Part 1: Using Competency-based Training and Supportive Supervision for Provider Performance Quality Improvement

Part 2: How to Improve Cervical Cancer Prevention in Low-resource Settings: Lessons Learned from Country Experiences

World Cancer Congress
Melbourne, Australia
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Part 1: Competency-Based Training: An Essential Component of a Cervical Cancer Prevention Framework

During this presentation, we will present examples of pre-course and final knowledge assessments and image assessment. Please answer the knowledge assessment questions below. Images will be projected during the presentation. Time permitting, we will be soliciting 1 or 2 participants from the audience to respond.

A. Pre-Course Knowledge Assessment
Question 1: Cervical precancer almost always progresses to cancer if left untreated.
   □ True □ False

B. Image Assessment

<table>
<thead>
<tr>
<th>Image</th>
<th>VIA Result</th>
<th>Management</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>VIA (-), VIA (+), Suspect Cancer</td>
<td>No treatment, Cryotherapy, Refer</td>
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<td>1.</td>
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C. Final Knowledge Assessment
Question 1: A woman who is VIA-positive is eligible for cryotherapy if:
   a. The lesion extends far into the canal of the cervix.
   b. The lesion extends more than 2 mm beyond the edges of the cryotip.
   c. The lesion occupies less than 75% of the cervix.
   d. The lesion is suspicious for cancer:
Part 2: Quality Improvement: Role of Post-Training Follow-Up and Ongoing Supportive Supervision

During this presentation, we will be presenting scenarios that you may encounter on a supportive supervision visit. You are the supervisor. What are your thoughts and how will you handle these scenarios? Time permitting, we will be soliciting 1 or 2 responses. No need to write your response on this card.

Scenario 1:
Service data show a VIA-positivity rate of 30%. Is this normal or should you be concerned?

Scenario 2:
During direct observation, the provider consistently determines the VIA results before 1 minute elapses after washing the cervix with acetic acid.

Scenario 3:
The site is providing VIA screening only, without offering cryotherapy on site.

If interested to learn more, please contact us at info@jhpiego.org.
Magnitude of the Problem

Less developed regions bear 85% of global cervical cancer burden

Expected to worsen to 98% by 2030
What Is Visual Inspection with Acetic Acid (VIA)?

- Use bright white light to visualize cervix with unaided eye
- Clean cervix with a 3-5% acetic acid solution (white vinegar)
- Wait at least one minute
- Abnormal tissue temporarily appears white (acetowhite)
- **Immediate** results
- Promotes linkage of screening with treatment
Categories for VIA

NEGATIVE

POSITIVE

SUSPECT CANCER
Single Visit Approach (SVA) Steps

7. Obtain consent
8. Apply Cryotip to cervix and freeze for 3 minutes
9. Defrost for 5 minutes
10. Re-freeze for 3 minutes
11. Review post-treatment and follow-up instructions
Ensuring Quality Provider Performance

Ongoing competency development and evaluation
Quality Assurance/Improvement

Competency based training
Supportive Supervision
Continuous QA/QI

Develop and assess knowledge, skills and attitude
Ongoing assessment and development of knowledge, skills, attitude
Program Components and Objectives

1. **PREPARE** - country readiness to implement cervical cancer prevention.
2. **BUILD** – capability to support high quality cervical cancer prevention efforts
3. **SCALE UP** - access to high quality VIA and cryotherapy at service delivery points
4. **SUSTAIN** – high quality program performance
Jhpiego Country Experience

PAST PROGRAMS
- Guyana
- Zimbabwe
- Malawi
- Ghana
- Thailand
- Philippines
- Rwanda
- South Africa

INITIATIVES
- Caribbean
- Ethiopia
- Nepal

CURRENT PROGRAMS
- Tanzania
- Burkina Faso
- Cote d’Ivoire
- Mozambique
- Indonesia
- Kenya
Next Presentations

Competency-based training
- Dr. Ricky Lu

Supportive Supervision
- Dr. Tsigue Pleah