

# Clean and Safe Primary Health Care in Hawzen: A Case Study



## District Leadership Mobilizes Tigray's Hawzen Towards Clean and Safe Facilities

Written by Amira Yenus Nuru, Yale Global Health Leadership Institute

### Executive Summary

In close collaboration with the Ethiopian Federal Ministry of Health and Regional Health Bureau, the HEPCAPS2 Project selected Hawzen as a demonstration site in Tigray to serve as a learning lab for primary health care unit (PHCU) reform in the country. Hawzen's primary hospital, 4 health centers, and 25 health posts participated in the effort to test new woreda models for improved management, leadership and overall district performance.

A key feature of HEPCAPS2 engagement in Hawzen was the development of a PHCU working group, which enabled key district administrators to collaboratively problem solve and lead improvements across the woreda. The working group was meant to facilitate communication and planning among health centers and primary hospital leadership and help establish Hawzen's PHCU as a cohesive administrative unit. Throughout 2015, the Hawzen working group met regularly to address priority issues of the woreda, with particular focus on safety and sanitation issues across health facilities.

## Challenges

A situational analysis conducted by the Hawzen working group led to the group's prioritization of addressing sanitation and safety problems in Hawzen's primary hospital and health centers. While most health facilities had an incinerator, the working group identified serious sanitation and safety issues that jeopardized the safety and health of patients and staff. Sharp wastes were disposed in an open pit without protection and unused beds and medical equipment were stored inappropriately causing safety hazards. In addition, inpatient beds lacked linens, delivery beds were not properly sanitized, and inpatient areas lacked separate male and female space.

The woreda also faced insufficient staffing at the primary hospital (59%) and at its health centers (67%) compared with the BPR staffing standards. Hawzen's newly upgraded primary hospital also suffered from routine electricity outages and had no secondary source of electricity.



## Strategy

One of the key efforts supported by the HEPCAPS2 PHCU reform was the establishment of a PHCU working group. HEPCAPS2 research identified that high performing PHCUs had excellent relationships among the woreda health office and health facilities. Therefore Hawzen assembled a working group that included managers of the woreda administration, the woreda health office, directors of primary health care facilities, and community representatives. The working group was designed to establish the PHCU as a cohesive unit and to facilitate communication and planning across the woreda.

The Hawzen working group was established to serve as a high-functioning and cohesive team that addressed problems that limited woreda performance. Facilitated by the Yale HEPCAPS2 team, the working group met monthly to identify and prioritize woreda problems and develop implementation plans to address these problems using an 8-step strategic problem solving process. Throughout 2015, the Hawzen working group participated in the Primary Health Care Management Development Program (an executive-style management certificate program), and strategically took action to address priority issues of sanitation and safety of facilities throughout the woreda. The Yale HEPCAPS team provided onsite support, mentoring, and facilitated convenings of the working group. The Yale HEPCAPS team introduced and facilitated the working group through problem definition, objective setting, strategy identification and selection as well as implementation and follow up.



**Hawzen working group meeting, June 2015**

Collaboratively, the working group made decisions to fill vacant positions, restructure inpatient wards, implement new safety and sanitation policies, and allocated resources to address power shortages.

## Results

As a result of the working group's joint planning and collaborative implementation, the following results were achieved:

- The woreda fulfilled 21 vacant positions in the PHCU included health officers, nurses, midwives in health centers, as well as nurses and pharmacy technicians in the primary hospital.
- Separate male and female inpatient wards were created for privacy.
- The primary hospital obtained a secondary source of electricity (generator).
- The woreda budgeted for a transformer for the primary hospital.
- Facilities implemented appropriate sharps disposal and incineration.
- Overall cleanliness of the facilities was improved.

**Post intervention: clean delivery bed, external facility without beds and other equipment creating safety hazard**

