

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



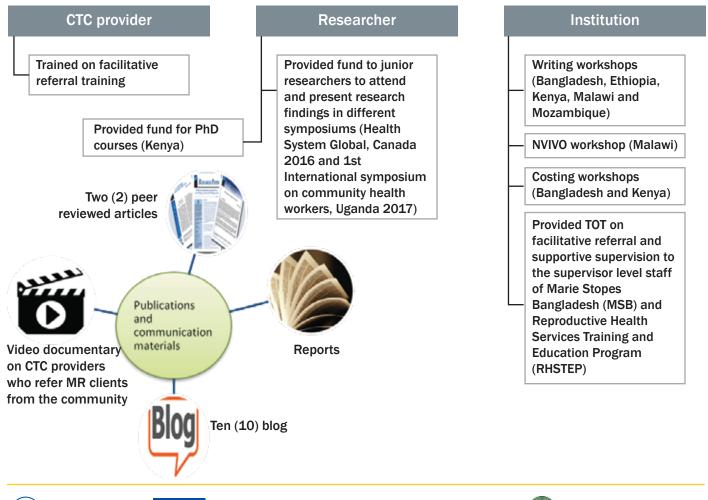
Project Activities

		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