

SECTION 2

ORGANISING YOUR WORK AS A SUPERVISOR

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INTRODUCTION

The clinic supervisor is responsible to manage a number of clinics. This management entails a number of different components – performing important administrative tasks, scheduling visits, planning the supervisory components of individual visits and monitoring the performance of clinics. The purpose of this section is to identify key aspects of managing a group of clinics and to provide tools and advice in support of this management.

1. MAKING ADMINISTRATION EASIER

One of the first tasks is to open a file for each individual clinic. Here administrative records are kept – policies provided to clinics, requests for repairs, important notes following supervisory visits and other matters which require some form of documentation.

A second important task is to complete the supervisor's list of contacts, which will enable you to deal with important issues without having to follow complicated bureaucratic lines of communication. This list should be completed between you and your District Manager, showing the various authorities from whom you may seek help in carrying out your supervision responsibilities. The purpose of the list is to have previous authorization to enable you to contact appropriate persons directly on behalf of the clinics you supervise when assistance is needed in each of the areas listed on the enclosed form. Ultimately the District Manager is responsible for identifying who you should contact in each of these areas and indicating to those people in a formal fashion that you may be doing so and that they should give you full help and co-operation when you request it. In certain instances, they may actually be authorized persons in the private sector such as plumbers, electricians or other persons needed to attend to specific areas at one or more of your clinics. Increasingly you will be able to solve problems on behalf of the clinic simply with a phone call and the use of this list. Keep the list up to date for many of the contact details may change from time to time.

2. SCHEDULING VISITS

The form "**Clinic Supervision Schedule**" will allow you to schedule clinic visits one year in advance. This is to record the dates of which you expect to visit each of the clinics for which you are responsible. Ideally these dates will be set well in advance, perhaps even a fixed day each month such as the second Tuesday of the month or the first Thursday etc. Should a change in schedule be necessary the clinic should be notified as far in advance as possible. This form also enables you to record the date that you actually visited that clinic. This will be particularly helpful for you to submit to the Transport Officer in charge of the vehicle that will be assigned to you for visiting each of these clinics. A copy of the annual schedule should be provided to the district manager and individual clinics.

3. PLANNING THE CONTENT OF YOUR VISIT

The form "**Clinic Planning Schedule**" will enable you to plan the content of your clinic visits in advance. You will have to photocopy this form to enable you to fill out one form for each clinic for which you are responsible. This form will help you plan ahead the contents of your supervision visit as well as to record what you actually do during the supervision visit: the subjects discussed for in-service training, the programme reviews you conduct, the findings under each of the main categories. It serves as a reminder to you for follow up actions and things that you have promised that you would handle at a future time. As each clinic has its own page to record your visits, this is a consolidated recording of your findings and of the jobs that you wish to do back at your office. A copy of each individual clinic form should be provided to DM and to individual clinics.

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4. MONITORING PERFORMANCE OF THE CLINICS

An important component of the supervisor's role is to monitor the performance of clinics. One way of doing this is by direct visits at the clinic and the other important way is to compare the performance of the clinics you are supervising. This is typically done by graphing key aspects of clinic performance – examples being EPI coverage and numbers of drug stock outs. This method allows you to identify poorly performing clinics and together with clinic staff working out ways of correcting problem areas. On the other hand, lessons could be learnt from clinics doing very well in certain areas which could be used to improve service provision in other clinics supervised by you.

5. REPORTING

The provincial policy on supervision indicates that the district manager will report quarterly on supervisory visits within the district. A form titled “**Quarterly Districts Report on Clinic Supervision**” on page 4 can be used. In order to support the District Manager to compile this report a form “**Monthly Supervisors Report on Supervisory Activities**” on page 3 has been designed to provide reports to the appropriate person at provincial level. Each clinic supervisor completes this form monthly and submits it to the District Manager. Important issues which need the inputs of the District Management Team should be indicated here for further follow up.

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MONTHLY SUPERVISOR'S REPORT ON SUPERVISORY ACTIVITIES

MONTH		NAME OF SUPERVISOR
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NAME OF CLINIC VISITED VISITED AS PER SCHEDULE	SUPERVISORY ACTIVITIES	ACHEVEMENTS / PROBLEM AREAS / COMMENTS / INTERVENTIONS
1 Name _____ Date visited _____ Visited per schedule <input type="checkbox"/> Y <input type="checkbox"/> N	Routine review done <input type="checkbox"/> Y <input type="checkbox"/> N	1
	In Depth Programme Review:	2
		3
	In service training topic:	4
2 Name _____ Date visited _____ Visited per schedule <input type="checkbox"/> Y <input type="checkbox"/> N	Routine review done <input type="checkbox"/> Y <input type="checkbox"/> N	1
	In Depth Programme Review:	2
		3
	In service training topic:	4
3 Name _____ Date visited _____ Visited per schedule <input type="checkbox"/> Y <input type="checkbox"/> N	Routine review done <input type="checkbox"/> Y <input type="checkbox"/> N	1
	In Depth Programme Review:	2
		3
	In service training topic:	4
4 Name _____ Date visited _____ Visited per schedule <input type="checkbox"/> Y <input type="checkbox"/> N	Routine review done <input type="checkbox"/> Y <input type="checkbox"/> N	1
	In Depth Programme Review:	2
		3
	In service training topic:	4
5 Name _____ Date visited _____ Visited per schedule <input type="checkbox"/> Y <input type="checkbox"/> N	Routine review done <input type="checkbox"/> Y <input type="checkbox"/> N	1
	In Depth Programme Review:	2
		3
	In service training topic:	4
6 Name _____ Date visited _____ Visited per schedule <input type="checkbox"/> Y <input type="checkbox"/> N	Routine review done <input type="checkbox"/> Y <input type="checkbox"/> N	1
	In Depth Programme Review:	2
		3
	In service training topic:	4

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QUARTERLY DISTRICT REPORT ON CLINIC SUPERVISION

DISTRICT		DISTRICT MANAGER
SIGNED		DATE

Month	No of clinics visited	No of clinics visited on scheduled date	No of clinics in district
1			
2			
3			

Comments on important aspects of clinic supervision

1. Staff

Clinic	Issues

2. Clinic infrastructure (telephone, electricity, water, sanitation/refuse disposal)

Clinic	Issues

3. Service provision

Clinic	Issues

4. Drug stock outs

Clinic	Issues

5. Essential Clinic supplies

Clinic	Issues

6. Clinic committees

Clinic	Issues

7. Other

Clinic	Issues

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CLINIC PLANNING SCHEDULE

CLINIC NAME

SUPERVISORS NAME

Checklist	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Red flag list												
Routine review list												
Staff management												
Clinic management												
Information review												
Referral review												
Clinical review												
Public health impact												
Community involvement review												
Programme Review												
In service training topic												

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CLINIC SUPERVISORS LIST OF CONTACTS

SUPERVISOR NAME

BUILDING & MAINTENANCE

Problem Area	Worker	Name/Surname	Authorised By	Telephone No
Roof repairs	Maintenance handyman			
Doors and windows	Handyman			
Plumbing – toilets, water	Plumber			
Electrical problems	Electrician			
Fencing and access	Handyman			
Walls	Builder			

EQUIPMENT

Problem Area	Worker	Name/Surname	Authorised By	Telephone No
Refrigerator repair/maintenance	Cold chain maintenance			
Sphygmo manometer	Equipment repair workshop			
Other minor equipment	Equipment repair workshop			

SUPPLIES AND DRUGS

Problem Area	Worker	Name/Surname	Authorised By	Telephone No
Gas	Stores			
Vaccines	Pharmacist and Depot			
Stationary	Person in charge of Stationary/ Registers/ Forms			
Essential Drugs	Pharmacist			

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CLINIC SUPERVISORS LIST OF CONTACTS

TRANSPORT AND COMMUNICATION

Problem Area	Worker	Name/Surname	Authorised By	Telephone No
Ambulance Service	Emergency Ambulance			
	Hospital Vehicle Officer			
	District Transport Officer			
Tekom	Tekom Area Manager			
Radio	Maintenance Officer			

PERSONNEL PROBLEMS

Problem Area	Worker	Name/Surname	Authorised By	Telephone No
Salaries	Personnel Officer			
Allowances	Personnel Officer			
Leave	Personnel Officer			
Disciplinary matters	Personnel Officer			
Maternal Child	MCH Co-ordinator			
Womens Health	District/Hospital			
Adolescence	Provincial name s/addresses			
	Maternity wards			
	Doctors			
EPI	MCH Co-ordinator			
HIV/AIDS & STDs	Communicable Disease Co-ordinator			
	Doctors			

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CLINIC SUPERVISORS LIST OF CONTACTS

PERSONNEL PROBLEMS(continued)

Problem Area	Worker	Name/Surname	Authorised By	Telephone No
Nutrition Program	Nutritionist			
Mental Health & Substance Abuse	Psychiatrist			
	Mental Health Nurse			
	NGOs eg AA, SANCA			
Tuberculosis Outbreak	SANTA			
	Local Hospital Doctor			
	Communicable Disease Co-ordinator			
	DOT S Trainer Environmental Health Officer District Manager			
Sodal Welfare	Welfare Officer			
Disability/Rehabilitation	Physiotherapist			
	Social Welfare			
Oral Health	Oral Therapist			
	Dentist			
Laborabry Services	Head of Laboratory			