

TIMCI

Tools for Integrated
Management of
Childhood Illness

KENYA



Provider and Caregiver Perspectives of CDSS for Sick Children

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Qualitative Studies

Study design and Methods

- Exploratory research design
 - Triangulation of qualitative data collection methods
 - In-depth interviews
 - Process maps
 - Time flow observations
 - Process evaluation
 - Key informant interviews
 - Document reviews
 - Online surveys
 - Data analysis iterative to inform implementation process through preliminary findings

Qualitative Studies

Key Findings

- Uptake of intervention by caregivers
 - Low in early intervention
 - Little or no community engagement
 - Most caregivers would find out about intervention from HCP
 - Caregivers had little information on CDSA some confused it with HCPs personal devices or research devices in study facilities

Qualitative Studies

Key Findings

- **Uptake of intervention by caregivers**
 - Increased over time in the implementation of intervention
 - Accelerated community engagement
 - Civil Society organizations (CSOs) engaging community health volunteers (CHVs) and HCPs
 - Facility and community mobilization and awareness creation
 - dialogues and health talks
 - Caregivers Perceive CDSA as enabling better care for children
 - Some caregivers complain when there is no medication prescribed at the end of CDSA treatment

Qualitative Studies

Key Findings

- **Uptake of intervention by caregivers**
 - Caregivers Perceive CDSA as enabling better care for children
 - CDSA treatment
 - no medication prescribed
 - acceptable to some caregivers
 - Referrals not always completed.
 - Effective if its an emergency or transfer is facilitated at health center
 - Multiple influencers for decision for referral
 - Cost a major factor

Qualitative Studies

Key Findings

- **Uptake of intervention by Health care providers**
 - Irregular use of POX and CDSA in some facilities
 - Trained HCP is away on leave/ training/staff rotation/ transfers
 - Power outages- no power back up, only one device in health facility
 - Long patient queues
 - HCPs prioritizing clearing the queue over CDSA use on all the sick children
 - In some facilities the practice is to do routine consultation and fill in CDSA later

Qualitative Studies

Key Findings

- **Uptake of intervention by Health care providers**
 - Low in early intervention
 - HCP attitudes, motivation
 - Training of all HCPs in all facilities
 - Formal training
 - On-the-Job training
 - Increased over time in the implementation of intervention
 - Support supervision and mentorship in all intervention facilities

Qualitative Studies

THANK YOU
ASANTENI SANA