful traditional practice related to health of the common.
- Provide information on HIV/AIDS.

Activities

- Conduct health education in community setting, home visiting etc.
- Arrange health education sessions
- Work with community leaders for providing health education in different settings
- Use available teaching material
- Produce teaching material acceptable to the community
- Undertake HIV/AIDS education to result in behavior change among community members
- Provide education for patients on long course treatment not to interrupt treatment, e.g. tuberculosis
- Provide education on basic nutrition, immunization, safe delivery, etc.

3. Home visit

Basic determinants of most people's illnesses are related to their way of living, residence and culture. Besides, people are free to talk about their health problem when they are at home. Therefore, to look for determinants of illness and result in behavior change home visit is essential.

Objectives

- To create good relationship with families.

- To identify major health problems with in a family.
- To demonstrate preparation on nutrition education and oral rehydration therapy.
- To follow progress on change of behavior.

Activities

- Prepare check-list and use while making visits.
- Regularly follow families for improvement.
- Provide education on basic sanitation, family planning, nutrition and oral rehydration therapy including cereal based oral rehydration therapy.
- Advocate on exclusive breast feeding in the first six months of infant life.
- Refer patients to health posts and health centers.
- Create good relationship with families.
- Announce events in which the family's participation is required.
- Advise pregnant mothers to attend antenatal care.
- Advise mother to get FP services.

4. Outreach

Certain health program services are designed to reach people even outside of health institution. Health institutions provide these services regularly to different communities therefore HSEW working in the community need to be part of this service.

Objective

To mobilize segment of the community to get the health service program.

Activities

- Announce to the community on date of immunization
- Register children who are legible to get vaccine
- Communicate with pregnant women so that they will get immunized and they would be followed at ANC.

5. Family Health

To maintain the health of the family; ANC, Postnatal care, FP, EPI, Adolescent care, and STIs should be provided.

Objectives

- Identify family health problem.
- Alleviate family health problem.

Activities

- Implement different component of family health seminar at community level
- Advise mothers on exclusive breastfeeding in the first 6 months of infant life.
- Distribute different contraceptive methods to needy mothers.
- Provide HE in different activities
- Distribute condoms

6. Environmental Health

The health of the community can only be mentioned if the environment on which they live is safe; community can be mobilized to deal with problems in the environment.

Objective

To promote health and prevent disease by having safe environment through community participation

Activities

- Visit and inspect water source of the community.
- Get involved in protection of water sources.
- Visit and evaluate waste handling of the community.
- Select waste disposal site.
- Maintain previously constructed latrines.
- Assist the community in construction of latrines.
- Mobilize the public to control vectors and rodents.
- Etc.

7. Documentation and reporting

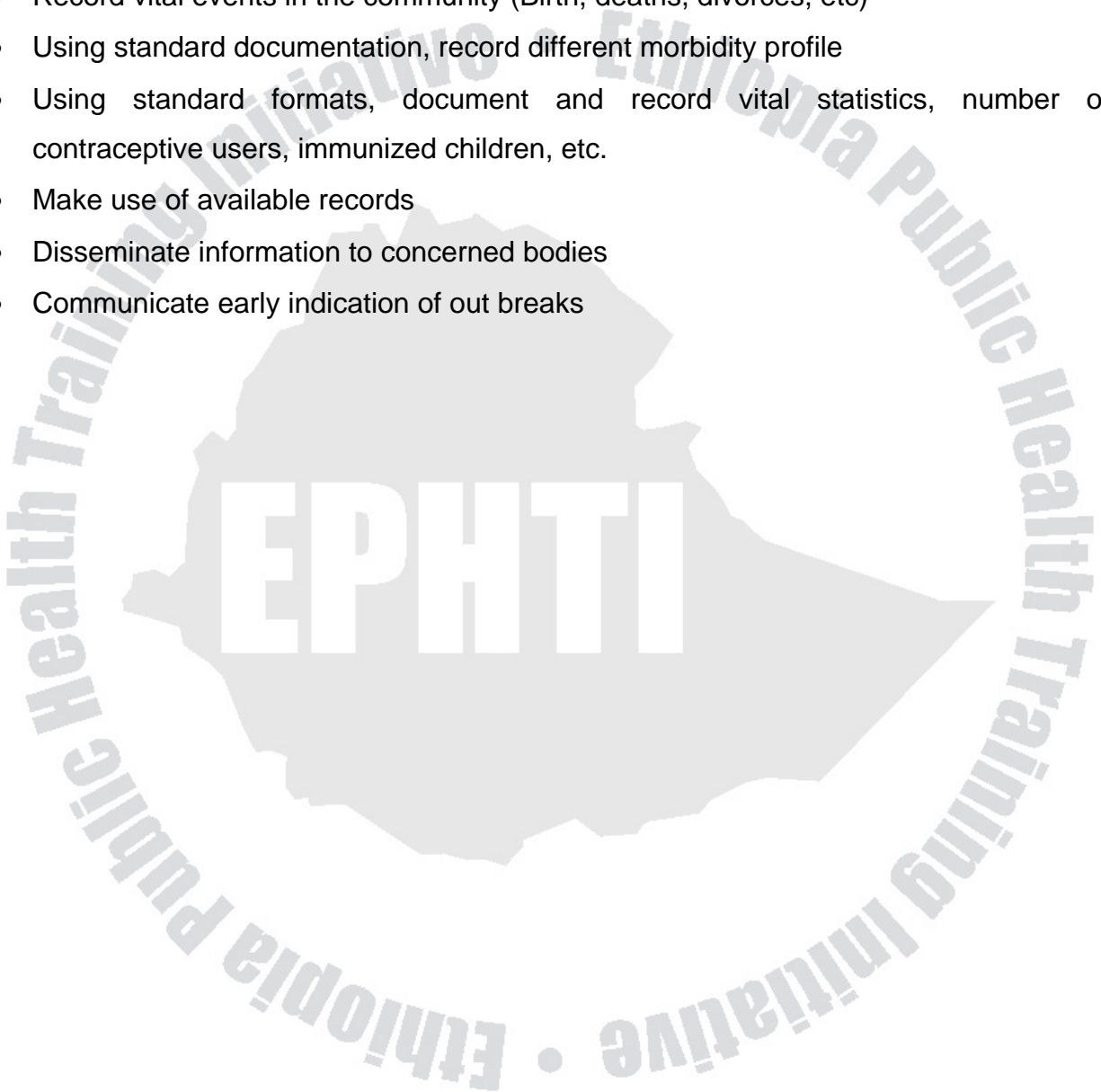
Every activity undertaken by community health team needs to be documented and communicated with other responsible bodies. It should be regular and clear.

Objectives

- Develop the skills of recording.
- Provide regular information to responsible decision makers.

Activities

- Record vital events in the community (Birth, deaths, divorces, etc)
- Using standard documentation, record different morbidity profile
- Using standard formats, document and record vital statistics, number of contraceptive users, immunized children, etc.
- Make use of available records
- Disseminate information to concerned bodies
- Communicate early indication of out breaks

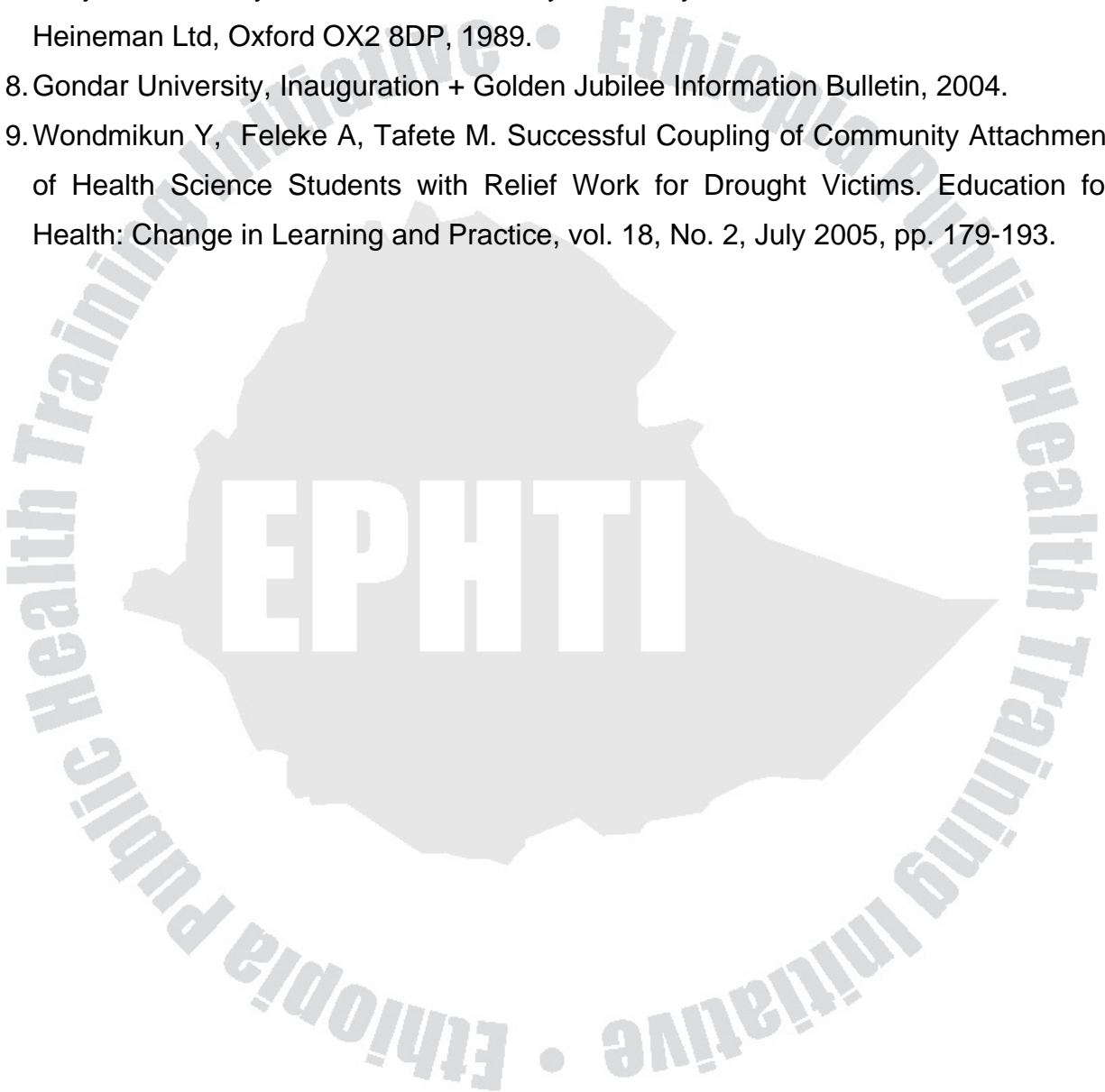


UNIT FOUR

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UNIT FIVE

ANNEX

ANNEX I. Answer Key for the Pre-test of the Core Module

1. d
2. b
3. a
4. e
5. e
6. e
7. b
8. c
9. a
10. e
11. b
12. c
13. d
14. e
15. e



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