Clinical Mentoring

Clinical mentoring is a critical component of training for health care workers (HCW), including facility and community-based clinicians and non-clinicians. Mentoring provides a bridge between didactic, classroom-based training and applied clinical practice. It enables HCW to practice and adopt new skills in clinical settings with the support and guidance of more specialized and experienced clinicians or other health care practitioners. Intensive, practical training to effectively transfer critical skills remains a cornerstone of the global HIV/AIDS response as governments adopt and rapidly scale up new and evolving standards, guidelines and practices to reach the UNAIDS 95-95-95 targets and travel the “last mile” to epidemic control.

The I-TECH Approach

I-TECH defines clinical mentoring as a sustained, collaborative relationship in which a highly experienced clinician guides improvement in the quality of care delivered by both health care workers and health care systems. I-TECH’s clinical mentoring programs follow a two-pronged approach within a conceptual framework of health systems strengthening: 1) to enhance the skills of diverse cadres of health care providers (doctors, nurses, laboratorians, lay health providers), and health managers and leaders to address gaps in human resources for health; and 2) to build the skills of local clinicians and/or health care leaders to become mentors themselves in order to enhance sustainability and strengthen the health systems through which services are provided.

I-TECH includes five key components in its approach to mentoring:

1. Relationship building
2. Identifying areas for improvement and integrating quality improvement (QI) initiatives
3. Responsive coaching, via distance or in person, and modeling of best practices
4. Advocating for environments conducive to quality patient care and provider development
5. Data collection, data use, and reporting

I-TECH has designed and implemented novel clinical mentoring programs since 2008. They include both face-to-face and distance-based mentoring approaches intended to build and sustain the capacity of HCW for quality service delivery.

- Clinical mentoring frameworks have been adopted by, and transitioned to local ownership by Ministries of Health in Ethiopia, Haiti, Malawi, Mozambique, Namibia, and South Africa.
- Telementoring programs are underway in Jamaica, Mozambique, India, South Sudan, and Namibia.
- Multiple countries are using integrated quality improvement approaches involving mentoring to improve and monitor treatment outcomes and build capacity for systems-focused improvements to improve quality of care.
I-TECH Case Studies

Medical laboratories are also a critical component of quality health care and provide essential data for patient care and treatment and disease prevention and control. In Cambodia, I-TECH implemented a mentored laboratory quality stepwise implementation (LQSI) program to strengthen the quality and capacity of hospital laboratories through mentoring. All 12 target laboratories improved their operations in the areas of facilities and safety, organization, personnel, equipment maintenance, purchasing and inventory, testing process management, and communication. In the first 10 months of the program, labs established the foundational practices of a quality management system, including establishing a documentation system to track quality indicators.

In the Caribbean Region, clinical mentoring builds the capacity of clinicians to provide quality care to people living with HIV (PLHIV) and enables clinicians to more comfortably prescribe treatment in a variety of clinical settings. Mentoring occurs via on-site visits, warmline consultations, and telementoring. Mentoring activities focus on improving Test & Start service delivery, as well as supporting viral suppression through on-site docket reviews of non-suppressed patients. The telementoring program in the Caribbean is sponsored by the University of New Mexico’s Project ECHO. ECHO is an online knowledge-sharing platform that connects clinicians to a multi-disciplinary team of experts and broader communities of practice. ECHO provides regular access to clinical updates and an opportunity to present and receive consultation on challenging or unusual clinical care issues.

Over the past several years, clinical mentoring has gained relevance as an effective strategy to improve the quality of the HIV response in Mozambique. The Ministry of Health (MOH), with technical assistance from I-TECH, established an integrated clinical mentoring and QI program to identify PLHIV and link them to care. I-TECH Mozambique has trained 708 providers to become HIV clinical mentors since 2015. These mentors further strengthen their health systems by performing “mentoring of mentors,” observing mentors and their “mentees” during clinical examinations and performing patient chart review. In the past two years, I-TECH Mozambique has supported 132 clinicians in 34 high-volume health facilities, serving 150,000 clients in all 11 provinces of Mozambique and demonstrating improved linkage and retention rates.

Clinical and systems mentoring is critical to achieve all three 95s as governments roll out new policies and strategies to achieve epidemic control. These include high-yield testing strategies, differentiated service delivery models, multi-month scripting, and viral load/early infant diagnosis optimization. All require quick adoption and integration of new practices at the facility level, achieved through face-to-face and distance mentoring.

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