



CASE STUDY

Clinical mentoring study in Jigawa state builds confidence, improves service delivery

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Dr. Montaz Ahmed, a Bangladeshi working in Gwaram, Jigawa State, radiates joy when he discusses recent happenings in his hospital. “We have new equipment—an oxygen concentrator, inverter, ultrasound machine, labour room beds, incubators — and they help us improve quality of care,” says Ahmed, head of Gwaram Cottage Hospital.

Also, he says the hospital’s patient care capacity increased dramatically when an operations research on clinical mentoring sponsored by Partnership for Transforming Health Systems (PATHS2) began in July 2012. A full-time doctor, two midwives and the hospital equipment were provided by PATHS2.

“We are grateful because now, we’re achieving a lot. Referrals out have reduced, and referrals in are increasing as word spreads that we have more staff and visiting consultants who help improve our skills,” he enthuses.

PATHS2 is supporting Gwaram Cottage Hospital to improve service delivery with UKaid from the Department for International Development. Through the clinical mentoring study, another form of assistance, consultants have been attached to Hadejia General Hospital, Ringim General Hospital, Garki PHC, Gwaram Cottage Hospital, and Basirka PHC to help bridge the acute human resources for health gaps



Dr. Jamilu Tukur, centre, with two midwife-trainees at Garki PHC, Jigawa State

experienced throughout Jigawa State.

The intervention, which is being implemented as a partnership between the Jigawa State Government and PATHS2, involves weekly working visits to the facilities by consultant obstetricians and paediatricians from tertiary health institutions. These mentors join in service delivery, during which they introduce new skills to mentees or brush up the skills they already have.

After six months, an evaluation of the programme showed improvements, says the programme's coordinator, Dr. Jamilu Tukur—an obstetrician/gynaecologist at Aminu Kano Teaching Hospital, Kano. "There was significant increase in knowledge and skills among the mentees, which has had a positive effect on quality of care as can be gauged from the facilities' key health service outcomes," he says.

At Ringim General Hospital, where Tukur mentors maternity department staff, normal deliveries increased to 664 between July and December 2012 from 538 in January – June).

At Gwaram Cottage Hospital, there were 150 normal deliveries in the first half of 2012, but during the mentorship period, there were 291. Also, the need to refer cases out reduced, while more patients were referred to the hospital from outside. The other facilities reported similar improvements.

Dr. Abubakar Omolowo, head of Ringim General Hospital, says the programme is so important to his hospital that step-down trainings are organised for staff of the paediatrics and maternity departments who are off duty when the mentors visit.

The evaluation found that the Jigawa State Government, PATHS2, and the mentors are happy with the study. "It's a win-win situation for everybody;

it is an intervention that was waiting to happen," Dr. Tukur says, explaining that it is a replicable and cheaper method of imparting knowledge.

Ahmed and Omolowo, who are both mentees, want the programme expanded. "There is much poverty around us. Our patients are mostly subsistence farmers; 90 per cent of those we refer don't accept referral. Therefore, we have a heavy burden of patients who need to be reviewed by consultants, and the mentors are helping. I thank PATHS2 and DfID; they have done a lot for this hospital," says Ahmed.

Dr. Emmanuel Anto, a National Youth Service Corps doctor in Gwaram, and Hajia Jemila Suleiman, a nurse/midwife at Ringim both speak highly of the programme. "My skills are improving; I am more adept at diagnosing and prescribing," says Anto who used to have a dilemma with managing patients with protein-energy malnutrition. In the course of the programme, he learnt how to handle such cases.

On her part, Hajia Jemila says she has learnt to use a number of medications and tools to better manage maternal and labour complications. These include Misoprostol, Magnesium Sulphate and the partograph. With her new skills and confidence, she says she has saved many women who would have bled to death or died from other pregnancy-related complications.

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The Partnership for Transforming Health Systems Phase Two (PATHS2) is a six-year development initiative that aims to ensure Nigeria achieves important health-related Millennium Development Goals.

Funded by UKAID from the Department for International Development, PATHS2 is working in partnership with the Government of Nigeria and other stakeholders to improve the planning, financing, and delivery of sustainable health services for those most in need. In addition to its work at the federal level, the PATHS2 programme is implemented in the five states of Enugu, Jigawa, Kaduna, Kano, and Lagos. PATHS2 follows the successful PATHS programme, which was implemented from 2002 to 2008.

PATHS2 is managed by Abt Associates, in association with Options, Mannion Daniels, and the Axios Foundation.

