Volunteers: Improving the Patient Visit

The ACT PRIME Study
Infectious Disease Research Collaboration, Uganda.
ACT Consortium, London School of Hygiene & Tropical Medicine, UK.
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TRAINER BRIEF FOR PCS 05

From October 2009 until February 2010, the Uganda Malaria Surveillance Project / Infectious Disease Research Collaboration conducted research activities in Tororo District. We surveyed households, health workers and community medicine distributors, and talked to groups of community members and health workers to learn more about how health care is provided to sick children in this area, especially at health centres.

During the study, community members described having to wait long hours for treatment at the health centre, and cited lateness of the health worker or lack of prioritisation of the health worker to attend to patients as reasons for long waiting times. This delay in treatment frustrates community members and discourages them from attending health centres.

In addition, health care workers themselves told us that, to them, good quality care means to show courtesy to patients on arrival at the health centre. Receiving the patients, greeting them, providing them with a seat and offering guidance to the different departments were felt to be important. Good welcome and orientation were felt to be essential to ensure that patients felt well cared for, and willing to return to the health centre on subsequent illness episodes.

We also learned that volunteers make up almost one quarter of the staff at health centres and therefore play a very important role in improving the overall satisfaction of patients visiting the health centre. In this module, we explore ways for volunteers to work with health workers and other staff at the health centre to improve the welcoming, greeting and orientation of patients.

The key learning outcomes for PCS 05 are as follows:

<table>
<thead>
<tr>
<th>Topic</th>
<th>Learning Outcomes</th>
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<tbody>
<tr>
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<td></td>
<td>• Implement strategies to ensure patients can navigate the health centre.</td>
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# TRAINING AGENDA

PCS 05 will last 3 hours from start to finish.

**Note to Trainer:**
- Trainers, please use the table below to complete the start and end times for each training section using the ‘Time Allocated’ as a guide.
- Keep this agenda visible and as a guide to help you keep track of time.

Today’s training will start at ____:____ Today’s training will end by ____:____

<table>
<thead>
<tr>
<th>Topics</th>
<th>Time Allocated</th>
<th>Start time</th>
<th>End time</th>
<th>Total time</th>
<th>Materials</th>
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<tbody>
<tr>
<td><strong>Introduction to the module</strong></td>
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<tr>
<td>- Greetings</td>
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<td>- Training rationale &amp;</td>
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<td>Learning outcomes</td>
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<td>Flip chart Tape</td>
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<tr>
<td><strong>TOPIC 1: Patient Centred Services</strong></td>
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<td>- Introduction to the topic</td>
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<td>- Thinking about the topic</td>
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<tr>
<td><strong>TOPIC 2: Welcoming &amp; Greeting</strong></td>
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<td>- Introduction to the topic</td>
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<td>- Thinking about the topic</td>
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<td>- Principles</td>
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<td>- Practice</td>
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<td>- Discussion</td>
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<td>Break</td>
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<td><strong>TOPIC 3: Patient Navigation</strong></td>
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<td>- Introduction to the topic</td>
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<td>- Practice</td>
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<td>- Planning</td>
<td>15 minutes</td>
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<tr>
<td>- Conclusion</td>
<td>5 minutes</td>
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<tr>
<td>Conclusion</td>
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<td>TOTAL</td>
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<td>180 minutes</td>
<td>3 hours</td>
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**Flip chart, Markers, Tape, Role Plays**
INTRODUCTION TO THE MODULE

Time allocated: 15 minutes

Purpose: To welcome and orient the participants to the training and help them to understand what they can expect of the training and what will be expected of them as participants.

Learning Outcomes: By the end of this session, participants will:

1) Know the names of co-participants.
2) Know the name of the training leader.
3) Review a set of ground rules for the training.
4) Know the learning outcomes and purpose of the module.

Materials required:

- Flip chart
- Markers
- Tape

Training methods used:

- Group discussion
- Games

Page 7
Introduction to the Module

Preparation

To be completed before participants arrive:

1) Hang up a flip chart and arrange your manual and supplies.

2) Write on the flip chart: the name of the module, your name & the organisation you work with.

3) Ensure the room is swept & clean.

4) Ensure all the chairs are in a friendly well spaced and there are enough chairs for all the participants you are expecting.

5) Set the time you will start the training and complete the ‘start’ and ‘end’ times on the Training Agenda for each training section. Write the start and end times on the flip chart.

6) Invite two of the participants who arrive early to help with preparation for the first role play (page 18 in your manual and page 13 in the learner manual). Explain the purpose of the role play: that we want to demonstrate what happens when a mother comes for help with her sick child but is not welcomed nicely into the health centre because the volunteer is rude and dismissive. Read the scenario with the participants and have a practice run of the role play outside of the training room. Then, let the volunteers take a seat with the others and let them know you will call on them soon to demonstrate the role play to the group.

Room Set Up
Introduction to the Module

1. Greetings

5 minutes

Training Steps

Step 1: GREET:

With a friendly smile welcome all participants as they arrive. Give each person a name tag, learner manual and any supplies and ask them to take a seat anywhere they like.

Note to Trainer:
- Once all of the participants have arrived, or it is the scheduled time to start the training, begin with introductions as described below.

Step 2: EXPLAIN:

My name is _________________ and I work with the Uganda Malaria Surveillance Project/Infectious Diseases Research Collaboration (IDRC).

I am going to be leading you today and for several other training modules. Thank you all for coming on time, this makes me feel you value this training, and motivates me to give you the best training.

Note to Trainer:
- Share one thing that you like the most about your professional work – this will illustrate what you are about to ask them to do as an introductory activity.

Step 3: ASK:

Please turn to the person on your right and ask for:

Each others’ name; the name that each of you prefers to be called during this training; your current positions and health centre in which you work; and one unique or interesting thing about each of you in your professional lives, which you would like your fellow participants in the course to know.

Note to Trainer:
- Place yourself beside the ‘last’ person at the end of the circle, so that this person has someone to talk to when he/she turns to the right.
- Share one thing that you like the most about your professional work – this will illustrate what you are about to ask them to do as an introductory activity.
Introduction to the Module

Step 4: ASK:

*Please introduce your partner to the bigger group.*

**Note to Trainer:**
- Take a few minutes to allow everyone to be introduced, briefly.

Step 5: Explain:

*There are some housekeeping items to review before we begin the training:*

- The restrooms/toilets are located ............
- The break is scheduled for ____:____ and will last 30 minutes.
- You are responsible for yourselves and should take a restroom break early if you need one – there is no need to ask permission.

Step 6: ASK:

*What rules shall we follow as a group during this training?*

**Note to Trainer:**
- Ask the group to offer rules that they would like others to respect during the training workshops that will help them to learn the most.
- Write the ground rules up on a flip chart to be placed on the wall for all future sessions with that group.

- Be on time
- Turn off your mobile phones
- Use constructive feedback

- Ask participants to write the ground rules in their Learner Manual on page 7.
Step 7: Explain:

We have created a Learner Manual for you to use today and to take home with you. I will help you follow along in your Learner Manual throughout today’s training. There will be times we will write in our Learner Manual to help us remember what we have learned today. I will let you know when to do this, but please also feel free to take your own notes.
Introduction to the Module

2. Training rationale and learning outcomes

10 minutes

Training Steps

Step 1: INTRODUCE THE MODULE:

**Note to Trainer:**
- Use points from the Trainer Brief on page 2 to introduce the module and explain the rationale and purpose of this module. Similar information in the Trainer Brief is also included in the Learner Manual on page 4 for participants to review.

Step 2: EXPLAIN:

The learning outcomes for the module can be found in your Learner Manuals on page 8 and are as follows:

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Step 3: ASK:

Does anyone have any questions?

Note to Trainer:
- Receive any questions and answer them if you have time, otherwise write them on your parking lot flip chart and address them at the end.
- Explain the purpose of the parking lot flip chart.
1. Introduction to the topic

5 minutes

Training Steps

Step 1: EXPLAIN:

Today we would like to introduce you to a new term, ‘patient centred services’. We have held some training sessions with health workers from your health centres and we also taught them about this new term ‘patient centred services’.

Step 2: ASK:

Does anyone have any questions?

Note to Trainer:

- Receive any answers from the group.
- Then summarize as below.
Step 3: EXPLAIN:

Patient Centred Services or PCS is a way of providing care that has the patient at the centre of everything that we plan and do at our health centres. Patient Centred Services involves many things, including being a good communicator, being compassionate, and being comforting, and being responsive. It is a way of carrying out your work while keeping in mind what the patient wants and feels.

2. Thinking about the topic

10 minutes

Training Steps

Step 1: ASK:

What is it like to be a patient or caregiver? Most of us have been patients ourselves, or have accompanied a patient to a health centre.

Let’s think about a recent time when we went to the health centre.

Step 2: EXPLAIN:

Participants will interview their partner about a recent experience at a health centre, using the activity questions in Box 2 on page 10 of your manuals.

Step 3

ACTIVITY A – Interviewing each other

Activity Steps

1) ASK participant to get in pairs and ask participants to interview each other using the following questions on page 10 of their manuals:

- What happened the last time you went to the doctor?
- How did you feel when you arrived?
- How did you feel when you were waiting to see the doctor?
- Were different people treated differently when they arrived or while they were waiting?
- What do you wish the people who worked at the health centre did differently to make your visit better?

2) ENCOURAGE participants to listen actively to their partner. At the end of the exercise, they can write down what they learned in their manuals.
3) **ALLOW** 3 minutes per person, and then ask them to switch over.

4) **ASK** 2-3 participants to share their partner’s experience. Consider probing the stories with these additional questions, which are also in the learner manuals on page 10:
   - How do you think this experience made your partner or the patient feel? (Stressed? Scared? Sad? Confused?)
   - Do you think your partners’ experience was different compared with the experiences of other people who visit the health centre because you partner knows how the health centre works (because he/she is a volunteer)?
   - What do you think it is like for people who are not familiar with the health centre?

**Step 4: EXPLAIN:**

*Patient centred services means providing total health care. Total health care involves more than just giving medicine for a patients’ symptom.*

- Health care is often seen as simply giving a patient medicine for specific symptoms.
- But, we all know that a lot more happens in the experiences of patients and health workers at health centres, and more goes into patients’ decisions to come to the health centre, and the health centre staffs’ decisions of how to treat people.
- Today, we want to understand that patients do not only come to the health centre to get medicine. We want to look at what health centres offer to patients more widely and what we as volunteers can contribute to improve the patient experience.
- We will talk about three areas that contribute to the patient experiences and healing process. We will discuss three points relevant to this wider experience:
  1) Welcoming and greeting patients by building rapport.
  2) Navigating patients through the health centre and their patient experience.
  3) Understanding how volunteers contribute to providing patient centred services.
Patient Centred Services is a way of providing care that has the patient at the centre of everything at a health centre.

Patient Centred Services involves many things, including being a good communicator, being compassionate, and being comforting, and being responsive.

Patient Centred Services is a way of carrying out your work while keeping in mind what the patient wants and feels.

Reflecting on a personal experience of being a patient helps one to empathise with a patient and ‘get into their shoes.’
**TOPIC 2: WELCOMING AND GREETING**

Time allocated: 60 minutes

**Purpose:** To reinforce the concept of patient centred services.

**Learning Outcomes:** By the end of this session, participants will:

1. Recognise that we all have different perspectives, including volunteers and patients.
2. Implement strategies to improve the welcome of patients at health centres by establishing rapport.

**Materials required:**
- Flip chart
- Markers
- Tape

**Training methods used:**
- Lecture
- Group Discussion
- Role Play

---

### 1. Introduction to the topic

5 minutes

**Training Steps**

**Step 1: EXPLAIN:**

- As volunteers we have to communicate with patients and their caregivers every day, but we may not be communicating as well as we can in order to make our interactions with our patients useful and productive.

- Today, we will learn how to receive patients and their caregivers when they first enter the health centre. We call this ‘building rapport’. This skill can improve our interactions with patients and improve how we feel about the work we do.

- Let’s start with a role play to get us thinking about building rapport, which means building a good relationship with our patient and how we listen to our patients.
2. Thinking about the topic

15 minutes

Training Steps

Step 1

ACTIVITY B – Role play with trainer

Activity Steps

Preparation

1) **PREPARE** for this role play at the start of the workshop while participants are still arriving.

2) **INVITE** 2 participants to play the roles: One as the patient (a small child) and one as a caregiver (mother). The participants will have the scenario written in their Learner Manual.

3) **GIVE** participants a couple of minutes to read it on page 13 and to ask you any questions quietly.

- **Trainer scenario:** You are a rude volunteer who ignores the patient (caregiver and child). You do not greet or welcome them. You simply grunt. You do not look them in the eye. You point to the bench where they should sit without speaking or giving any information on how long they might have to wait to see the doctor. You roll your eyes and walk away when the mother tries to ask you a question.

- **Participant scenarios**

  **Mother:** You are a young mother with your first child. The child is very sick and you are very concerned. You have come to the health centre because you believe they will give you the best medicine. You want to see the health worker right away and you try to ask the volunteer how long you will have to wait to see the health worker.

  **Child:** You are very small, about 2 years old. You cannot talk and you feel very dizzy. You are afraid and so are staying close to your mother.

4) **ALLOW** 2 minutes for the role play. You can cut it short once you have finished demonstrating the dismissive volunteer.

Step 2: **ASK:**

*Those of you who played the mother and child:* How did that interaction make you feel? You can follow along on page 14.
Step 3: ASK:

For the rest of you

- What did the volunteer do to make the patient and caregiver feel this way?
- What are the consequences on the mother:
  - On her attitude/behaviour when she will get in to see the health worker?
  - On her ability to understand and remember advice she will be given?
  - On her willingness to come back to the clinic?

Note to Trainer:

- Ask each question one at a time and give participants time to answer each question. Write answers in the form of ‘key words’ on the flip chart.
- Encourage participants to write notes in their Learner Manual on page 14 as you are writing on the flip chart.

What happens when there is no rapport?

Step 4: ASK:

What is the result you would want for this mother and child after arriving at the health centre or speaking with a volunteer?

Note to Trainer:

- Allow participants to call out responses and refer them to page 15 in their manuals.
- For example: ‘to know when she will see the health worker, to feel welcomed, to feel like she will be taken care of at the health centre, to feel like she will get the best care.’
Topic 2: Welcoming and Greeting

3. Principles

15 minutes

Training Steps

Step 1: EXPLAIN:

What usually makes you feel welcome when you arrive somewhere, like someone’s home, a shop, or where you go to pray?

Note to Trainer:

- **ASK** for responses from the group and write them on the flip chart and refer participants to page 15 in their manuals.

For example:

I feel welcomed when someone...

- Is approachable
- Smiles at me
- Makes eye contact
- Greets me
- Says hello, you are welcome
- Uses language I can understand
- Invites me to sit down
- Makes sure I am comfortable

Step 2: EXPLAIN:

- These very same things can apply at the health centre and can help us to establish rapport with the patient and caregiver right when they enter the health centre.

- When a patient and caregiver arrive at the health centre we greet them with a smile and say, ‘hello’. We can direct them to sit on a bench to wait for the health worker. We can tell them how long the wait for the health worker will be, if we know.
Step 3: ASK:

*What else can we do?*

Note to Trainer:
- Record the answers on a flip chart.
- Refer participants to page 16 in their manuals.

Step 4: EXPLAIN:

*Giving constructive feedback*

- We are going to practice these skills with each other. But before we begin, let's think about how we can help each other learn how to improve our skills. We can help each other by proving ‘constructive feedback’.

- Constructive feedback means helping someone to find a way to do what they are doing better. The suggestion you give to your partner should not just be negative, like ‘you didn’t give any eye contact’, but giving an idea for improvement, like ‘you might come across better if you made more eye contact.’
4. Practice

10 minutes

Training Steps

Step 1: EXPLAIN:

*You will be practicing building rapport with the person sitting next to you.*

Step 2

ACTIVITY C – Building Rapport Role Play

Activity Steps

Preparation

1) **ASSIGN ROLES** to participants by appointing each person to ‘number 1’ or ‘number 2’ by going around the circle of the group. They can follow along on page 16.

2) Participants should remain in their seats for the practice.

3) **EXPLAIN** to participants:
   - All ‘number 1s’ are sick patients that have come to see the health worker very late in their illness and they are scared of being in trouble with the health worker.
   - All ‘number 2s’ are health workers and are practicing their rapport building skills.
   - When the trainer says ‘START’ the health workers have less than one minute to build rapport, then the trainer will call out ‘STOP’.

Role Play

**Now you are ready to start the activity**

4) Call **START**. Time one minute. Call **STOP**.

5) **ASK** participants to give their partner 3 pieces of constructive feedback remembering to give an idea for improvement by changing ‘negatives’ into ‘ways to improve’.

6) **ASK** participants to take notes in their manuals on page 16.

7) **ASK** participants to switch roles so that ‘number 1s’ play the role of health workers and ‘number 2s’ play the role of scared, sick patients.

8) Call **START**, Time one minute. Call **STOP**.

9) **ASK** participants to give their partner 3 pieces of constructive feedback remembering to give an idea for improvement by changing ‘negatives’ into ‘ways to improve’.
5. Discussion

10 minutes

Training Steps

Step 1 ASK:

What are the benefits to us as volunteers if we are able to establish good rapport and have a good quality interaction?

Note to Trainer:

- Write the responses on the flip chart. Refer participants to page 17 in their manuals.
- For example:

  - Makes me feel better
  - I give a better service
  - My day is more enjoyable
  - I get a good reputation
  - It makes others around me happy

Step 2: ASK:

Research has shown how long it takes to build rapport! How long do you think it takes?
Step 3

ACTIVITY D – Energiser

Activity Steps

1) **GIVE** everyone a piece of paper
2) **ASK** everyone to write a number of seconds or minutes that they think it takes to build rapport with a patient.
3) **CHOOSE** the person to your right to start.
4) **ASK** everyone to jump up and shout the number they have written on their paper and to remain standing and hold the paper up so that all can see the number!
5) **IDENTIFY** the participant with the number, closest to 40 seconds a ask everyone to jump 40 times as an energizer!
6) **ASK** everyone to return to their seats.

Step 4: EXPLAIN:

- Did you know that research has shown that on average it only takes about 40 seconds to build rapport effectively?
- It is important to remember though; it takes time to learn to establish rapport, so at first it may take longer. With experience, you will be able to do this quickly, and get better results for the patient and for you.

Step 5: ASK:

What did you learn in that practice that you will be able to do when your health centre is very busy?
Step 6: EXPLAIN:

Now that we know why and how to receive a patient and build rapport, we will think about how we can help patients understand what to do at the health centre once they arrive and we have greeted them.
Topic 2: Welcoming and Greeting

Summary Box – Welcoming & Greeting
For reference for trainers and learners

- Receiving patients and their caregivers when they first enter the health centre is called ‘building rapport’.
- This skill can improve volunteers interactions with patients and improve how volunteers feel about the work they do.
- When a patient and caregiver arrive at the health centre they must be greeted with a smile and a ‘hello’. They can be directed to sit on a bench to wait for the health worker. They can be told how long the wait for the health worker will be, if the volunteer knows.
- Volunteers can help each other by providing ‘constructive feedback’. Constructive feedback means helping the other volunteer to find a way to do what they are doing better.
- What are the benefits to volunteers if they are able to establish good rapport and have a good quality interaction?
  - Makes one feel better
  - The volunteer gives better services
  - The day is more enjoyable
  - The volunteer gets a good reputation
  - Others around the volunteer are happy
- It only takes about 40 seconds to build rapport effectively.
TOPIC 3: PATIENT NAVIGATION

Time allocated: 80 minutes

Purpose: To introduce the concept of patient navigation and ways to enhance it.

Learning Outcomes: By the end of this session, participants will:

1) Put themselves into the shoes of a patient approaching a health centre as an organisation with unspoken ‘rules’.
2) Implement strategies to improve the orientation of patients at health centres.
3) Implement strategies to ensure patients can navigate the health centre.

Materials required:
- Flip chart
- Markers
- Tape
- Role play scenarios

Training methods used:
- Game
- Lecture
- Group Discussion
- Role Play

Page 19
1. Introduction to the topic

5 minutes

Training Steps

Step 1

ACTIVITY B – Maze

Activity Steps

1) **INSRUCT** participants to complete the puzzle in their learner manual as quickly as they can. The first to connect the patients to the health worker should shout:

‘I FOUND THE HEALTH WORKER’.

2) **ASK** the participants to work on this quietly, and to help each other if they choose to.

3) **WAIT** until 2 more participants have finished and then ask everyone to STOP.
Topic 3: Patient Navigation

Step 2: EXPLAIN:

The WINNERS are these three – they are lucky, they can see the health worker. The others cannot, and have to go somewhere else.

Step 3: ASK:

The rest of you – how did you feel when you couldn’t complete the maze? I could see you were frustrated. You would go down the wrong route with this sick child, and the other children, and not find the health worker.

Note to Trainer:
- Receive the responses from the participants. Refer them to page 21 in their manuals.

Step 4: ASK:

- There are blocks in this maze that prevent the mother, who does not know her way around, from getting to the health worker.
- What are the reasons why patients, like this mother, fail to get to the health worker in your health centres?

Note to Trainer:
- Receive the answers from the participants.
- Possible responses:

  - no book, afraid to ask questions, no one to ask, no money for lab, language barrier, fear of injections, fear of rude health workers, can’t walk – old, not clean – poor, can’t talk well, long queue, etc.
2. Thinking about the topic

10 minutes

Training Steps

Step 1: ASK:

Think of a time when you went to a bank for the first time, did you know what to do? What did you see when you went to the bank?

Note to Trainer:

• Ask the participants to shout out answers, e.g. a long line of people.
• Write the answers on a flip chart and refer participants to page 21.
• For example:

What I saw at the bank

• Long line of people
• Some signs in another language
• Too many people – but the place is quiet
Step 2: ASK:

How did you feel?

Note to Trainer:
- Ask the participants to shout out answers. Refer them to page 22 in their manuals.
- Write the answers on a flip chart.
- For example:

  **How I felt at the bank**
  - Intimidated
  - Confused
  - Frustrated
  - Cared for—when someone gave me advice on what to do

Step 3: ASK:

How did being unfamiliar and uncomfortable with the bank affect your ability to get everything done that you wanted?

Note to Trainer:
- Ask the participants to shout out answers.
- Write the answers on a flip chart.
- For example:

  **Result of feeling unfamiliar at the bank**
  - Took longer
  - Made mistakes
  - Gave up doing some thing that I had planned to do

- Encourage participants to write their responses in their learner manuals on page 22.
3. Principles

20 minutes

Training Steps

Step 1: EXPLAIN:

Patients at the health centre can be scared too.

Patients who are unfamiliar with coming to health centres also experience these same feelings and fears that you did the first time you went to the bank.

Organisations have unspoken rules.

- A bank and a health facility are both organisations that have their own ‘rules’ or ‘systems’. Some are spoken, others we learn even though they are not said out loud.
- As an example, is it possible to dance in a bank?

Step 2: ASK:

What do we think patients and caregivers should do while waiting to see a health worker? For example, how should they behave, what things do they need to know, what things do they need to do, etc.

Note to Trainer:

- Write the answers on a flip chart. Refer participants to page 23.
- For example:

Unspoken rules at our health centres

**Helpful rules:**

Know that you need to:
- inform someone you have arrived
- wait until your turn
- bring your own food and drink
- get a book before seeing the HW

**Unhelpful rules:**

Believe that you need to:
- have to look smart to be seen first
- have to look smart to be seen by a HW
- have to know English
- do not ask questions
- do not ask how long you will be waiting
- do not complain if someone who arrived after you is seen before you
Topic 3: Patient Navigation

Step 3: EXPLAIN:

We expect patients and caregivers to know these rules and to know ‘how to act’ when they are at the health centre, but we forget that going to the health centre can be scary and confusing for many of our patients and caregivers.

Step 4: ASK:

What is the impact on the patient and caregivers’ experience at the health centre if they do not know these rules or are afraid to do something because they are following the ‘unhelpful’ rules?

Step 5: EXPLAIN:

Volunteers play an important role in helping patients and caregivers to navigate the health centre so that they have a good experience and want to return.

Let’s discuss how we can make the ‘helpful’ rules clearer to patients and caregivers and prevent patients and caregivers from having to follow the ‘unhelpful’ rules.

Note to Trainer:
- ASK for responses from participants and write key words on the flip chart.
- Refer participants to page 24.
- For example:
  - They will not get seen
  - They will not get seen quickly
  - They will get lost
  - They will not know that they had to bring food
  - They will not want to come back
Step 6: ASK:

What can you do to help your patients navigate the health centre?

Note to Trainer:

- Give participants 2 minutes to discuss their ideas with their group, and to write these into their Learner Manual on page 23.
- We need to be practical - these need to be ideas that we really can put into practice!
- Go around the group and join in where participants are struggling.
- Ideas might be to encourage volunteers to welcome patients, and to be more conscious of having a patient-friendly attitude by remembering to get into the shoes of the patient.

Step 7: ASK:

Please give me feedback from your group discussion.

Note to Trainer:

- Ask the groups to feedback to everyone.
- Write responses on a flip chart.
- Try to discuss most of the following:

### Ideas to help patients navigate the health centre

#### Helpful rules:
- Volunteers should welcome all patients
- Direct patients to different areas of the health centre such as registration, consultation room, dispensing room
- Volunteers should talk with the health workers and help them to prioritise patients and explain to others how long they will wait and why
- Put up a ‘welcome’ sign
- Be friendly
- Hand out numbers to patients as they arrive so they know what order they will be seen
- Put up signs for rooms with pictures, like an injection for the injection room
- Ask patients if they know where to go after their visit with the health worker
4. Practice

20 minutes

Training Steps

Step 1

**ACTIVITY C – Welcome Role Play**

**Activity Steps**

**1) Preparation**

- This role play has three parts which you will guide the participants through separately: Greeting, Waiting, Navigation.
- Ensure that you have sufficient room to set up a waiting area with a bench and consultation area with 2 chairs.
- Have the list of roles cut out from Annex A and prepared to give to the participants.
- Make the right number of slips for the number of participants in the group.
- There are seven roles; if there are more than seven participants, ask them to be observers. Ensure that the first five roles at the least are given out.
- Have the ‘Volunteer’ ID badge ready for the volunteer role.
- The trainer plays the part of the health worker.

**2) ROLES – ensure those in Annex A are cut and ready to give out.**

1. You are a volunteer. You are greeting patients as they arrive.
2. You are a volunteer. You are helping patients understand the wait time and navigate the health centre.
3. You are a patient just arriving at the health centre. Your child has a mild rash.
4. You are a patient just arriving at the health centre with a child who is convulsing.
5. You are a patient sitting in the queue. You are vomiting.
6. You are a patient sitting in the queue. You have come to collect more medicine. (Have several copies of this participant scenario for all remaining participants).
7. You are a patient who has just seen the health worker who needs to now collect medicine.
3) **INVITE** the whole group to take part in a role play and to follow along on page 26 & 27.

4) **EXPLAIN**
   - The role play will take place in the waiting area of a health centre
   - The participants who are the patients must get themselves into the roles of patients, and those acting as the volunteers must do their best to put into practice the skills learned about welcoming and guiding patients.
   - We will set up the role play and then act it out several parts starting when I say ‘ACTION!’ and stopping when I say ‘CUT!’

5) **SET OUT the role play:**
   - Give each trainee a slip of paper from Annex A to show their role in the play.
   - Ask the participants to read in their manuals on page 26 the description of the scenario relevant to their role.
   - Allow 2 minutes for reading.
   - Ask those who are ‘waiting patients’ (roles #5-6) to put out a bench or row of chairs against a wall. Ask them to take a seat there.
   - Ask the ‘volunteers’ (roles #1: 2) and the ‘patient who has just seen the health worker’ (role #7) to wait with you, the health worker, for now.
   - Ask the ‘arriving patients’ (roles #3-4) to wait to the other side.

6) **CONFIRM** that participants know their scenarios (see scenario box below):
   - Speak quietly to each group of participants- the health worker and volunteer, and then the patients, to make sure they understand the scenario and what they will need to do.
   - Make sure that the patients with convulsions and vomiting are at the rear of the queue.

7) **GUIDE** the first part of the role play:
   - Explain that we will start with the ‘arriving patients’ coming to the waiting area, when the volunteer (role #1) will greet them.
   - When the participants are ready, say ‘ACTION’.
   - When the patients have arrived and been greeted, and are sitting in the queue, say ‘CUT’.
   - Ask the group to give a round of applause to the actors.

8) **GUIDE** the second part of the role play:
   - The ‘health worker’ (trainer) will come out and do a triage assessment.
   - The volunteer (role #2) helps direct the patient
   - When the participants are ready, say ‘ACTION’.
When the patient has been directed where to go after the consultation, say ‘CUT’

Ask the group to give a round of applause to the actors.

**ROLE PLAY SCENARIOS**

**Role 1: Volunteer role – Greeting**

- Come out to the waiting area and greet the new patient as they arrive.
- Show a good welcome and ask them to take a seat at the end of the line.
- Explain how long they will have to wait or take action for serious cases if needed.

**Role 2: Volunteer role – Waiting & Navigation**

- Come out to the waiting area and help the health worker explain the wait time and order of patients to the patients waiting in the queue.
- Explain that ‘we have a commitment that we will not allow any person to come to the front of the queue unless they are the most sick person’.
- Direct the patient who has just finished his/her consultation with the health worker.

**Roles 3, 4: Arriving patient role**

- As you arrive, you are shy and afraid.
- If the volunteer is friendly, you can ask some questions about what to expect in terms of the waiting time and whether drugs are there.

**Roles 5, 6: Waiting patient role**

- Think about the symptom you have, and how you are feeling.
- When the health worker comes down the line, you can tell them this as your main complaint.
- Think about how you feel about where you are sitting in the queue and how long you have been waiting.

**Role 7: Patient who has just seen the health worker**

- Think about how you feel after seeing the health worker.
- When you leave the consultation with the health worker, you need to collect medicine but you are confused about where to go.

**Health worker role (Trainer)**

- The health worker should move down the line looking for the most serious patients.
- The health worker should ask the volunteer to help her move these patients to the front and explain to the other patients about why they are queuing and why these patients are at the front.
- Then health worker will send out the patient after a consultation who needs to collect drugs from the dispensary.
Note to Trainer:
- Use the following probes to ask the different actors and refer them to page 27-28 in their manuals:
  - How did you feel about being the arriving patient? What did the volunteer do well to make you feel welcome? What could be improved?
  - How did you feel as the volunteer? Is what you did possible to do at your health centre?
  - How did you all feel as the patients waiting in the queue? What made you feel good, and what made you feel uncertain?
  - How did you feel about being the patient who had just seen the health worker? Why?
  - What do you all think the volunteer could have done better to make you more welcome and help you navigate the health centre?

Step 3: EXPLAIN:
If the patient feels good after you have done well to greet them and help them navigate the health centre, this will provide motivation to you, the volunteer to continue providing these services.

Note to Trainer:
- Encourage participants to write notes in their Learner Manuals about what they and others did well that they want to do themselves in practice on page 28.

5. Planning
20 minutes

Training Steps

Step 1: EXPLAIN:
We have discussed and learned that volunteers play a very important role in welcoming patients and care givers to the health centre and helping them to find their way around the health centre. But how will patients and caregivers know who you are and if they can ask you for help?
Step 2: ASK:

When you are in an unfamiliar place, how do you know who to ask for help?

Note to Trainer:

- Encourage participants to write notes in their learner manuals on page 29.
- Write responses on the flip chart.
- For example:

  - Person wearing a uniform
  - Person wearing a name badge
  - Person behind the desk
  - Person who looks important

Step 3: ASK:

Which one of these examples do you think you can do back at your health centre and how would you implement it?

Note to Trainer:

- Guide participants through a short discussion of what is possible.
  For example:
  - There is no money for uniforms, but there could be ID badges with the word ‘Volunteer’ written in the local language. There could be 2 of these which are left at the health centre so that there is always one available for the volunteers on duty.
Step 4: ASK:

Thinking about what we have learned today, which specific things can you use in your health centre to improve patient welcome and navigation so that the services are fair to all patients?

Note to Trainer:

- Ask volunteers to work in groups from the same or neighbouring health facilities to discuss the following, and write in their manuals on pages 29-30 under the following headings.
  1. My plans for improving the welcome and orientation of patients at my health centre:
  2. What I will need to do and plan in order to achieve these goals:
  3. How and when I will know if my plans are working:
- If necessary, contribute some ideas for planning:
  - You may need an artist, or to look for pictures
  - You may need to tell the in-charge about your idea
  - You may need to draw a plan of your facility
- Ideas for how and when to know if your plans are working:
  - You may want to do a review of patient views now, and again after 2 weeks/month. What questions might you ask?

Step 5: EXPLAIN:

The health workers at your health centre have also completed this exercise. When you go back to your health centre, you should talk to them about your plan to see if you have similar ideas and then see how you can put everything into practice.
Patients at the health centre are scared too.

Patients who are unfamiliar with coming to health centres also experience these same feelings and fears that anyone, including a volunteer may feel the first time she or he went to the bank.

If the patient feels good after a volunteer has done well, this will provide motivation to the volunteer.

Make the ‘helpful’ rules clearer to patients and caregivers and prevent patients and caregivers from having to follow the ‘unhelpful’ rules.

When volunteers go back to their health centre, they should compare proposed plans with the health workers and then see how it can be put into practice.

Reminders

- Put yourself into the shoes of a patient approaching a health centre.
- Realise that organisations like health centres have unspoken ‘rules.’
- Identify what these ‘rules’ are for patients when they arrive at the health centre.
- Identify and reflect on what it is you can do as a volunteer to enforce helpful rules and prevent unhelpful rules, and make plans to change your behaviour.
- Carry out plans to improve the welcome and orientation of patients at health centres.
- Carry out plans to ensure patients can navigate the health centre.
CONCLUSION

Total Time: 5 minutes

Purpose: To conclude the PCS 05 module and answer questions.

Materials required:
- Flip Chart
- Markers
- Tape

Training Methods used:
- Trainer led discussion

Training Steps

Step 1: EXPLAIN:
This is now the end of the session and an opportunity for you to ask any questions and for me to answer any questions in the parking lot.

Step 2: ASK:
Let's look back at our learning outcomes in our Learner Manual on page 8. Does anyone have any comments or questions about what we have covered today? Please comment on what you think helped you learn well, and which points may still be unclear.

Note to Trainer:
- Make a note of any suggestions or queries in your manual and follow up on these where possible.
- Address any new questions.
- Answer any questions still waiting in the parking lot.
Step 5: EXPLAIN:

Thank you for participating today!

Sharing your experience and insight has been very helpful and informative. Please use the Learner’s Manual regularly to review what you have learned. Discuss any challenges with your colleagues; they will be most helpful for finding solutions to problems and challenges at your health centre. Goodbye.
Annex

Annex - Activity E

39
ANNEX A - Role Play Scenarios

1. You are a volunteer. You are greeting patients as they arrive.

2. You are a volunteer. You are helping patients understand the wait time and navigate the health centre.

3. You are a patient just arriving at the health centre. Your child has a mild rash.

4. You are a patient just arriving at the health centre with a child who is convulsing.

5. You are a patient sitting in the queue. You are vomiting.

6. You are a patient sitting in the queue. You have come to collect more medicine. (have several copies of this participant scenario for all remaining participants)

7. You are a patient who has just seen the health worker who needs to now collect medicine.
## ANNEX A - Role Play Scenarios: Extra # 6

6) You are a patient sitting in the queue. You have come to collect more medicine. *(have several copies of this participant scenario for all remaining participants)*