

# MalariaCare Ghana: Experiences from the Field on Community Health Officers’ Internship Program

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## Introduction

In Ghana, Community Health Planning Services (CHPS) compounds are typically the closest source of government health care for rural dwellers and are manned by Community Health Officers (CHOs) and clinical nurses who perform basic preventive, curative, and referral services. The provision of malaria case management at these facilities faces multiple challenges, including inadequate knowledge and skills of CHOs who, following their initial training, received little monitoring and refresher training. MalariaCare, a President’s Malaria Initiative-funded project, piloted an internship program for CHOs in 16 of Ghana’s 216 total districts to test whether it improves the quality of care provided by CHOs in managing malaria and other febrile illnesses. The specific objectives of the internships were to:

- Build links with higher level providers that would serve as mentors to CHOs;
- Build and maintain the capacity of lower level providers to manage malaria and other febrile illnesses, and appropriately refer cases to a higher level facility;
- Develop supportive and interactive relationships and guide CHOs in their professional, personal, and interpersonal growth; and
- Share experiences based on the needs of colleagues and understand factors that help nurses and CHOs integrate theory into practice.

## Methods

Ninety-one (91) CHOs in 16 districts participated in 5-day internships at district hospitals in 2013 and 2014. Twenty-seven (27) clinicians were provided with standard content on care pathways to train and mentor the CHO interns. The internship included practical sessions in the outpatient clinic and presentations on history taking and physical examination; management of fever and other conditions related to malaria; acute respiratory infection, diarrhea, ear-nose-throat, genitourinary, and skin issues; and evaluation for malnutrition and anemia.

Performance for 16 CHOs at a representative district hospital (Worawora in Biakoye District) was evaluated during the internships with a pre- and post- knowledge test on identifying and managing febrile illness and the other conditions covered during the internships. In 2016, 10 to 12 months following the internships, a 23-question survey was administered to 27 internship participants to assess internship teaching methods and the CHOs’ impressions of

## Methods, continued

the internship. In addition, supervisors reviewed the registers for 10 patients with positive and negative test results each to assess adherence to test results (i.e. whether or not they had received an ACT).

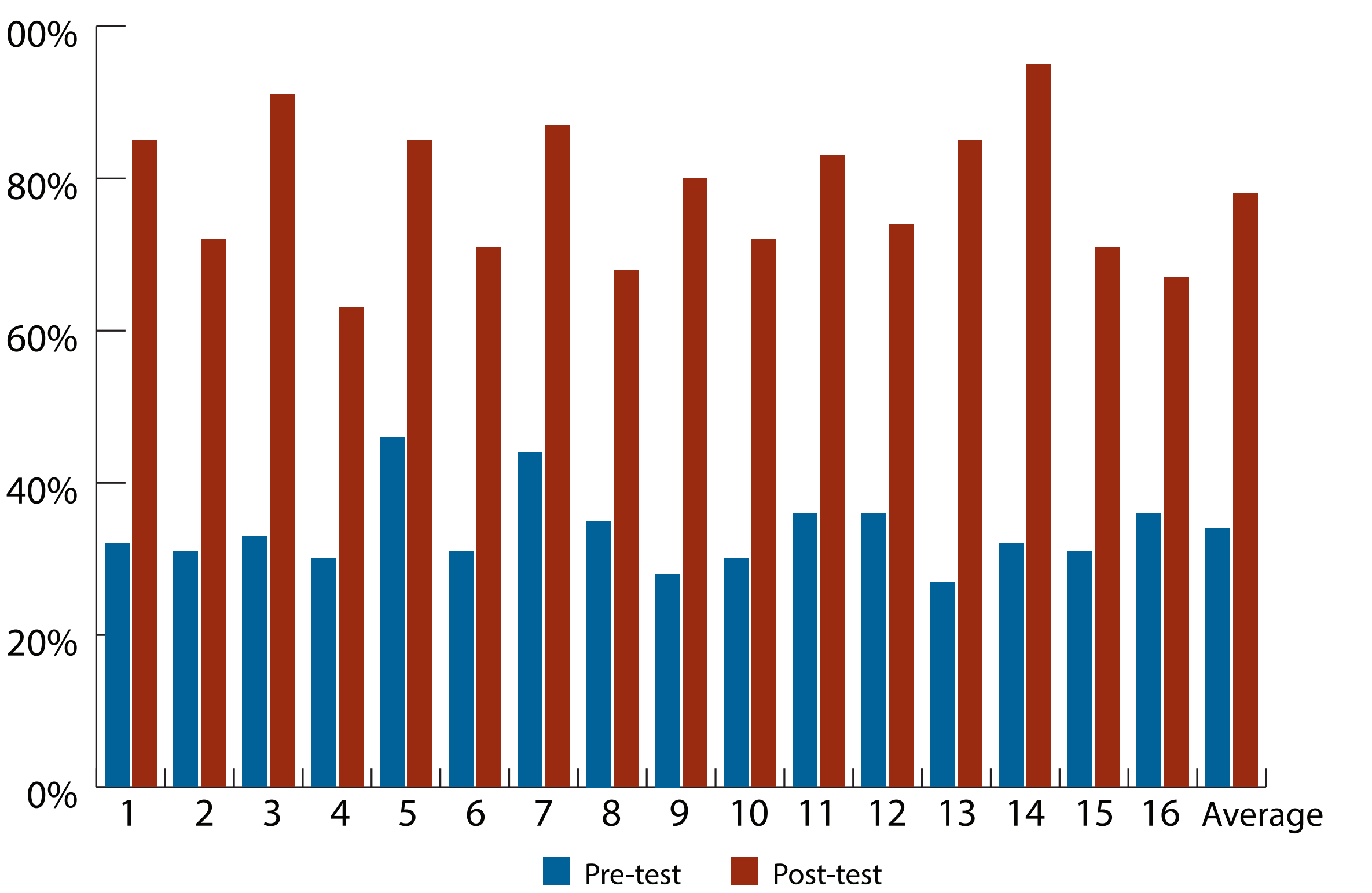
Figure 1: A CHO conducts a patient assessment during his internship.



## Results

The average pre-test performance score for managing febrile illness was 34 percent (median 32 percent; range 27 to 46 percent). After the internships, scores for 12 of 16 (75 percent) participants more than doubled, with an average post-test result of 78 percent (median 77 percent; range 63 to 95 percent). See Figure 2.

Figure 2: Pre/post-test performance scores for internship participants from Biakoye District, Worawora Government Hospital.



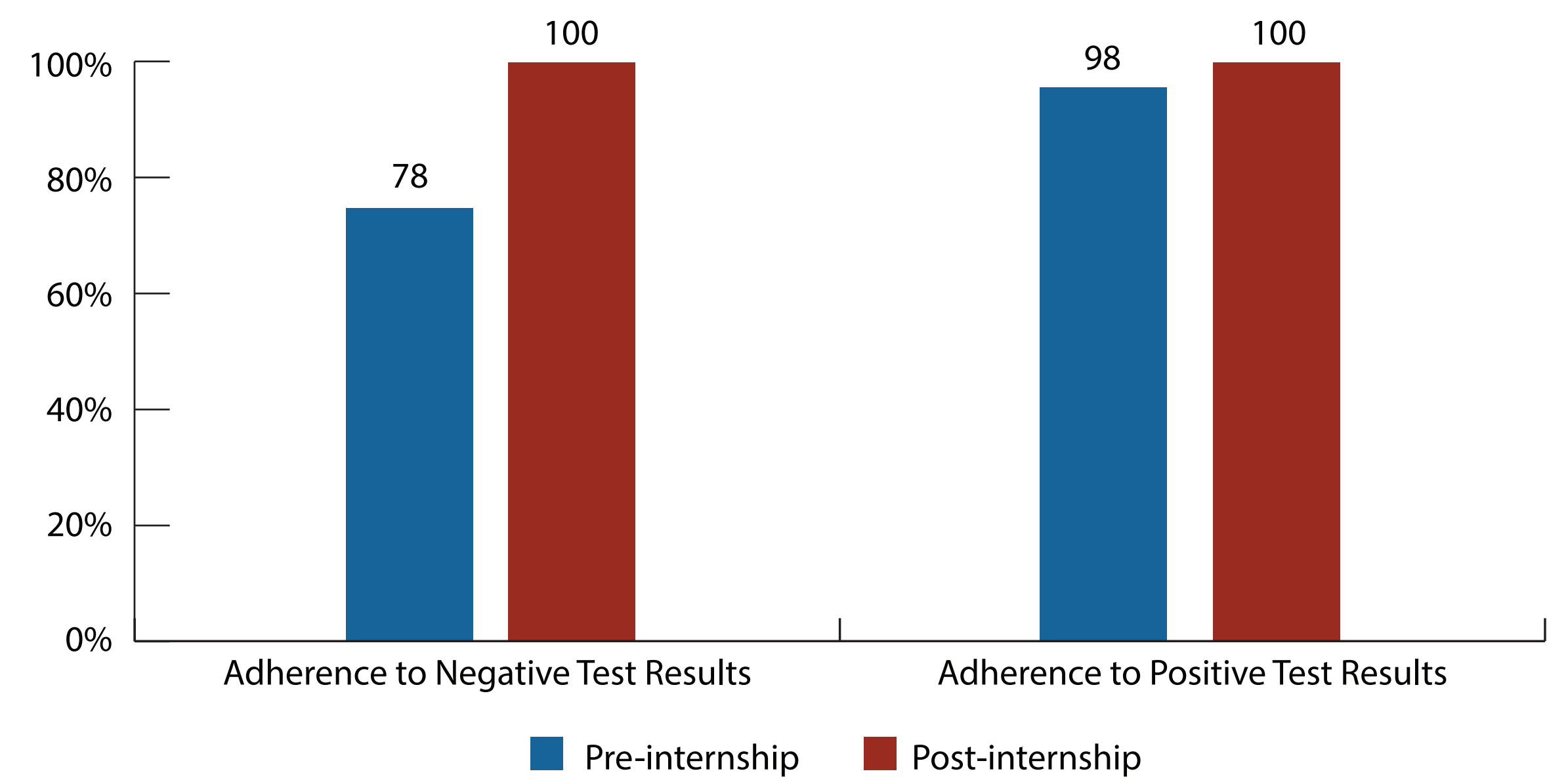
## Results, continued

The majority of CHOs surveyed reported that during the internship, mentors observed them conducting outpatient consultations (74 percent); that they received practical sessions on history taking, physical examination, and febrile illness management (88 percent); and participated in an RDT demonstration.

All CHOs surveyed agreed with the statement that they were able to both better diagnose and treat clients with febrile illnesses, and 82 percent agreed that they improved their ability to take a thorough history and conduct a physical examination.

Adherence to negative test results improved from 78 percent to 100 percent, based on the review of 40 patient records per facility (Figure 3). While adherence to a positive test result was high prior to the internships (98 percent), it also improved to 100 percent.

Figure 3: Assessment findings on adherence to RDT results before and after 2015 CHO internship program



## Conclusion

Results show that internships for healthcare workers working at the community level can:

- Improve test-based treatment for malaria;
- Reduce irrational use of antimalarial medicines through improving adherence to test results; and
- Improve worker confidence in their ability to diagnose and treat febrile illnesses appropriately.

CHO exposure to management of a wide range of febrile illnesses during an internship can improve their ability and confidence to diagnose and treat febrile illnesses appropriately in providing rural populations access to quality care.