

**ICAP Collaborative PMTCT and Pediatric HIV Strategic Planning Workshop
In Partnership with Tygerberg Children's Hospital, South Africa and S2S**

Title:	Enhancing a district/provincial level team approach to optimize operationalization and uptake of family-centered services
Country:	Mozambique
Host Name:	Dorace Trottier, Mozambique Deputy Director
Session Goal:	To review effective models of district/provincial approach for strengthening Health Unit teams in implementing integrated family centered services.
Learning Objectives:	<ol style="list-style-type: none"> 1. To define what a district/provincial team approach is in each context 2. To identify and discuss the various components of a district/provincial team approach as a strategy to promote and foster linkages between quality PMTCT and pediatric care and treatment services 3. To discuss strengths and limitations of each different approach 4. To give recommendations for the implementation of an effective, sustainable and feasible district/provincial approach
Instructional Method(s):	<ul style="list-style-type: none"> • Brainstorming • Group work • Plenary discussion
Session Description :	<p>1-15 minutes:</p> <ul style="list-style-type: none"> • The host will present an overview of the experience of each participant in implementing and managing a district team approach (based on the questionnaire completed prior to the session). • Similar approaches will be grouped and differences will be noted. <p>16-50 minutes:</p> <p>The group will be divided into 2-3 sub groups. Each sub group will be assigned an approach to work on. Each sub group will identify 2-3 key strategies (and relative components) and implementation recommendations for their assigned approach.</p> <p>51-70 minutes:</p> <p>Plenary session: a point person for each group will summarize their discussion and present their strategies and implementation recommendations. The host will write the results on a flipchart.</p> <p>71-90 minutes:</p> <p>The group will select which approach is the most preferred, based on strengths/weaknesses, pros/cons, feasibility and which best represents the ICAP approach to ensure family-centered service.</p>
Pre-session Activities:	<p>Pre-assigned questionnaire about the participant's experience implementing and/or managing a district approach program.</p> <p>The host will provide the definition of district/provincial team approach before asking the following questions:</p> <ul style="list-style-type: none"> • Is there any example of this kind of approach to optimize operationalization and uptake of family-centered services in your Country? <ul style="list-style-type: none"> - If yes, give an example of <ul style="list-style-type: none"> ○ HOW it works? ○ WHO is involved? ○ Weakness and strengths of the approach

	<ul style="list-style-type: none"> ○ Steps in the implementation of the approach/strategy - If not, why is that? Do you think that would be possible to support the MOH in creating this approach? <ul style="list-style-type: none"> ○ If yes, could you give an example of <ul style="list-style-type: none"> ▪ HOW it works? ▪ WHO is involved? ▪ Weakness and strengths of the approach ▪ Steps in the implementation of the approach/strategy <p>The host will summarize the answers in a table, grouping strategies and noting the differences.</p>
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Session Notes and Summary

Session name: Enhancing a district/provincial approach for health unit teams

Note taker name: Stephen Arpadi

Major Discussion Points and/or Conclusions:

1. The discussion of the session revolved around advantages and disadvantages of 2 primary implementation approaches:

Regional approaches where ICAP is charged with supporting implementation in a geographically defined area (e.g. region, state, province etc) vs a facility based implementation approach.

Regional approaches: Advantages

Equity-regional planning can permit equitable distribution of available resources and services

Closing gaps in service availability in given geographic areas

Reductions in duplication of services /more rational placement of services and resource

Opportunity to streamline training and policies and practices throughout a region as there is the ability to work from central authority (rather than one facility at a time)

Facility based approach: Advantages

Permit more “customized” implementation appropriate for the specific strengths, weaknesses resources

Greater flexibility/creativity

Short term implementation could be more rapid

Short term implementation may be less expensive