

MODULE 14: Supervised Practicum



DURATION: 3–5 days



LEARNING OBJECTIVES:

By the end of this Module, participants will be able to:

- Practice skills learned during the training in a health facility offering HIV prevention, care and treatment services
- Demonstrate competency in the major skills taught during the training
- Identify skill areas where further on-the-job practice and mentoring are required



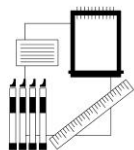
CONTENT:

Session 14.1: Practicum Preparation
Session 14.2: Supervised Practicum
Session 14.3: Practicum Debriefing



METHODOLOGIES:

- Interactive trainer presentation
- Large group discussion
- Supervised practicum
- Trainer/preceptor discussion
- Small group work



MATERIALS NEEDED:

- *Appendix 14A: Peer Educator Supervised Practicum Checklist* (one practicum checklist should be prepared for each participant)
- Peer Educator reporting and recording forms (enough for each participant)



WORK FOR THE TRAINER TO DO IN ADVANCE:

- Read through the entire Module and make sure you are familiar with the training methodologies and content.
- If the training is conducted at a health facility, explore ways to have short practical sessions throughout the training, followed by all-day practicum sessions when the classroom portions of the training are complete.
- If the training is not conducted at a health facility, select sites for the practicum – ideally busy hospitals and health centers offering PMTCT and HIV care and treatment services where Peer Educators will actually be working.
 - Meet with facility leadership and staff to discuss the Peer Educator program, the training and the supervised practicum. Ideally, members of the multidisciplinary teams from practicum sites will have been involved in the training.
 - If possible, orient some of the facility staff to be preceptors during the practicum and orient them on the key skills taught in training, the roles of Peer Educators at the site and the practicum checklist.
 - Get a sense of daily activities at the facility and how participants may be able to observe and practice applying the skills they have learned.
 - Plan when Peer Educators should come to the clinic (dates and times) with the clinical team. Ideally, the practicum should occur at times when there is heavy patient flow at the clinic to allow for maximum interaction between Peer Educators and clients.
- Depending on the role Peer Educators will play, you may also want to organize a community-based practicum, where participants practice conducting home follow-up visits or speaking with community groups. If there is a community-based component to the practicum, this will require careful planning and preparation. Be sure to explain the Peer Educator Program and training well to community members who are involved in the practicum. Get verbal consent from clients for home visits well in advance.
- Assign participants to preceptors. Depending on the number of participants and preceptors, it is best to split up the group so that preceptors have no more than 4-5 participants each during the practicum.
- Orient preceptors on methods of coaching, mentoring and giving feedback if they are new to this type of training. Ideally, preceptors would be pre-selected and able to participate in some/all of the classroom training.
- Work with preceptors and facility staff to decide how the practicum will be structured. Review the practicum checklist as a

group and decide how participants will practice the key skills. For example, if participants are to practice giving a group education session on adherence, this must be arranged in advance and clients must be present, a space for the talk identified, etc. Or, if participants are to practice conducting home follow-up visits, then this should be arranged with clients well in advance.

- Arrange for transport to and from the practicum site(s) and lunch for participants and preceptors.
 - Photocopy *Appendix 14A: Peer Educator Supervised Practicum Checklist*. Preceptors should have one checklist for each participant in their group (and a few extra copies just in case). Preceptors will fill in the checklist for each participant throughout the course of the supervised practicum.
 - Photocopy Peer Educator recording and reporting forms that the Peer Educator Program will use. Make sure there is at least one copy for each participant (and give extra copies to preceptors just in case).
 - If possible, it is best to bring all participants back together at a site for the practicum debrief and final session (*Module 15*) after the practicum.
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SESSION 14.1: Practicum Preparation (60 minutes)



TRAINER INSTRUCTIONS

Methodologies: Interactive Trainer Presentation, Large Group Discussion

Step 1: Review the Module learning objectives.

Step 2: Introduce the practicum to participants and tell them that this is the time they will get to take all of the information and skills they have learned and practice them at hospitals and health centers, with real clients, working as members of the multidisciplinary team.

Step 3: Introduce new preceptors who may be joining the group.

Step 4: Review the practicum logistics and assignment of participants to preceptors. Allow time for questions.

Step 5: Hand out a copy of *Appendix 14A: Peer Educator Supervised Practicum Checklist* and copies of the Peer Educator recording and reporting forms to each participant.

Go over the major activities that will be conducted during the practicum (supervised individual counseling sessions, supervised group education sessions, home visits, etc.) and the key skills Peer Educators will be asked to demonstrate, using the checklist as a guide. Try to make this participatory by asking different people to read the skills out loud to the large group.

Ask participants if there are skills or areas on the practicum checklist that they do not feel comfortable with or of which they need review. Take the time needed to review content areas and skills, repeating case studies or reviewing curriculum content as appropriate and as time allows. Alternatively, you may also schedule an optional review session before the practicum begins.

Step 6: Lead a discussion on practicum conduct, touching on the following points:

- We are guests at the health facility and must respect the wishes of the health care workers and managers there.
- Keep all discussions and observations during the practicum confidential. Only share with other participants, trainers or preceptors.
- Never wander off without the preceptor. Always inform the preceptor if you need to take a break or leave the facility for any reason during the practicum.
- Always introduce yourself to health care workers and clients. Tell them that you are a Peer Educator in training and explain a bit about the program if the person is interested.
- Always ask clients for their verbal consent to talk with you or participate in a group session. Remember: Any client can refuse to participate or stop participating at any time during the practicum.
- Always ask the preceptor if you have a question or a concern. Remember: This is a chance to learn!

- Step 7:** Discuss plans for the practicum follow-up, which will also be the last official day of the training. All trainers, preceptors and participants should attend.
- Step 8:** Close by reminding participants that the practicum is a great chance to apply all that they have learned in the training and to make improvements where needed so they can be the best Peer Educators possible.

KEY INFORMATION

See *Appendix 14A: Peer Educator Supervised Practicum Checklist*.

SESSION 14.2: Supervised Practicum (3–5 days)



TRAINER INSTRUCTIONS

Methodologies: Supervised Practicum, Trainer/Preceptor Discussion

DURING THE PRACTICUM:

- Step 1:** Attend practicum sessions and provide supportive supervision to preceptors and Peer Educators on areas that need improvement. Work with the multidisciplinary team and the preceptors to make sure the practicum goes smoothly.
- Step 2:** Help preceptors and Peer Educators introduce the program to clients and be sure to get consent from each client that the Peer Educators work with.
- Step 3:** Ensure that preceptors and Peer Educators are attending and carrying out the practicum sessions as planned and that they are completing the practicum checklist for each Peer Educator. Remember to praise Peer Educators for skills well done!

AFTER THE PRACTICUM:

- Step 4:** Convene all of the preceptors, trainers and the Peer Education program Coordinator after the practicum.
- Step 5:** Review each participant's practicum checklist and discuss as a group whether or not each person is ready to graduate from the course and become a Peer Educator. Trainers and preceptors should have a plan for Peer Educators who will not graduate (for example, they could be asked to repeat the training).
- Step 6:** Identify and discuss common areas of weakness in the practicum and arrange for refresher training and on-site mentoring in these areas. It is unlikely that each participant will have mastered each skill over the short training and practicum period, so plans for future training and on-site supportive supervision are important.
- Step 7:** Thank preceptors for their hard work and dedication to the program.

KEY INFORMATION

See *Appendix 14A: Peer Educator Supervised Practicum Checklist*.

SESSION 14.3: Practicum Debriefing (50 minutes)



TRAINER INSTRUCTIONS

Methodologies: Small Group Work, Large Group Discussion, Interactive Trainer/Preceptor Presentation

Step 1: If possible, reconvene all of the participants, preceptors and trainers at the set date, time and location.

Note: If participants do their practicum at scattered sites far away from one another, a group debriefing may not be possible. If this is the case, plan for facility-based or regional debriefing sessions with participants after the practicum.

Step 2: Break participants into small groups of 5. Ask each group to spend about 10 minutes debriefing on the practicum session. Ask the small groups to discuss the following questions (you may want to write these on flip chart):

- *What was your overall experience during the practicum?*
- *What skills were the most difficult?*
- *What skills were the easiest?*
- *Which areas would you like more support on to make you the best Peer Educator possible?*

Step 3: Bring the large group back together and ask each of the small groups to briefly present their thoughts about the practicum session. Following the small group presentations, ask some of the preceptors to give their thoughts on the practicum. Encourage open discussion.

Step 4: Ask the preceptors to lead a brief discussion on specific skills/areas that they think will require more work (based on overall results of the practicum). Make sure that no one person is singled out or feels ashamed of their performance during the practicum. Remind participants that they will be provided with ongoing support, mentoring and training to sharpen their skills and also learn new skills.

Step 5: Congratulate preceptors and participants on a job well done!

KEY INFORMATION

There is no pre-prepared content for this session.

APPENDIX 14A: Peer Educator Supervised Practicum Checklist

Instructions: Preceptors should complete one checklist for each Peer Educator during the practicum. As you observe a specific skill being demonstrated, tick your rating as GOOD, FAIR or POOR. If you want to make comments or recommendations, write in the right-hand column and be sure to share comments with the Peer Educator. Note that it is unlikely that all items on the checklist will be observed during the practicum. This extensive list of skills is intended to be a guide to preceptors and Peer Educators. At the end of the practicum, complete the final evaluation for each participant.

Name of Participant: _____

Name of Preceptor(s): _____

Dates of Practicum: _____

Name of Practicum Site: _____

Key Skill Area	Preceptor's Rating (Tick One)			Comments
	Good has mastered the skill	Fair needs more practice	Poor needs more training	
General Communication and Counseling Skills with Individuals				
Greets clients properly				
Introduces self and role as a Peer Educator				
Ensures privacy and maintains confidentiality				
Uses good non-verbal communication:				
Makes eye contact				
Sits next to and faces the client				
Smiles				
Minimizes distractions and writing				
Asks open-ended questions to get more information				
Uses active listening skills:				
Uses a calm, non-directive tone of voice				
Allows the client to express emotions				
Does not interrupt				
Shows a respectful, non-judgmental attitude				
Reflects back what the client is saying				
Shows empathy (not sympathy) towards the client				

Key Skill Area	Preceptor's Rating (Tick One)			Comments
	Good has mastered the skill	Fair needs more practice	Poor needs more training	
Uses non-judgmental words that build confidence and give support				
Helps the client set goals and realistic next steps				
Summarizes the counseling session				
General Communication Skills with Groups				
Chooses location with privacy and limited distraction				
Sets up participants in a semi-circle				
Speaks loudly and clearly				
Introduces self to the group, identifies self as a PLHIV				
Introduces group session goals and content areas				
Engages participants in the discussion vs. lecturing				
Tailors session according to what participants already know				
Makes eye contact with participants				
Regularly checks participants' comprehension				
Engages quiet participants				
Uses visual aids to complement discussion				
Summarizes the session				
Offers follow-up counseling to participants				
Basic Communication about HIV and Reproductive Health				
Explains the difference between HIV and AIDS				
Explains how HIV affects the immune system				
Explains the function of CD4 cells and meaning of CD4 cell count				
Describes the functions of reproductive and sexual body parts				
Explains the different ways HIV is transmitted:				
Sexual transmission				
MTCT				
Blood-blood transmission				
Use of unsafe objects				
Clarifies the way HIV is NOT transmitted				
Explains the different ways HIV can be prevented:				

Key Skill Area	Preceptor's Rating (Tick One)			Comments
	Good has mastered the skill	Fair needs more practice	Poor needs more training	
Prevention of sexual transmission – the ABCs				
Male circumcision				
PMTCT				
Prevention of blood-blood transmission				
Prevention of unsafe object use				
Asks clients about family members (health, HIV testing, enrollment)				
Comprehensive HIV Care				
Describes components of comprehensive HIV care				
Provides post-HIV test support				
Mobilizes clients' family members for HIV testing				
Explains why HIV care is important, even if a person is not on ART				
Explains the most common OIs and other complications, their signs and symptoms, prevention and treatment				
Tuberculosis				
Pneumonia/PCP				
Mouth sores or pain				
Skin problems				
Malaria				
STIs				
Weight loss				
Explains the benefits and dosing of CTX				
Provides TB education				
Uses the TB screening tool to identify possible TB cases and refer				
Provides support to people with TB to take medications correctly				
Helps clients seek referrals within the health facility				
Effectively communicates with the multidisciplinary team				
ART				
Explains who needs ARVs and ART				
Explains the goals and benefits of ART				
Identifies first-line regimen, dosage, timing and possible side effects				
Provides advice on preventing and managing ARV side effects:				

Key Skill Area	Preceptor's Rating (Tick One)			Comments
	Good has mastered the skill	Fair needs more practice	Poor needs more training	
Rash and skin problems				
Numbness or tingling				
Nausea and vomiting				
Headache				
Diarrhea				
Trouble sleeping or nightmares				
Tiredness				
Long-term side effects (changes in body shape, etc.)				
Recognizes dangerous side effects and provides immediate referral				
Advises not to stop taking ARVs without coming to the clinic				
HIV Prevention, Care and Treatment for Pregnant Women and Their Children				
Explains the ways HIV can be transmitted from mother to child				
Explains that not all babies will become HIV-infected				
Articulates the 4 main PMTCT concepts:				
Keep moms healthy				
Reduce risk of MTCT at every stage of pregnancy and after				
All pregnant women living with HIV need ARVs				
All babies of mothers living with HIV need ARVs				
Discusses the motto of "saving 2 lives"				
Explains PMTCT strategies before pregnancy				
Explains PMTCT strategies during pregnancy				
Explains PMTCT strategies during labor and delivery				
Explains PMTCT strategies after the baby is born				
Strategies focused on the mother's health				
Strategies focused on the baby's health				
Safe infant feeding				
Assists pregnant women to understand and access ART services				
Explains follow-up services for HIV-exposed babies, including CTX				
Explains HIV testing for HIV-exposed babies <18 months old				
Explains HIV testing for infants >18 months old				
Explains the importance of identifying HIV-infected babies and				

Key Skill Area	Preceptor's Rating (Tick One)			Comments
	Good has mastered the skill	Fair needs more practice	Poor needs more training	
starting them on care and treatment right away				
Adherence and Psychosocial Support				
Explains the importance of adhering to the specific care plan				
Records/updates the client's complete contact information correctly				
Effectively conducts pre-ART group education session #1				
Effectively conducts pre-ART group education session #2				
Effectively conducts pre-ART group education session #3				
Effectively conducts individual pre-ART adherence counseling				
Conducts an ART readiness assessment				
Provides individualized counseling to make an adherence plan				
Conducts a psychosocial assessment				
Provides individualized counseling and support to address psychosocial needs and concerns				
Asks about adherence at follow-up visits or refill appointments				
Counsels clients who are having adherence challenges				
Provides referrals for community adherence and psychosoc. support				
Identifying and Tracing People Who Do Not Return to the Clinic				
Demonstrates understanding of the facility's policies and procedures to identify and follow up with clients				
Asks clients for consent to follow-up by phone or home visit				
Records clients' follow-up preferences				
Uses the clinic's appointment book correctly				
Uses the clinic's appointment reminder cards correctly				
Helps create lists of clients who miss appointments				
Effectively contacts client who has missed an appointment by phone				
Effectively communicates with a community health worker to arrange a follow-up home visit				
Conducts a home visit with a client who has missed an appointment and provides necessary counseling				
Records the outcome of the follow-up attempt				

Key Skill Area	Preceptor's Rating (Tick One)			Comments
	Good has mastered the skill	Fair needs more practice	Poor needs more training	
Provides adherence counseling when clients return to the clinic				
Positive Living				
Describes the importance of positive living				
Gives practical support to keep the mind healthy				
Provides support to clients with anxiety and/or depression				
Understands when to make mental health referrals				
Explains healthy and unhealthy behaviors for PLHIV				
Describes ways to practice safer sex and prevent HIV				
Demonstrates male and female condom use				
Describes useful strategies to negotiate condom use				
Describes the common signs and symptoms of STIs				
Advises on complete treatment of STIs for self and partner				
Counsels on how clients can be involved in their own care				
Stigma, Discrimination and Disclosure				
Provides support to cope with and fight stigma and discrimination				
Freely discloses own HIV-status to clients and health care workers				
Provides disclosure counseling for adults				
Provides disclosure counseling for caregivers and children				
Community Outreach, Education and Linkages				
Demonstrates knowledge of available community resources				
Refers clients to needed resources in the community				
Speaks about HIV prevention, care and treatment at a community meeting or event (optional)				
Record-keeping and Reporting				
Correctly fills in daily activity records for individual sessions				
Correctly fills in daily activity records for group sessions				
Correctly completes monthly summary report				

Final Evaluation by Preceptors:

Name of participant: _____

Tick one:

Demonstrated a majority of skills effectively and is ready to start work as a Peer Educator

Demonstrated some skills effectively, but still needs more practice before becoming a Peer Educator

Unable to demonstrate most skills and should participate in the training course again before becoming Peer Educator

Additional comments:

Preceptor(s) Signature: _____

Date: _____