

## **REACHOUT-** Reaching out and linking in: Health systems and close-to-community services

### **Overview**

**REACHOUT** is an international five-year (2013-2018) implementation health research project funded by the European Union; aims to improve the equity, efficiency and effectiveness of close-to-community (CTC) health services of the implementing countries.

• REACHOUT consortium is led by the Liverpool School of Tropical Medicine (LSTM) and technical support is provided by KIT, Netherlands.

### Implementing Institute and countries

- BRAC James P Grant School of Public Health (JPGSPH), BRAC University, Bangladesh
- Eijkman Institute for Molecular Biology, Indonesia
- Hidase Hulentenawi Agelglot Yebego Adragot Mahber, Ethiopia
- Liverpool Voluntary Counseling and Testing for HIV (LVCT), Kenya
- Reach Trust, Malawi
- Eduardo Mondlane University, Mozambique

The REACHOUT Bangladesh team, led by BRAC JPGSPH, aims to strengthen the capacity of CTC providers through improving the referral system of Menstrual Regulation (MR) Services.

### Close-to-community (CTC) provider

Health worker who carries out promotional, preventive and/or curative health services and is the first point of contact at community level. This cadre can be based in the community or in a basic primary facility. A Close-to-community provider has at least a minimum level of training in the context of the intervention that they carry out.

#### Formal CTC providers

Affiliated to and supervised by any institution. Example: field level staff of government and NGOs.

### Informal CTC providers

Autonomous and not supervised by any institution. Example: drug sellers, traditional birth attendants, traditional healers, community volunteers etc.

# Context Analysis, February 2013- June 2014

## Gaps of providing MR service identified in

- Referral system and
- Supervision system of CTC
  providers



### **Project Activities**

Quality Improvement Cycle One (QIC1), July 2014- March 2016

### Interventions

- Revised and structured referral card
- Facilitative referral training with formal and informal CTC providers
- Supportive supervision training with supervisors of formal CTC providers



Quality Improvement Two (QIC2), April 2016 – January 2018

- Embedding QIC1 into QIC2
- Introducing quality improvement (QI) teams in partner organizations
- Facilitative referral training with formal and informal CTC providers
- Supportive supervision training with supervisors of formal CTC providers



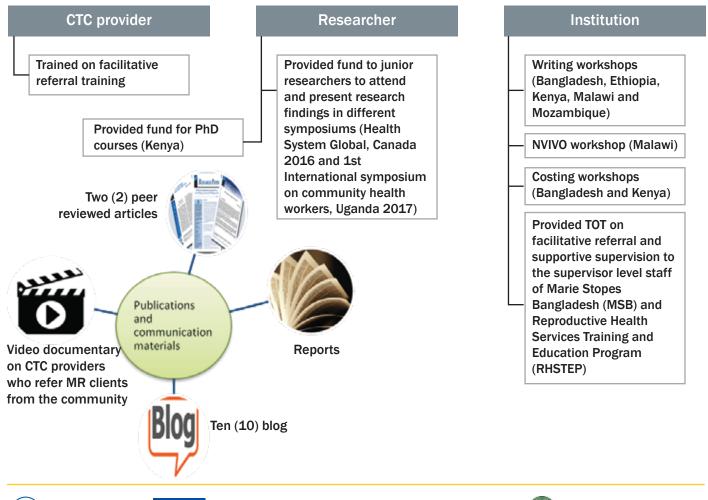
## **Project Activities**

		No. of Training	No. of formal CTC providers	No. of informal CTC providers	No. of supervisors of CTC providers
QIC 1	Facilitative Referral Training	8	34	117	-
	Refresher Facilitative Referral Training-1	8	29	94	-
	Supportive Supervision Training	2	-	-	13
	Refresher Supportive Supervision Training-1	3	-	-	24
QIC 2	Refresher Facilitative Referral Training-2	9	29	72	-
	Facilitative Referral Training	12	9	209	-
	Refresher Supportive Supervision Training-2	1	-	-	13
	Supportive Supervision Training	2	-	-	15
	QI team meeting	16	-	-	-

## Capacity building

### BRAC JPGSPH, BRAC University provided technical assistance to build the capacity in researcher,

institution and CTC providers' level:



Implementing Partner:

Donor:

MARIE STOPES BANGLADESH Reach