

A flexible, efficient and decentralised occupational training model to fast-track professional nursing education for rural Zambia

Presented at SWISS TPH Spring Symposium, 8th May 2019

Beatrice M. Zulu, SolidarMed Zambia Nursing Project Manager

Presentation overview

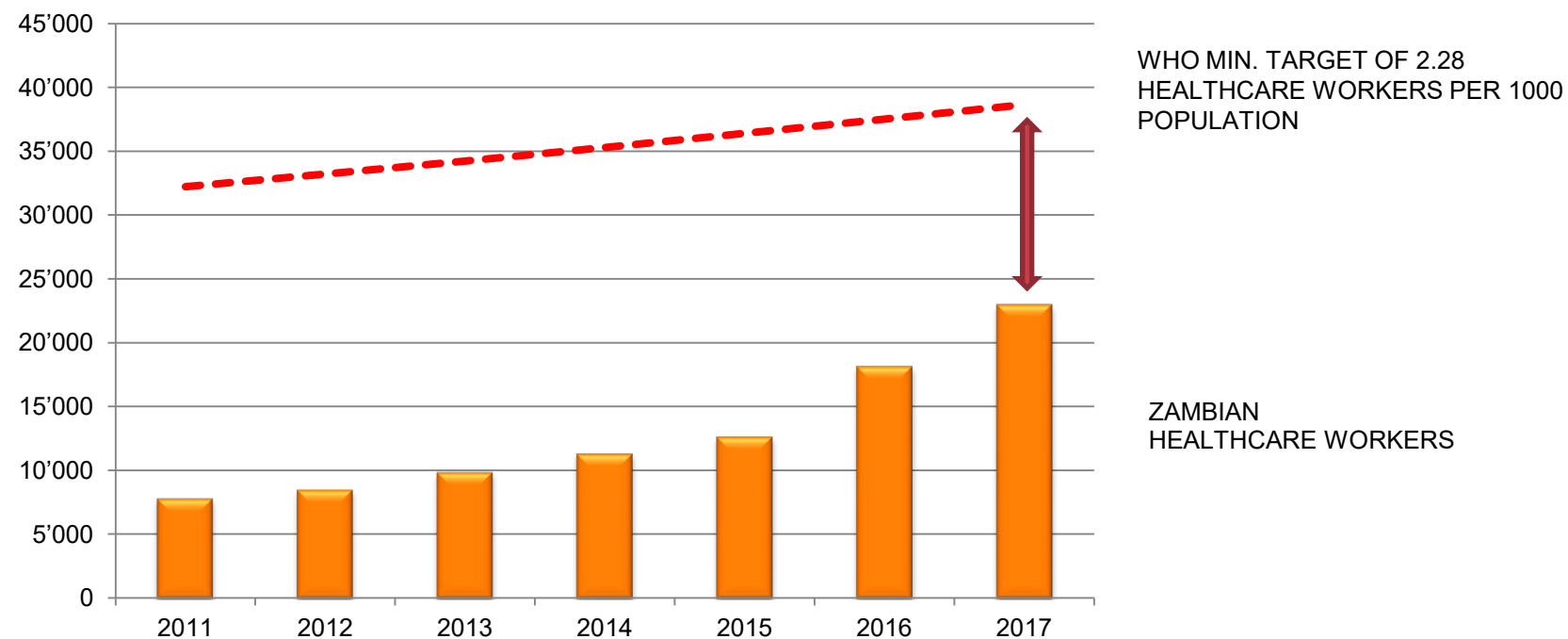
1. Human Resources for Health in Zambia
2. Decentralised model
3. Key aspects Decentralised model
4. Project results (pilot phase)
5. Overall benefits
6. Scaling up the model

Challenges

- 2/3 of the population live in poverty.
- Highest rates of income inequality in the world.
- High rural urban inequality.
- Heavily indebted



Human Resources for Health Deficit in Zambia

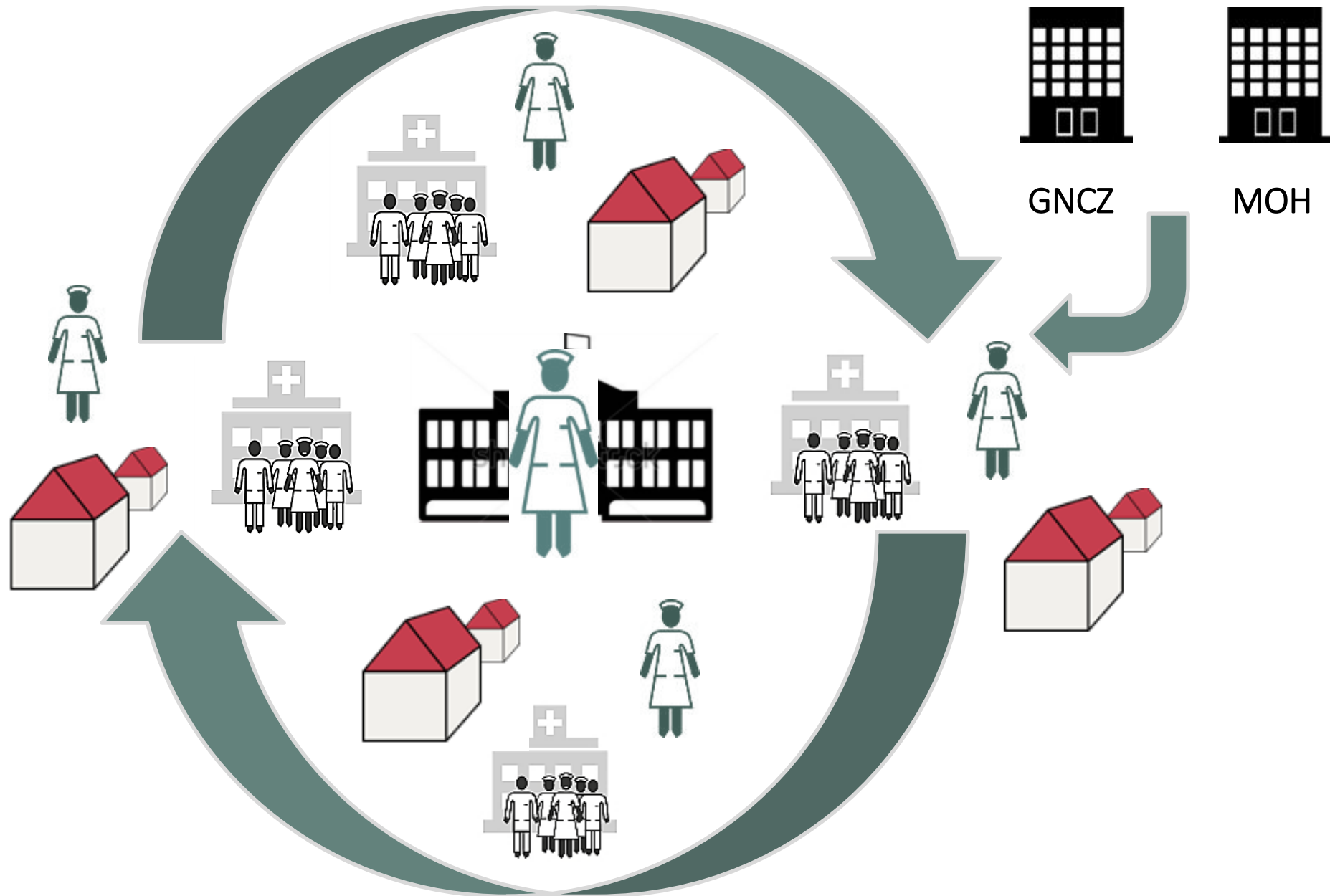


Number of Zambian Healthcare Workers compared to minimum WHO target

Human Resources for Health in Zambia

- Lack of skilled health professionals - current 50% deficit.
- Critical in rural areas; 1.12 Health Care Workers per 1,000 people compared to 1.87 in urban areas.
- Zambia needs to double the number of the health workforce by 2025
- Training institutions have increased graduates but not resources and capacity.



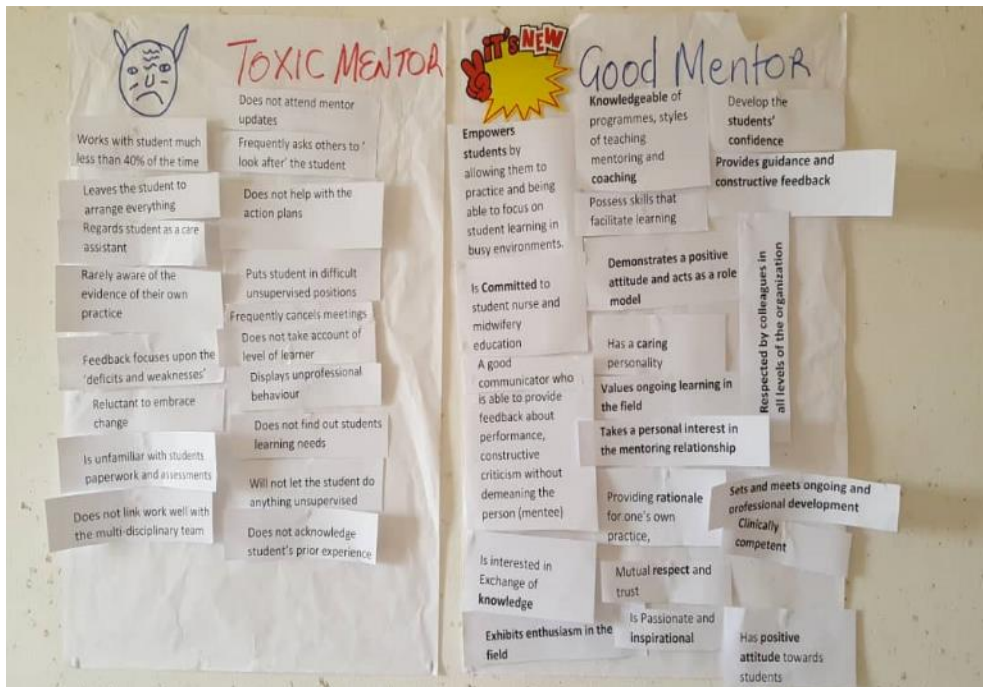


Key Aspects of the Model

- The central nursing school provides theoretical training.
- Practical training sites in the decentralised hospitals.
- Mini skills labs at each of the decentralised sites.
- Students rotate within the depts and sites for maximum skills acquisition.



Clinical Instructors



- Site Clinical Instructors critical to success, providing hands-on vocational training.
- St Luke's has 3 Clinical Instructors at each decentralised sites for 30 to 40 students.
- Clinical Instructors meet every quarter for knowledge sharing and harmonisation of practice.

Benefits of decentralization

- Fewer students learn together. Less congestion/overload in practical sites.
- Exposure to different caseloads (ARV, MNCH, crocodile bites etc.), equipping them for future postings.
- Prepares students for rural postings where greatest deficit in health workers.
- More practice, which builds skills acquisition, develops professional etiquette and gives confidence.
- Extra staff for Hospitals and an environment that fosters continued professional development.

Project outcomes

- Demonstrated success of decentralised training – pass rate of 96%
- Increase in annual student intake without compromising the quality. St Luke's intake increased from 57 in 2015 to 175 in 2018.
- Blended learning, tablets with course material and to communicate with lecturers when out on attachment
- 65% graduates went on to be posted in rural areas.



Next Steps - Scale up



**Decentralised Nurse Training Model—
Higher numbers of quality Nurses for Zambia
Lessons learnt from a best practice example**

Date: October 2017



Conclusion

The 5 year pilot conducted at St Luke's Nursing and Midwifery School, Mwanzya proves the Decentralised Nurse Training Model can address the Human Resources for Health (HR4H) crisis in Zambia. The model enabled an existing school to significantly increase its annual output of Nurse graduates without compromising on the quality of their training.

The model allows students to be trained in rural hospitals so after their graduation they are ready to address the specific challenges of work in rural areas.

The model offers a practical solution to address the HR4H crisis, when the following measures are in place:

- Appropriate infrastructure (hostels)
- Appropriate human resources at the different decentralised practical training sites (Clinical Instructors)
- Provision of training materials to the decentralised sites
- Strong partnerships and communication between the decentralised sites and school



Regular site visits from teaching staff to offer supervision, monitoring, evaluation, co-ordination and support to decentralised staff. Compared to setting up new schools, expansion of existing schools allows significant cost savings with regards to staff and infrastructure

It is suggested that this pilot project and best practice example may be suitable for implementation at other schools in Zambia.

Background

St Luke's School of Nursing and Midwifery, Mwanzya opened in 2009 with an annual intake of 77 Enrolled Nurse (EN) students attached to a small rural hospital. In response to the HR4H crisis in Zambia, in 2017 the Ministry of Health (MOH) asked the School to increase its intake.

However, the School recognised that increasing intakes would have a substantial negative impact on the quality of the practical training at the hospital. Staff would be overwhelmed with too many students and would therefore be unable to provide proper levels of support to the students. As a response, St Luke's started an innovative decentralised training model sending students for their practical training to different practical training hospitals.

- GNCZ endorsed the **Implementation Guide for Decentralised Nurse Training** developed by SolidarMed.
- Launch at Nurse Educators' annual meeting as the guiding document for nationwide decentralised nurse training.
- National Human Resources for Health Strategic Plan (2018-2024) adopts this decentralised training approach.
- Ministry of Health to reinforce the Clinical Instructor cadre in health facilities and strengthen practical

Next Phase 2019 - 2022

- 3 new partner schools identified in the northern region for roll-out of decentralised training (light touch).
- Steering committee from Ministry of Health, Nursing unions and GNCZ.
- Monitor uptake and implementation of the model.

