

## Sierra Leone MoHS

### FACILITATE A COURSE GUIDE NON-COMMUNICABLE DISEASE DESKGUIDE TRAINING

#### General

1. This course guide NCD Deskguide used for the training will help the health workers such as CHOs to get a clear understanding/awareness which will improve their ability to provide better quality NCD service.
2. Participants will be given the deskguide and the participant's module a week (at least one day, as possible) before the training. They are strongly advised to read the deskguide in advance. Every facilitator will also receive a copy of the **facilitator's module** (as well as the content of the participant's module, with additional notes for facilitators eg when answering questions).
3. Facilitators have to be participants in the beginning as part of the training in order to be familiar with the materials and training methods. Prior to running the courses in your own area, all facilitators must first be a participant in a training of health workers. This way, they will know the content, but also observe how the course is run by your fellow facilitators.
4. The training will employ participatory approach which encourages more interactive activities such as group discussion, case study-role play and practical exercises eg using the treatment card.
5. You are to facilitate the participant's activity/ learning, not to be lecturing. Your role, for each section eg on diabetes, is to: briefly introduce, say to read the explanatory text and deskguide page, do the role play and exercise, and answer questions and briefly sum up on key points at the end of a section. Minimize talking yourself!
6. It's strongly recommended that the number of eg CHO trainees in each training course/workshop should be limited to 20-30.

## Facilitating Skills and Procedures:

### 1. Preparing the course

The course room must be booked, and all equipment and supplies needed during the course are available. During the course the facilitators are responsible for ensuring that the environment is suitable for learning. For example, that the room is not too hot or too noisy, that there are many small tables and enough chairs – which can be re-arranged for the role-plays. Ensure the course runs to time.

### 2. Address the purpose of the training course.

Explain your role as a facilitator, and that:

- The course is designed so participants learn to undertake the tasks needed for the NCD care to run properly. This means new skills – such as improved communication, improving patient education, and using treatment cards (for follow up care and monitoring quality).
- This course is not based on lectures but rather on participants readings a few pages, briefly discussing, and the practice exercises and role-plays.
- Discussion and questions are welcome and seen as an important way of learning. Remind participants that we all have valuable experience and that it is important to learn from each other as well as from the course material.

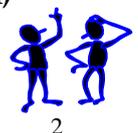
### 3. Timekeeping

Effective timekeeping is very important for the course. It can be helpful for facilitators to take turns to lead the session/discussion whilst another facilitator monitors the time (eg participants don't take too long on role-plays or class discussions). The sessions should start and finish on time, and participants should return from breaks on time. Have a clock visible so you can always see the time easily.

### 4. Brief introduction and reading of each section

Refer to the specific section of the training module at the beginning of the session. Please remember the symbols:

- 1) ☞ means that this section needs to be emphasised or given a conclusion;
- 2) Vertical lines mean that this part needs to be read by the participants.



## 5. Facilitating role plays

- 1) Inform participants that they will do the role-plays in group of 3 people. And tell them that role play can enhance the participants' understanding of what they have just read and is the best way to teach communication (consultation and patient education) skills.
- 2) Give clear instructions about how many participants should be in each group. Divide the participants into groups and make them decide who play which role: 1. CHO, nurse other health worker, 2. the patient and 3. the observer.
- 3) Introduce the role-play setting briefly and clearly, including time, place, people, different roles etc. (Refer to the relevant pages of the deskguide if necessary). Tell them how much time is available for the role-play (e.g. around 15 minutes plus 5 minutes feedback, a total of 20 minutes each maximum).
- 4) Before starting, encourage participants to imagine the real scene in your district/ town of Sierra Leone. Imitate their roles' words and behaviour, fears or worries in a realistic way from the perspectives of the person described in the case study role-play. Also remind them to consider the communication skills.
- 5) The observer should listen and watch carefully (while also glancing at the deskguide), so that he/she will be able to give good comments on what was good and could be done better by the health worker.
- 6) Start role-play exercises. You should walk around every groups and if necessary guide the role-play or provide support. Make sure participants take turns in each role (health worker, patient and observer). If you find some individuals do not speak much, encourage them participate actively.

## 6. Facilitating group discussion

Aims at sharing experiences and ideas learnt from the teaching and role-play exercises and from each other. During a role-play session, if you find some people are not contributing to discussions think about how you may include their opinion. Encourage them to talk.

After each role-play session or reading session, encourage group discusses within its partners. Facilitator should not hold your words until the role play ends. Please give more time and opportunity for your participants to speak.

### **7. Summarising a section**

- 1) Summarise and emphasise the key points learnt in the session, eg on communication skill or on epilepsy.
- 2) Ask participants if any questions arise. If any, discuss them.
- 3) Do not forget to congratulate good performance. Encourage all for more active learning in the next session.
- 4) Announce the topics to be learnt in the next session.
- 5) Do not summarise more than 10-15 minutes.

### **8. Summarising at the end of the day**

Briefly repeat the major topics learnt today, including enhancing communication skills, educating patients, selecting and preparing patient treatment supporters, follow up interview patients at their home, reviewing patients at the NCD clinic. Use less than 15 minutes.

### **9. Immediate supervisory follow-ups**

Immediate supervisory follow-ups are very important to ensure the quality of training as both a check point and reminder. Each district team (trainer-facilitator/CHOs) should visit all district hospital OPD, CHCs/PHUs within two weeks after the completion of training, or as soon as transport available. The supervisory trip should be carried out by trained facilitators, and record what was found and agreed to be done before the next meeting. A note of agreed action should be filled during the visit and a copy should be given to the supervised CHC/ PHU, hospital OPD etc. before departure.

It is natural to find problems after the training. People need time to learn and practice. Do not scold them. Give constructive feedback based on the knowledge leaned from the deskguide and training module.

Preparation - venue, advertising, timing, printing guides, participant list.

**Suggested workshop time table (for illustration only)**

Time	Content	Facilitator
Day(s) prior	Preparation for the course: Suitable room and equipment including writing board, pen, register book, and feedback questionnaire for trainees.	
9 - 9.15	Welcome and address the purpose of the training course. See p2, Addressing the purpose	
9.15 -30	Chapter 1/Training Module (TM): Introduction to NCD Case Management Deskguide	
9.30- 10.30	Communication skills. Suggest 15 and 5 minutes for comments, i.e. 20 minutes for role plays.	
10:10-10:20	Tea/coffee Break	
10:20-11:40	Hypertension	
11:40-12:00	Feedback and Discussion. Summerise the morning and announce topics in the afternoon.	
14:30-15: 50	Diabetes	
15:50-16:00	Tea Break	
16:00-16:20	Asthma	
16:20-17:00	Reviewing NCD patients at the clinics where seen	
17:00-17:30	Feedback and discussion. Announce the immediate supervisory visits to general hospitals and CHCs in two weeks. Ask participants to fill the feedback form.	

Similarly on the next day(s) other eg mental health, depression, epilepsy etc.

### KEY POINTS to be a good facilitator

#### DO...

- Be enthusiastic
- Encourage questions
- Watch out for people who may be struggling and offer assistance
- Always start by giving positive feedback:
  - Even if someone is having trouble. For example: “that’s a good question – many people find this bit difficult”
  - Always give a positive comment before mentioning something that could be done better, end with a general positive comment. For example, “I liked the way you listened carefully to the patients presenting symptoms before asking specific questions; but as well as the symptoms you did ask, also remember to ask about duration of cough. You have to have a sympathetic manner when talking to patients.
- Be friendly and approachable
- Use words and language that everyone will understand

#### DON'T...

- Don't lecture the class in the traditional way – just introduce and briefly summarise sections of the course at the appropriate times.
- Don't talk too much during group discussion sessions! Encourage and lead discussion amongst the participants instead.
- Don't pull faces or show surprise if someone gets things wrong – this is very demotivating. Instead help them to see their mistake and how to correct it.
- Don't get distracted by other matters when the participants are working through the course – this would make you unavailable to help and you may miss the fact that someone is having difficulties.