

# Testing an innovative model for supportive supervision of primary health care providers in Rwanda. An ongoing study.

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## Background

Supportive supervision may contribute to improve service delivery and health outcomes in primary health care, particularly in resource-constrained settings. In Rwanda, primary health care is provided by health centres nurses who receive supervision from district hospital nurses. This external supervision appears to have a managerial objective, focusing on administration, performance evaluation, and to a lesser extent on provider-centred problem solving, feedback and learning. There is an eminent need to identify and implement effective ways to improve the supportive aspects of this external supervision. We developed the ExPRESS tool (External Supervision: Provider Evaluation of Supervisor Support) to identify specific areas of external supervision to be improved.

## Objectives

To refine and test the applicability of a participatory and interactive feedback model based on provider-reported assessments of supervision practice as captured by the ExPRESS tool.

## Methods

A participatory action research (PAR) design called cooperative inquiry groups (CIG) was used. The study included purposively selected 5-6 supervisors from 3 district hospitals, willing and available to participate in regular meetings during the data collection period. They should have at least 6 months of experience with supervision of health centres. The study also included purposively selected nurses from 5-6 health centres who have interacted with at least one of the selected supervisors, on a clinical matter and who are not planning to leave the health centre during the data collection period. Nurses assess supervision they receive, using the ExPRESS tool. Qualitative data is generated through focus groups-like meetings of supervisors. During these meetings supervisors reflect on nurses' feedbacks and their own experience, identify learning points, propose an action plan and implement change. The meetings are facilitated by a trained data collector who audio records and transcribes qualitative data. A qualitative content analysis of the data will be applied to explore supervisors' opinions and experiences with the feedback model.

## Discussion

We expect the results of this study to validate a new feedback model with the potential to improve the quality of external supervision of primary health care and indirectly improve providers' performance and motivation for optimal provision of care in Rwanda and similar contexts.