

Title: The incremental effect of clinical attachment and clinical mentorship on nurses' confidence in ART initiation: An Elizabeth Glaser Pediatric AIDS Foundation (EGPAF)-supported capacity building program for nurses in Zimbabwe, 2015

Track and Category: E33 Health systems Strengthening: Capacity building initiatives

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Background: EGPAF provides technical support to the Ministry of Health and Child Care (MOHCC) for the implementation of HIV programs in Zimbabwe. From January 2013 to March 2014, EGPAF conducted a capacity building program (CCP) including clinical-attachment and clinical-mentorship involving 414 nurses in 207 health facilities across seven provinces to address lack of confidence, a barrier to ART initiation among nurses.

Methods: An analytical cross-sectional study was conducted in 56 multistage-randomly-sampled sites of the mentorship program. Semi-structured interviews were conducted with nurse-mentees to determine changes in confidence and ability to manage HIV-infected pregnant women including ART initiations at pre, during and post-CCP. The CCP included a 2 week clinical-attachment at an ART initiating site and at least 6 on site clinical-mentorship sessions, including ART initiation, with an accredited clinical mentor. Confidence in performing 15 aspects of HIV management was measured through three-point-Likert scales (1=not confident; 2=not sure 3=confident). The proportion of HIV-infected pregnant women initiated on ART by the mentees in the pre, during and post-CCP periods was obtained from facility registers. Data were analyzed using Epi-Info-7.0. This study has ethical approval.

Results: Overall, 98 nurse-mentees were interviewed, all of whom had received at least one didactic HIV management training prior to the CCP. Overall HIV management competencies and confidence of nurse mentees significantly increased between the pre, during and the post-CCP-[p value=<0.01 in all cases]. The mean-score for confidence in performing the 15 aspects for HIV management increased with each additional capacity building component of ART training. Didactic training alone was 1.97; didactic training and clinical-attachment was 2.61; and didactic training, clinical-attachment, and clinical-mentorship was 3.00. ART initiation at the participating sites increased from 193 (6.2%) before to 758 (30.3%)-[p=<0.01] during the CCP. The change of guidelines to initiate all HIV-infected pregnant women on ART occurred in the interim and the nurses were able to initiate 2091(99.6 %) post CCP-[p value=<0.01].

Conclusion: Nurse confidence to initiate ART increased significantly during the implementation of a clinical-mentorship and attachment program. Implementation of a nurse mentorship program can be an effective strategy to increase ART initiation in HIV-infected pregnant women towards ending AIDS by 2030.