

# Supporting States to conduct 72-Hour Clinic Makeovers:

**The Challenge Initiative Experience**



*Dala MCH during the 72-hour clinic makeover.*

A conducive healthcare environment can be linked with increased uptake of family planning (FP) services. It can improve demand for FP services as well as boost the morale of FP providers at providing quality care in a comfortable environment.



*Dala MCH after the 72-hour Clinic Makeover.*

The Challenge Initiative (TCI) is supporting States to adapt the 72-hour Clinic Makeover - a high impact urban reproductive health intervention - to ensure a conducive environment where providers can offer quality FP services and beneficiaries can have their FP needs attended to adequately. The 72-Hour Makeover is an innovative approach to bring health facilities up to recommended national standards and create a positive environment for providing and receiving FP services. Through the 72-hour Clinic Makeover, remodeling of selected health facilities commences at close of business on Friday evening and by Monday morning, an improved health facility is opened to the Staff and to the community. So far, 22 facilities have been made over across 4 states with support from TCI with more facilities assessed in preparation for implementation.

## Methodology

In line with the Initiative's Business Unusual model of providing support to States to lead and implement high impact reproductive health interventions, the 72-Hour Clinic Makeover is spearheaded by the States with technical input and guidance from TCI. TCI's three-pronged approach to program implementation - Advocacy, Demand Generation and Service Delivery - are all employed in executing the 72-Hour Clinic Makeover.

To start off the process, the TCI team in partnership with staff from the States' Ministry of Health (SMOH) and State Primary Health Care Development Agency (SPHCDA) pay a joint advocacy visit to the executive arm of the States to introduce the concept of the makeover and to seek their cooperation and buy-in. The advocacy visit is also aimed at eliciting government commitment to adopt the method across other facilities not supported by TCI.

In implementing the 72-hour clinic makeover, the service delivery team conducts a Performance Improvement Assessment of the selected health facilities in partnership with stakeholders from the States' Ministry of Health. Following the assessment, a Performance Improvement Plan is developed using the results of the assessment. Results of the assessment and the plans for improving assessed facilities are then disseminated to technocrats and policy makers. During this meeting, the key stakeholders in the state are introduced to the entire journey map of the 72-hour clinic makeover to help them understand the process.



Staff of Kano State Ministry of Health and The Challenge Initiative conducting a final assessment of Ja'en PHC before the 72-hour Clinic Makeover.



An artisan paints a ceiling in Dala MCH, Kano State.

The next step is to revisit the selected health facilities that will require the makeover based on the PIA/PIP to do a follow up assessment where the actual scope of work for the makeover is determined. This process is carried out with the community members and artisans after which the artisans submit quotations for the renovation. Concurrently, vendors for equipment and furniture are also visited to check for quality and also to get quotations for the equipment and furniture required. These quotations according to the activity/item are used to develop a budget per facility

for the makeover and submitted for approval.

The actual 72-Hour Clinic Makeover spans a period of three days; during these days, artisans make improvements to the facilities; minimum required equipment and furniture to improve quality of healthcare delivery in the facilities are purchased and installed as well. By early morning on Monday, the new improved facility is ready for commissioning. The States and TCI team oversee the execution of the 72-hour clinic makeover with support from the Quality Improvement Teams composed of facility and community members; they support with the recruitment of artisans to execute the makeover, and also supervise the execution of the makeover and continue to monitor the facility to ensure quality service delivery long after the 72-Hour Makeover is completed.

Demand Generation is a key component of the 72-Hour Clinic Makeover; during the period of the makeover, the States with support from TCI train social mobilizers to conduct neighborhood campaigns. The Social Mobilizers go door-to-door in communities to direct women of reproductive ages to

<sup>1</sup> These selected facilities are high volume sites where women of childbearing age come to access services

the facility undergoing makeover using referral cards. When the Facility reopens for business on Monday morning, the women referred during the 72 Hour Clinic Makeover will receive FP services in the improved facility.

## Experience conducting 72-hour clinic makeover in States

The 72-Hour Makeover brings mental makeover as well as physical makeover to the facilities and communities. Stakeholders from the States are invariably amazed at the transformation that is achieved in three days and often wish to replicate the intervention.

- So far, 22 facilities have benefitted from the 72-Hour Clinic Makeover; there are plans to reach 50 facilities by January 2019



Front view of Bayan Fada PHC, Kano State, before the 72-hour clinic makeover supported by TCI



Front view of Bayan Fada PHC, Kano State, after the 72-hour clinic makeover supported by TCI

- The Nigerian State Health Investment Program (NSHIP) in Bauchi State adopted the 72-hour clinic makeover model and have currently employed the model in the makeover of three Facilities in the State



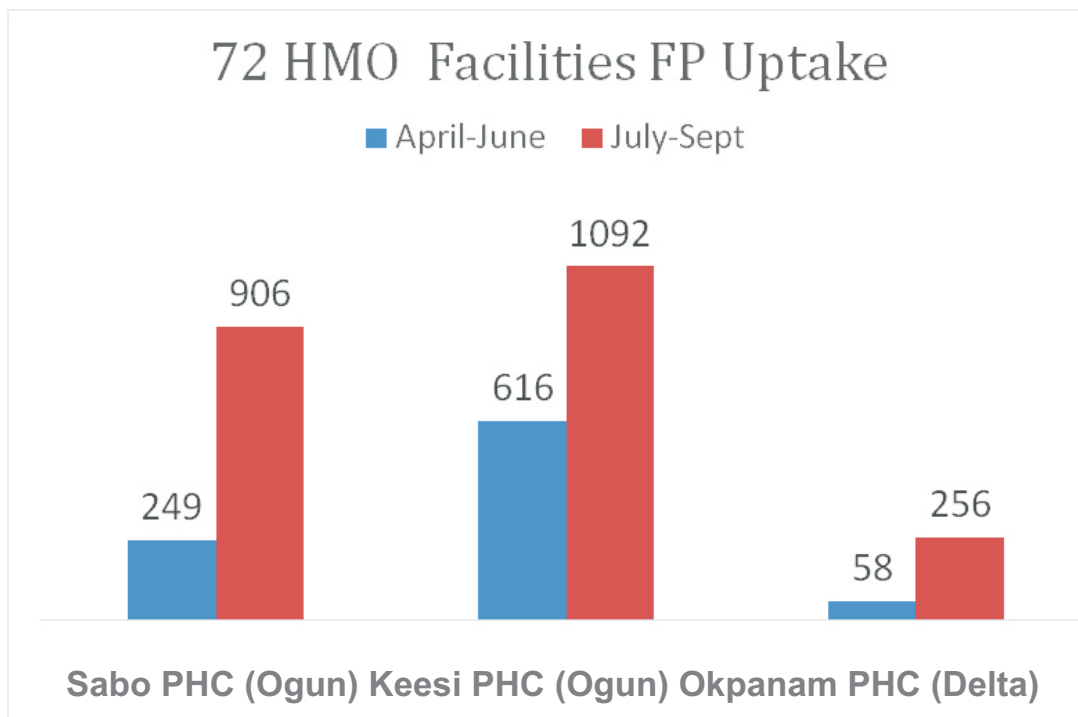
Before and After shots of the Waiting Area in Wuntin Dada PHC after the makeover by Bauchi State NSHIP

- Following the 72-hour clinic makeover, beneficiary communities led by the Quality Improvement Teams have an increased sense of responsibility and ownership of the facilities. A member of Ja'en community motivated by the visible impact of the 72-hour clinic makeover in Ja'en Primary Healthcare Centre in Kano State built a ward for male patients in Ja'en PHC. He built the male ward to decongest the Facility



The new ward under construction in Ja'en PHC Kano State

- The makeover also increases States' commitment to advancing cash and kind resources for FP interventions in the States. The States have also contributed transportation to convey purchased materials to facilities. Kano State ensured availability of consumables in facilities to guaranty free access to family planning services. In the States that have partnered with TCI to execute the 72-Clinic makeover, relevant stakeholders from SMOH & SPHCDA have been part of the makeover and have learned lesson from the makeover which they can replicate post TCI interventions.
- At the commissioning of 5 facilities that benefitted from the 72-hour clinic makeover in Bauchi State, the first Lady of Bauchi State who commissioned the facilities stated that the State had created a budget line for Childbirth Spacing with over N100million allocated to ensure sustained benefits to women and children in Bauchi State
- Consistently, there has been an increase in the number of women of reproductive age who are first time recipients of FP services following facility makeover; this indicates increased knowledge of family planning services and a new willingness to access family planning services.



*Fig. 1 Uptake of family planning services increased significantly in these facilities after the 72-hour Clinic Makeover. Blue bars show level of uptake before the makeover, orange bars show level of uptake after the makeover*

- FP providers in the facilities that have benefitted from the 72-hour makeover also demonstrate increased excitement at the new improved work environment and a willingness to meet the demand generated by social mobilization activities.



*Happy health workers in front Yelwa PHC after 72-hour clinic makeover of the facility.*

## Lessons

The States and TCI have learned invaluable lessons that can improve execution of the 72-hour Clinic Makeover. Some of them are:

- ▶ Experts like Civil Engineers and Quantity Surveyors from the Planning Department of SMOH should be included into the 72-hour makeover team where possible to oversee the work done by the artisans and offer sound technical advice on structure and procurement of required materials. Inclusion of Engineers and Surveyors in Kano State removed errors in quotation by artisans, guaranteed originality of building materials and eliminated structural errors
- ▶ The Quality Improvement Teams offer dedicated supervision of the makeover and demand equal dedication from the artisans. The quality improvement teams are necessary to ensure commitment and dedication of artisans.
- ▶ Staff from the States are also strategic to the makeover as they supervise the activity and ensure that implementation is done properly and timelines are met. They are also able to better understand the processes for replication across other facilities not supported by TCI
- ▶ Initial assessment of facilities must be detailed to avoid unexpected expenditure. Facilities should also be thoroughly checked to ensure that all equipment purchased are needed and do not already exist in the facility. Damaged but serviceable equipment should be repaired; this will reduce the cost of purchasing new equipment
- ▶ Dedicated FP providers help to verify equipment and furniture purchased for facilities
- ▶ A final reassessment of the facilities with the artisans before the commencement of the makeover proper is important to remind the artisans of what is needed from them and check if things have changed since the initial assessment. If the scope of work has changed, then renegotiation with the artisans is necessary. This might not necessarily incur more cost on the makeover.
- ▶ 72-hour clinic makeovers conducted during rainy season may be affected by rain, e.g. purchase of some materials like coarse sand and blocks was difficult due to raining season, also, paintwork was affected in some facilities because of the rain

## Challenges

The 72-hour clinic makeover has not been without challenges; these challenges now inform planning for future

- ▶ Some health facilities were in bad state leading to an expansion in the scope of work; this expansion increased the budget for the makeover. To eliminate unforeseen expenditure, a thorough assessment of facilities is required
- ▶ The quality improvement teams support engagement of artisans who live and work in the communities and demand commitment from these artisans however some selected artisans still failed to show up for work at the point of implementation leading to renegotiation with new artisans.