

Empowering Supervisors and Program Managers:
Strengthening Capacities through Supportive
Supervision Initiative

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INTRODUCTION

The World Health Report (2000) and Philippines Department of Health Human Resource for Health Masterplan 2020-2040 highlight the need for highly skilled and motivated healthcare **workers** to contribute to **improved systems performance** toward **better health outcomes**.

Supportive supervision is an approach to solve problems and improve the quality of primary care health services.

USAID’s TB Platforms with the City Health Department of Quezon City initiated supportive supervision in select health centers.

AIM

To strengthen the competencies of district supervisors, program managers, and facility managers on supportive supervision, data analysis and utilization for planning and decision making, and improved performance management of staff.

METHOD

- Built the capacity of twenty-eight (28) supervisors and program managers on supportive supervision through formal training and post-training mentorship.
- Supportive supervision checklists were adapted to review individual staff performance and facility-level implementation.
- A coach/mentor supported the supervisors during two supervisory visits to assess and provide feedback on the supervisor's demonstration of supervisory skills using a scoring system.
- An after-action review was conducted to review what went well and discuss areas for improvement.

CONCLUSIONS

Supportive supervision promotes quality outcomes by strengthening communication, focusing on problem-solving, facilitating teamwork, and providing leadership and support to empower health providers to monitor and improve their performance.

The supervisors showed the applicability and feasibility of implementing supportive supervision.

While the supervisors included in the initiative showed high scores across the competency indicators, a supportive structure for supervisors is needed for their continued development.

Organizing and mainstreaming supportive supervision requires longer to see the developments at the facility or health program level.

RESULTS

A coaching and mentoring tool was used by the mentor/coach to validate the level of readiness and capacity of participating supervisors.

Results show an overall mean score of 3.80 for the first visit and 3.94 for the second visit, showing an exemplar score (highest score is 4, lowest is 1).

Lessons learned in the after-action review highlighted the necessity of mainstreaming the supportive supervision checklists to ensure the supervisory process's integration, objectivity, comprehensiveness, efficiency, and effectiveness.

Table 1. Rating scale used to assess supervisor performance during supervisory visit.

Level	Classification	Behavioral Indicators
1	Beginner	exhibits some of the behaviors some of the time and/or with limited capacity
2	Capable	exhibits some of the behaviors most of the time and/or with adequate capacity
3	Competent	exhibits most of the behaviors most of the time and/or with adequate capacity
4	Exemplar	exhibits all of the behaviors all of the time and/or with the highest capacity

Table 2.Mean score of supervisors in each of the supportive supervision parameters

It also provided evidence of the feasibility of regular supportive supervision as part of staff development initiatives.

Coaching and mentoring were helpful for the healthcare staff; it should also be conducted for the supervisors.

More experienced supervisors can be tapped as coaches and mentors for supervisors needing more guidance or with less experience.

The supportive supervision tools can be further enhanced to include more competency requirements and other health programs, as the supervisors cover not only TB but also other major public health programs.

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REFERENCES

World Health Organization. World health report 2000. Health systems performance assessment. 2000

HRH2030 and Department of Health. 2020-2040 Human Resources for Health Master Plan: Blueprint. 2019.

Avortri GS, Nabukalu JB, Nabyonga-Orem J. Supportive supervision to improve service delivery in low-income countries: is there a conceptual problem or a strategy problem? BMJ Global Health 2019;4:e001151.

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