



Strengthening privately run pre-service health training institutions for enhanced enrolment and quality of health workers in Tanzania

Capacity Assessment of Health Training Institutions



CAPACITY ASSESSMENT OF HEALTH TRAINING INSTITUTIONS

FOR

CHRISTIAN SOCIAL SERVICES COMMISSION

NUFFIC/NICHE PROJECT TZA 001

AN ANALYSIS OF SELF ASSESSMENT ON INSTITUTIONAL CAPACITY

BY

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CAVEAT

This report presents the analysis of the information that was submitted by HTI themselves and does not present in any way verification by the authors. The validity and authenticity of the information cannot be guaranteed by the authors, CSSC or its partners in this project. BR

ABBREVIATIONS

| | |
|--------|---|
| CHPK | Community Health Promotion in Kenya |
| CRDB | Community Rural and Development Bank |
| CSSC | Christian Social Services Commission |
| ELCT | Evangelical Lutheran Church of Tanzania |
| GOT | Government of Tanzania |
| HDT | Human Development Trust |
| HTI | Health Training Institution |
| IHI | Ifakara Health Training Institute |
| IT | Information Technology |
| MUWATA | Muungano wa Wanafunzi Tanzania (Association for Students Union in Tanzania) |
| NACTE | National Council for Technical Education |
| NICHE | Netherlands Initiative for Capacity development in Higher Education |
| NWD | North Western Diocese |
| RFA | Radio Free Africa |
| SMART | Specific, Measurable, Achievable, Realistic, Time Bound |
| TANA | Tanzania Nurses Association |
| TEC | Tanzania Episcopal Conference |
| TMCA | Tanzania Christian Medical Association |
| TNMC | Tanzania Nurses and Midwives Council |
| TTCIH | Tanzania Training Centre for International health |

EXECUTIVE SUMMARY

The Health Training Institutions (HTIs) self-assessment was sent out to 37 health training institution facilities from all five CSSC zones (illustrated in map 1.), but only 16 (43%) of the institutions filled the forms. The resultant analysis was less than half which may not reflect the entire picture among all the HTI. The analysis took into consideration all the materials submitted as evidence while responding to the specific questions. Majority (56%) of the HTI came from Lake Zone followed by four from the Northern zone (26%) and the rest provided one each. The assessment explores strength in governance, managerial systems, finance and administration, infrastructure, advocacy and media relations.

For each section the HTI self assessed its capacity by giving a score ranging from 0 to 4 (0 being nothing is there and 4 being finished and of good quality). There are a total of 38 questions and the total maximum score is 152 points (100%). There were omissions in a number of cases where an attachment or explanation was required but was not provided. The score should therefore be read with caution and verification of the availability and quality of the document referred will need to be done during physical HTI assessment.

The average total score was 70% and nine HTIs scored 70% or above. Dareda School of Nursing had the lowest total score on the self-assessment, with 72 points (47%) and the highest total score was Kolandoto School of Nursing with 141 points (93%). The average lowest score for all HTI is advocacy and media relation (38%), followed by infrastructure (68%). The lowest score is also in advocacy and media engagement (6%). Governance and infrastructure also seems to have been the second last from the lowest (38%). This may indicate that support to these institutions may materially be directed to help them engage in networking and engaging in media for promotion of their programs and researching.

1. INTRODUCTION OF THE NUFFIC/ NICHE /TZA 001 PROJECT

The project is formed by a consortium of 3 international organizations based in the Netherlands namely the University of Groningen, Hanzehoge school Groningen and ETC Crystal. The project works with four regional partners and these are Human Development Trust, Ifakara Health Institute, Tanzanian Training Centre for International Health (TTCIH) and Community Health Promotion (CHPK) in Kenya. The project aims at **Strengthening privately run pre-service health training institutions for enhance enrolment and quality of health workers in Tanzania**. It will be implemented in Tanzania by CSSC and will be technically supported by several expert organizations.

The project is being financially supported by the Dutch Government. The Dutch Agency Nuffic (Netherlands Organization for International Cooperation in higher education), supervises the project on behalf of the Dutch Ministry of Foreign Affairs (www.nuffic.nl).

CSSC is a Christian Commission, and is an umbrella Christian organization that works closely with the Government of Tanzania (GOT), International agencies and NGOs. Its two main focuses are Health and Education. (www.cssc.or.tz).



ETC Crystal is an international health group of the ETC Foundation in the Netherlands (www.etc-international.org) that provides technical assistance and advisory services to Governments and other non state actors. They focus on health sector policies and performance, health care programme development, efficient management of health resources, coordination of donor inputs and their alignment with national priorities.

The project will focus on enhancing the supply and quality of health workers in selected CSSC Health Training Institutions of Tanzania.

Objective

The project aims at enhancing the supply and quality of health workers for improved access to quality health care.

The project has the following components:

- Labour market and tracer studies

- Development of innovative teaching methods and programs that includes review of curricular, development of clinical skills labs
- Engendered management capacity of HTIs
- Innovative tutor training in short and long courses including Masters
- Strengthening of management capacity of the HTIs
- Improvement of infrastructure (2 HTIs)
- Developing a model of excellence

Expected Outcomes

- 5 health training institutions increased enrolment to 100%
- 10 HTIs have effective, efficient and transparent and gender sensitive management system
- 37 health training institutions benefit from innovative and gender sensitive training capacity
- Number of trained tutors doubled (by 50%) of CSSC medical doctors by 2014
- Five tutor training institutions established
- CSSC rural health facilities have increased access to qualified health workers and are more gender oriented

2. HTI CAPACITY ASSESSMENT PROCESS

This was a self assessment; where by the index institution scored itself and returned the filled forms that were initially developed by HDT and shared for improvement with TTCIH and CSSC. There were omissions in a number of cases where an attachment or explanation was required but was not provided. As such only scores are seen but justification to the score is not given. The score should therefore be read with caution and verification of the availability and quality of the document referred will be done during physical HTI assessment.

The self-assessment questionnaire is conducted into three parts. Part one is dealing with the general information such as location, contact information etc. and part two handling the institutional profile part e.g. budget, sources of funding, number of students etc. Part three is the main capacity assessment. Part 3 is divided into 5 sections: Governance, Managerial processes, Finance and Administration, Infrastructure and Assets and Advocacy, Networking and Media relation. There are a total of 38 questions (*see table III for the shortening of the questions*) and for each question a score from 0-4 (*see table II*). Section 1 consists of 10 questions with the subheading governance concerning the HTIs' constitution, legal status, committees' involvement and their mission/vision statement. The maximum points on governance are 40 (score 4 for each question). Section 2 is about managerial processes and deals with organizational structure, planning and monitoring/quality assurance, with a maximum of 48 points. The third section, finance and administration, there are 8 questions regarding bank account and accounting (guidelines, procedures, controlling etc.) with a maximum of 32 points. Infrastructure and Assets is the 4th section with 4 questions, where the HTI has to self assess itself on how good they are in e.g. IT infrastructure , how accessible the fax/telephone facilities are and if they have ownership of land/buildings for expansion. The last section on the questionnaire is advocacy, networking and media relations, also with 4 questions with maximum points of 16. This section deals with network membership, research and media relations etc.

Table II – meaning of the capacity scores

--> Capacity scores are: 0 (nothing is there), 1 (started but still in beginning stage), 2 (some progress or finished but of poor quality) 3 (considerable progress or finished but quality can still be improved) or 4 (finished and of good quality)

Table III – Shortening of the 39 questions on the self-assessment

| | No | Subheading | Question |
|-------------------------------|----|---|---|
| Governance | 1 | A. <i>Constitution</i> | Available written constitution? |
| | 2 | | By laws developed and adopted? |
| | 3 | B. <i>Legal Status</i> | Institution accredited? Status/ No. |
| | 4 | C. <i>Leading Committee</i> | Committee/ Board meetings? |
| | 5 | | Representatives of varied interests? |
| | 6 | | Stated membeship? |
| | 7 | | Membership not interfering with other tasks? |
| | 8 | | Promotion based on merit? |
| | 9 | D. <i>Mission and Vision</i> | Mission stated, agreed and approved? |
| | 10 | | Vision statement, expand quality&quantity? |
| Managerial processes | 11 | A. <i>Organizational Structure</i> | Available chart with clear responsibilities? |
| | 12 | | Adequate education and skills to provide? |
| | 13 | | Recruitment of staff? |
| | 14 | | Recruitment of students? |
| | 15 | B. <i>Planning</i> | Multiyear buisness plan costed & implemented? |
| | 16 | | Buisness plan with Smart Objectives? |
| | 17 | | Regular meetings with staff? |
| | 18 | | Students leadership? Able to raise issues? |
| | 19 | C. <i>Monitoring and Quality assurance</i> | Quality assurance? Eg. External examiner |
| | 20 | | System to collect&analyze info/doc data? |
| | 21 | | Ensure data quality? |
| | 22 | | Use of collected data for decision making? |
| Finance &aAdmin. | 23 | A. <i>Bank account</i> | Bank account to hold funds? |
| | 24 | | Guidelines on selection of signatories? |
| | 25 | B. <i>Accounting</i> | Accountant with sufficient qualifications? |
| | 26 | | Financial&Adm. Manual accessible? |
| | 27 | | Guidelines available & followed? |
| | 28 | | Accounting tools? Eg. Cashbook |
| | 29 | | Software regularly updated financial records? |
| | 30 | | Financial reports & annual external audit? |
| Infrastructure and Assets | 31 | Part 4: Infrastructure and Assets | Own land for expansion? |
| | 32 | | Buildings adequate lecture,lab & dormitories? |
| | 33 | | Telephone & fax accessible by all staff? |
| | 34 | | IT infrastructure? Internet/printer/software |
| Networking and Media relation | 35 | Part 5: Advocacy, networking and media relation | Member of network? |
| | 36 | | Database for students? |
| | 37 | | Work with media? |
| | 38 | | Conduct research? |

3. ORGANIZATIONAL DETAIL ASSESSMENT SCORES

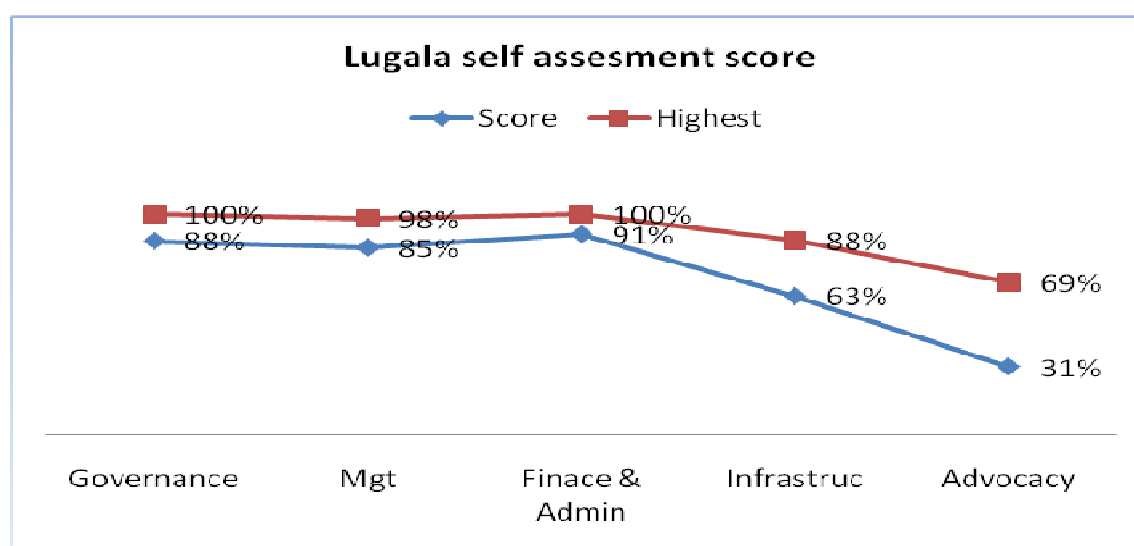
3.1 Lugala Nurses and midwives Training School

Introduction: Lugala Nurses and Midwives Training School is affiliated to CCT and is located in Ulanga district in Morogoro region (charlesmagwaza@yahoo.co.uk). It has 10 staff members and the institution has 100 students (female 87, male 13) offering a nurse and midwives certificate course. The annual budget is Tshs. 173,000,000/=. The main sources of funding are the school fees from the students, donation and government grant. The self assessment form was filled in by the principal and the date of assessment was on the 6th of August 2010.

Summary of overall score

| Lugala Nurses and midwives Training School | | | |
|--|------------|------------|------------|
| | Score | Max Score | % |
| Governance | 35 | 40 | 88% |
| Management Process | 41 | 48 | 85% |
| Finance & Admin | 29 | 32 | 91% |
| Infrastructure & Assets | 10 | 16 | 63% |
| Advocacy & Networking | 5 | 16 | 31% |
| Total | 120 | 152 | 79% |

Comparison of Lugala score and the highest score of all health training institutions



In subsections below, specific areas assesed are described in further detai:

Governance: Lugala Nurses and Midwives Training School has a letter/certificate of establishment and it's by laws developed and adopted by the diocesan constitution. There is a hospital board and the members are selected by diocesan executive council and serve for a four years term. Promotion of staff is based on performance appraisal. The mission and vision is stated and displayed. On governance, Lugala scored 35 out of 40 (88%).

Managerial process: Lugala Health training institution has an organogram that shows clear lines of responsibilities with qualified and experienced staff. The diocese follows the human resource scheme for recruitment of staff. The recruitment of students is adhered to NACTE and TNMC selection criteria. The staff and students' government have regular meetings and students can raise issues through students' government. Quality assurance is made through semester final examinations and performance indicators (further information about external validation/examiner needed). On managerial process, they scored 41 out of 48 (85%).

Finance and administration: Lugala has a bank account at the CRDB bank PLC Kilombero branch and guidelines on selection of signatories (two to sign as principal apply). There is a chief accountant and his assistant, and are using a financial regulation manual. Guidelines and procedures for accounting are available, both accounting tools (cheque books, cashbook, payment vouchers are available) and accounting software (quick book) are used. The financial reports are prepared every year for external audit. They scored 29 out of 32 (91%) of total score.

Infrastructure and Assets: The institution has enough legally owned land for expansion and there is a dormitory for 36 students and one classroom (buildings are in some progress or finished but of poor quality). The institution has cellular phone facilities by Zain and Vodacom is available. IT infrastructure is of poor quality. They scored 6 out of 16 (38%).

Advocacy, Networking and media relation: Lugala Health Training Institution is not a member of any network but has a data base in good quality for students. No research is conducted and relations with media are weak. They scored 5 out of 16 (31%).

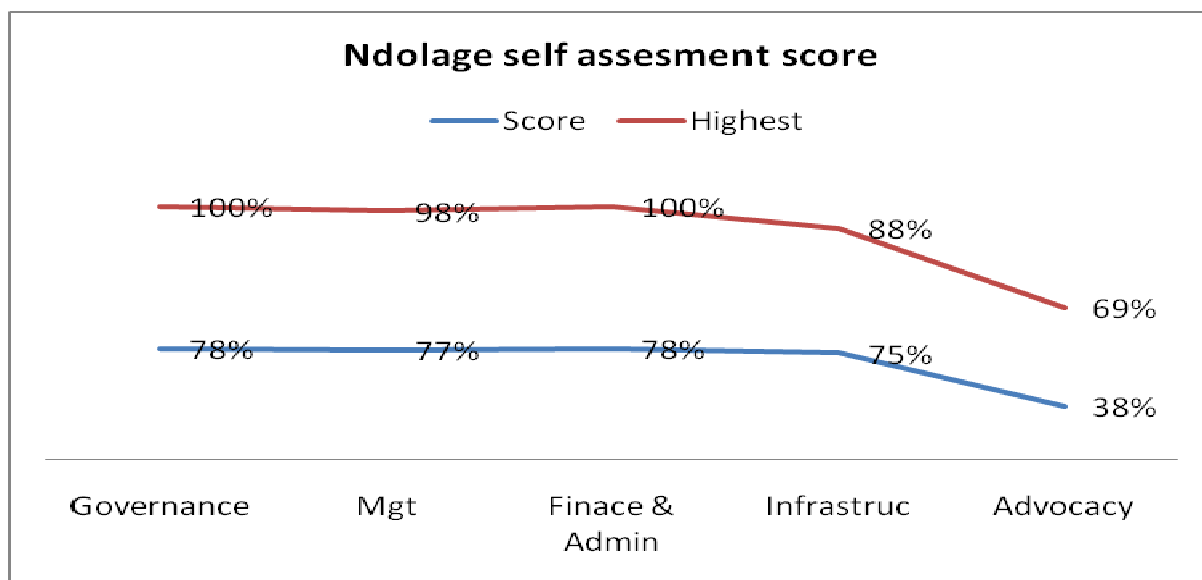
3.2 Ndolage School of Nursing

Introduction: Ndolage Health Training Institution is affiliated to CCT and located in Kamachumu-Muleba district in Kagera region (contact number +255-028-2222483, 0754 886423). With 19 staff members, it has around 160 students 69% being females and 31% males. They offer a diploma course in Nursing. The main source of funding is the school fees from the students. Annual budget recorded for year 2008 was Tshs. 161,785,750 in 2009 195,628, the doctor in charge of Ndolage Hospital, the hospital secretary and the principal. The date of assessment: was 27/07/2010.

Summary of overall score

| Ndolage School of Nursing | | | |
|----------------------------------|------------|------------|------------|
| | Score | Max Score | % |
| Governance | 31 | 40 | 78% |
| Mgt Process | 37 | 48 | 77% |
| Finance & Admin | 25 | 32 | 78% |
| Infrastructure & Assets | 12 | 16 | 75% |
| Advocacy & Networking | 6 | 16 | 38% |
| Total | 111 | 152 | 73% |

Comparison of Ndolage Score and the highest score of all health training institutions



In subsections below, specific areas assesed are described in further detail

Governance: Ndolage Health Training Institute does not have a constitution; however there is one for the Evangelical Lutheran Church in Tanzania- North Western Diocese (ELCT/NWD). Laws are developed by the highest level of authority but some have been developed by the institution itself. The school is fully accredited by The National Council for Technical Education (NACTE) since the 30th of June 2009. They have a board that meets quarterly, with members from within and outside the organization. Membership exists for 5 years and does not interfere with managerial tasks. There is no promotion system for their staff. The mission and vision is understood, agreed upon and approved by the leading committee, also clearly stated and shows the need to expand both quality and quantity. Their vision statement is: “A sustainable church owned institution producing qualified and competent nurses who will demonstrate the

highest standards and values in health care delivery". Their mission statement is: "To provide learning and teaching environment that stimulates creativity, innovation and research and encourages adoption of new technology" On governance, Ndolage scored 31 out of 40 (78%).

Managerial process: Ndolage Health training institution has an organogram that shows clear lines of responsibilities. Their staff members are educated, experienced and skilled. The majority of the academic staff members are former graduates of the school who were recruited and trained as Nurse Tutors. The process of recruitment of students is done through various announcements and advertisement. The candidates sit for the school entrance examination and the selected candidates are approved by the school board. The school has a yearly plan and it is implementable and has some SMART objectives. The institution holds regular meetings especially with the academic staff and students can raise their issues through the school council as well as through their school academic committee representatives. Quality assurance is ensured by inviting external examiners. There is a system for collect, analyze and document but is not clearly stipulated and data quality cannot completely be ensured. On managerial process, they scored 37 out of 48 (77%).

Finance and administration: Ndolage has a bank account at the National Bank of Commerce Bukoba Branch. The signatories are appointed by the ELCT/NWD executives and guidelines are clear. Their cashier works under the ELCT/NWD treasurer and their accountants also have sufficient skills. They do not have a financial and administrative manual, and the institution deals with petty cash and other documents are available at the treasurers' desk (ELCT/NWD) (who is in charge of their accounts). Accounting tools are available as well as accounting software tools (quick book). Financial records are entered monthly. The institution prepares monthly financial reports that are submitted to the ELCT/NWD treasurer for annual external auditing. They scored 25 out of 32 (78%) of total score.

Infrastructure and Assets: The institution has enough land for expansion. Facilities are available but not well spaced due to the increased number of students. They have no fax facilities but telephone, computers, printer and software are available. They share internet connection with the hospital; however the connection is not very fast. They scored 12 out of 16 (75%).

Advocacy, Networking and media relation: Ndolage has not been registered by any network. There is a weak data base for students and when internet is accessible they advertise the school through different local and national media. Some research is conducted by students as a part of their course fulfilment. Ndolage scored 6 out of 16 (38%).

3.3 Rubya School of Nursing and Midwifery

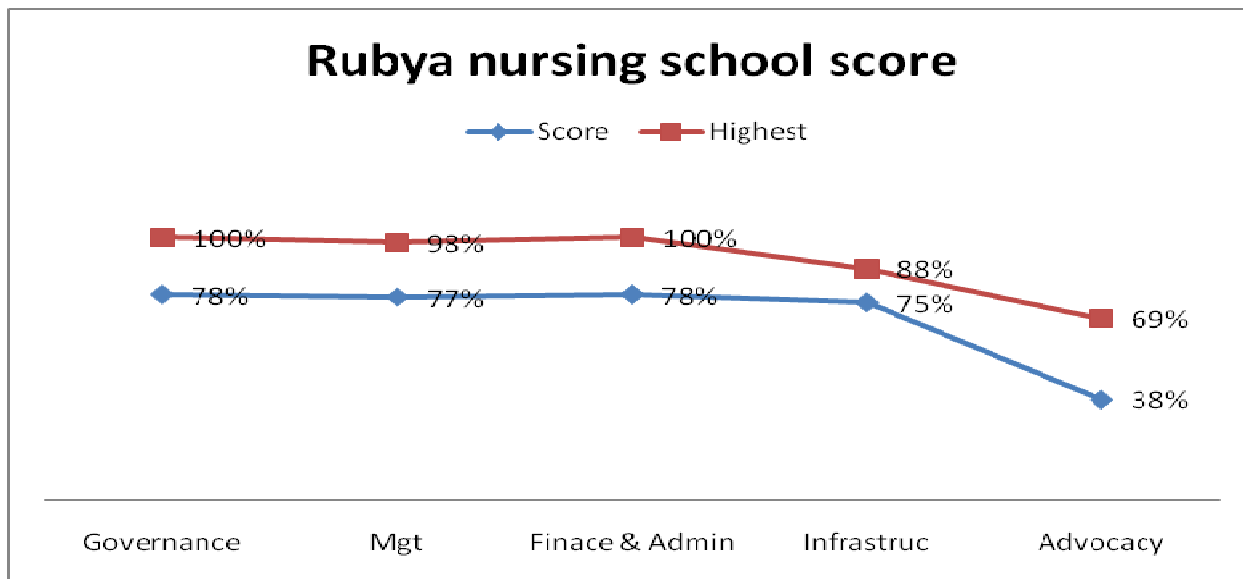
Introduction: Rubya School of Nursing and Midwifery is affiliated to TEC and located in Muleba district in Kagera region (rubyanursing@yahoo.com). There are 11 staff members and about 107 students (no disaggregation by course and gender made) offering nursing and midwifery courses.

The institutions' annual budget is as follows: in 2007, income: 179,381,044 exp: 133,372,542; in 2008, income was 157,197,107 expenditure 154,070,451 and in 2009 the income was 190,636,100 and expenditure was 199,911,240. The main sources of funding are the school fees from the students, donation and self-reliance projects. The self assessment form was filled in by the Principal tutor, class tutor and academic tutor

Summary of overall score

| Rubya School of Nursing and Midwifery | | | |
|---------------------------------------|-------|-----------|-----|
| | Score | Max Score | % |
| Governance | 34 | 40 | 85% |
| Mgt Process | 37 | 48 | 77% |
| Finance & Admin | 21 | 32 | 66% |
| Infrastructure & Assets | 7 | 16 | 44% |
| Advocacy & Networking | 7 | 16 | 44% |
| Total | 106 | 152 | 70% |

Comparison of Rubya Score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail

Governance: Rubya School of Nursing and Midwifery has a written constitution whose quality needs improvement. The institution is accredited by NACTE. They have a School board of governors consisting of members who represent parents, government, nursing services owner of the school, medical services

and school education. As to how often they met is not mentioned and the duration of the board is 3-5 years. Promotion of staff is based on merit and is weak.

Rubya Health training institution has a clear mission and vision statement. On governance, Rubya scored 34 out of 40 (85%).

Managerial process: Rubya Health training institution has a clear organogram which shows lines of responsibilities. Adequate education and skills are proved by NACTE and follow the recruitment curriculum (need to be verified). The institution has weak objectives that are not SMART. To ensure quality they use external examiners, but monitoring data faces some difficulties e.g. with system to collect, analyze, document, data, data quality and usage of collected data for decision making (design and function may need to be further verified). On managerial process, they scored 37 out of 48 (77%).

Finance and administration: Rubya has a bank account but may still need improvements and guidelines on selection of signatories. Accessible financial and administrative manual is weak. Accounting tools such as cheque books are available, accounting software are seldom used. Financial reports are prepared and conduct annual external audit are prepared and are of good quality (design and function verification). They scored 21 out of 32 (66%) of total score.

Infrastructure and Assets: The institution has its own land that they are in the process of developing it. Buildings are of poor quality and there are weak reliable telephone, fax facilities and IT infrastructure. Most of the infrastructure used by the school is owned by the hospital such as telephone, faxes, computers etc. They scored 7 out of 16 (44%) under infrastructure and assets.

Advocacy, Networking and media relation: Rubya Health Training Institution is not a member of any network. They work with media through advertisement, announcements through magazines and radio (e.g. RFA, QUIZERA, KASIBANTE) and notice boards. They scored 7 out of 16 (44%).

3.4 St. Magdalene Nursing School

Introduction: St. Magdalene Nursing School is affiliated to TEC and located in Missenyi district in Kagera region (st.magdanursing@yahoo.com). With 11 staff members, it has about 50 students per year (no disaggregation by course and sex was made) offering diploma in nursing. The institution was opened this year (2010) and their expected income is Tsh 809,600,000 and expected expenditure is Tsh 824,000,000. The main sources of funding are school fees, school farm and donors. The self assessment form was filled in by the Principal tutor, deputy principal tutor, (BSc) Nurse and tutor.

Summary of overall score

| St. Magdalene Nursing School | | | |
|-------------------------------------|------------|------------|------------|
| | Score | Max Score | % |
| Governance | 32 | 40 | 80% |
| Mgt Process | 32 | 48 | 67% |
| Finance & Admin | 31 | 32 | 97% |
| Infrastructure & Assets | 14 | 16 | 88% |
| Advocacy & Networking | 8 | 16 | 50% |
| Total | 117 | 152 | 77% |

Comparison of St. Magdalene Nursing School score and the highest score of all health training institutions

In subsections below, specific areas assessed are described in further detail

Governance: The institution has a written constitution but is not yet accredited by NACTE. The committee consists of members with different interests but do not meet on a regular basis. Promotion of staff was not reported; needing to be further verified (design and function). They have a mission and vision statement of good quality. On governance, St. Magdalene scored 32 out of 40 (80%).

Managerial process: St. Magdalene Nursing School has an organogram showing lines of responsibilities but they have not attached it as required. Recruitment of staff and students needs to be further verified. Since the school just started (2010) a long term plan, regular meetings and student leadership are only at a beginning level. They use a bench mark strategy to ensure data quality. On managerial process, they scored 32 out of 48 (67%).

Finance and administration: St. Magdalene has a bank account and guidelines on selection of signatories (more verification needed). Their financial and administrative manual is accessible to all staff, but has not been submitted as requested. Accounting tools are used, as well as excel software daily, they do also prepare financial reports and conduct annual external audit. They scored 31 out of 32 (97%) of total score. These scores needs to be further verified since the institutions is just started.

Infrastructure and Assets: The institution have own land that they are developing and facilities are adequate for lectures. More information on infrastructure and IT facilities needs to be provided. They scored 14 out of 16 (88%).

Advocacy, Networking and media relation: St. Magdalene Health Training Institution is a member of TNMC, TANA and TCMA (further information about these networks may need to be explored), but they do not yet have a data base for students since it is a new institution (2010). They work with media through

announcement at church gatherings, on the radio, TV and on official notice boards. They scored 8 out of 16 (50%).

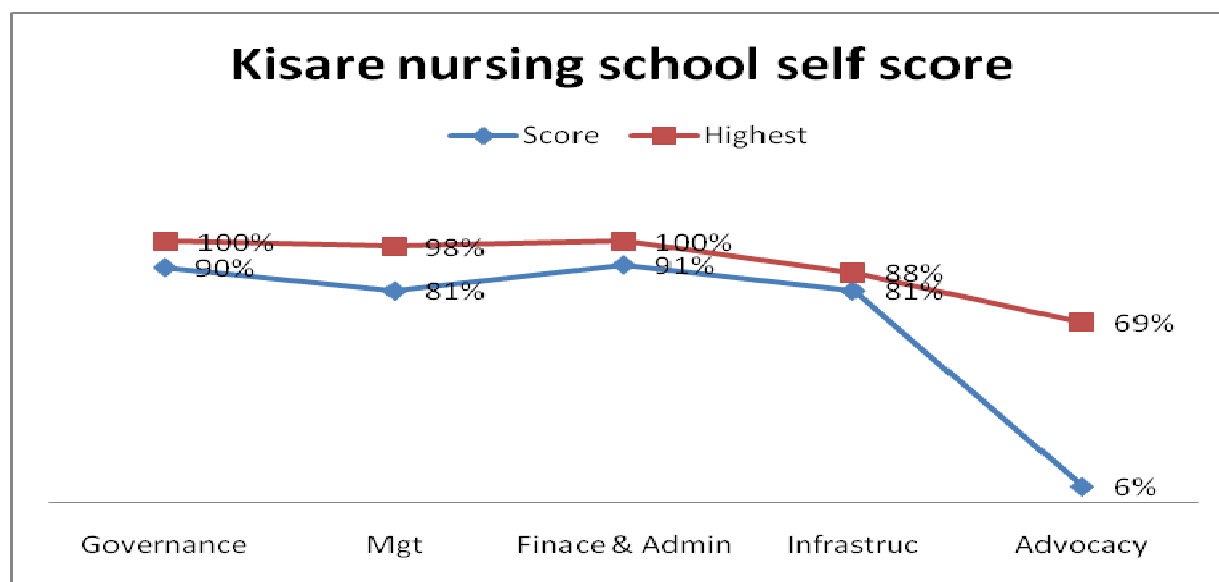
3.5 Kisare Nursing and Midwifery Training centre

Introduction: Kisare Nursing and Midwifery Training centre is affiliated to CCT and is located in Serengeti district in Mara region (kisaresnm@yahoo.com / nyerereddh@yahoo.com). Up to now the school has enrolled a total of 160 students; (2007 F: 38, M: 10, 2008 F: 50, M: 6 and in 2009 F: 40, M: 16). The present number of nurse tutors at the school is 7 with 2 clinical instructors, and 14 supporting staff, offering nursing and midwifery courses. The institutions' annual budget in 2006/07 was Tshs. 165,490,648. In year 2007/08 it increased to Tshs 194,938,429 and in 2008/2009 to Tshs. 292,619,100. For 2010/2011 the annual budget is Tshs. 300,061,680. The main sources of funding are the school fees from the students and some grant from the government. The self assessment form was filled by the schools' principal.

Summary of overall score

| Kisare Nursing and Midwifery Training Centre | | | |
|---|------------|------------|------------|
| | Score | Max Score | % |
| Governance | 36 | 40 | 90% |
| Mgt Process | 39 | 48 | 81% |
| Finance & Admin | 29 | 32 | 91% |
| Infrastructure & Assets | 13 | 16 | 81% |
| Advocacy & Networking | 1 | 16 | 6% |
| Total | 118 | 152 | 78% |

Comparison of Kisare Nursing and Midwifery Training Centre score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail

Governance: Kisare Nursing and Midwifery Training Centre constitution was written by the Mennonite church and has existed since 1992. Laws were adopted by the registrar of civil societies in the Ministry of Home Affairs since 1994. Kisare has a candidacy status for accreditation, and full registration stage III by the National Council for Technical Education. They have a governing board with representatives from the church, government and the community. Membership lasts for three years and members are selected by the church central committee. Membership does not interfere with managerial tasks. The promotion of staff system follows government system where delay is inevitable (further information on design and functioning needed). Their statement of mission is: *“All school, hospital staff and students will endeavour to facilitate and implement training activities through cooperation and collaboration with related sectors and communities.”*

Their vision statement is: *“To upgrade our school to diploma and degree programs so as to improve quality of care to our communities.”*

The Schools main objective is *“to equip the learners with adequate knowledge, skills and appropriate attitudes in promoting health, preventing diseases and caring for the sick as well as rehabilitating the debilitated individuals in all setting.”*

Kisares' Philosophy states: *“Every person is an individual human being with dignity and rights, and a total being composed of body, mind, and spirit, coming from a family, being part of community. Does not loose his/her dignity and rights because of his/her sickness.”*

On governance, Kisare scored 36 out of 40 (90%).

Managerial process: Kisare Health training institution has an organogram which shows clear lines of responsibilities. The institution has a high tutor/student ration of 1:20 and inadequate skill laboratory room for students. The recruitment of staff is clearly stated in the school five year strategic plans – 2005/10 and also present in 2011/2015, the recruitment follows ministry of health curriculum. Staff meetings are conducted every three months and students can raise their issues through their student council. Quality assurance is handled with external validation from NACTE and external examiners appointed by the ministry of health and social welfare. The system to collect, analyze and document data needs improvement and to ensure data quality is therefore difficult. On managerial process, they scored 39 out of 48 (81%).

Finance and administration: Kisare has a bank account and guidelines on selection of signatories. They have a senior accountant with advanced studies in banking and use government financial regulations, a part which is available to staff and attached to the filled questionnaire form. Guidelines and procedures for accounting are available and followed. Accounting tools are available and used but need to be updated. The institution also uses a computer, tally, but face difficulties using quick books. Reports are prepared and internal auditing is done. They scored 29 out of 32 (91%) of total score.

Infrastructure and Assets: The institution has adequate land for expansion, but buildings are inadequate and need more dormitories – 40 rooms, one skill lab room and two lecture rooms. They have telephone facility but no fax. Connection for internet is there but not enough computers for students and no website. They scored 13 out of 16 (81%).

Advocacy, Networking and media relation: Kisare Health Training Institution has no membership with any network and their student base is poorly kept. Relations with media are weak and no research conducted. They scored 1 out of 16 (6%).

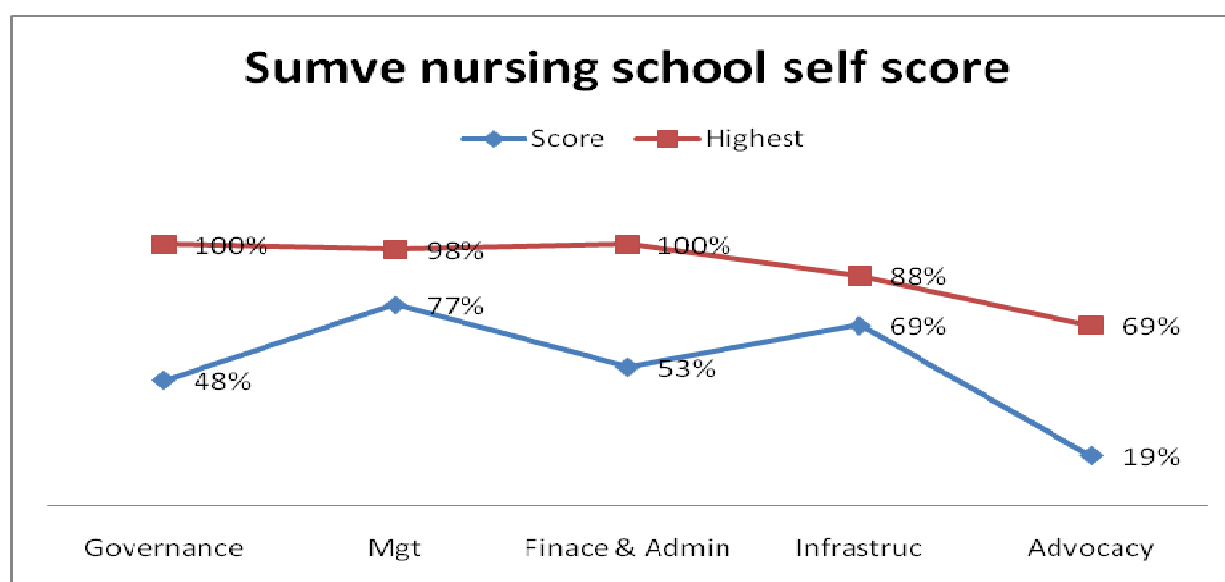
3.6 Sumve School of Nursing

Introduction: Sumve School of Nursing is affiliated to TEC and located in Kwimba district in Mwanza region (P.O Box 7 Mantare, Mwanza). With 11 staff members (5 tutors, 2 cooks, 1 warden, 2 guards, 1 tailor), Sumve has 110 students (male: 14 and female: 96) and offers nursing certificate. The institutions' annual budget was not given and their main source of funding is from the school fees from the students. The self assessment form was filled by the vice principal.

Summary of overall score

| Sumve School of Nursing | | | |
|--------------------------------|-----------|------------|------------|
| | Score | Max Score | % |
| Governance | 19 | 40 | 48% |
| Mgt Process | 37 | 48 | 77% |
| Finance & Admin | 17 | 32 | 53% |
| Infrastructure & Assets | 11 | 16 | 69% |
| Advocacy & Networking | 3 | 16 | 19% |
| Total | 99 | 152 | 65% |

Comparison of Sumve score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail;

Governance: Sumve School of nursing does not have a written constitution; laws are developed at the ministry of health and are adapted to the local situation by the school authority. The institution is fully registered with registration number REG/HAS/018. There is no board/committee. They claimed that promotion is done at the ministry of health. They have a mission and a vision statement. On governance, Sumve scored 19 out of 40 (48%).

Managerial process: Sumve Health training institution has an organogram and has a system for recruitment of staff (more information needed). Students are recruited through a joint committee with Sumve School of Nursing and archdiocese of Mwanza. The institution does not have a long term business plan, but regular staff meetings are conducted every Friday and students are able to raise

issues (more information on how this is done needed?). Monitoring and quality assurance may need to be further explained regarding design and functioning. On Managerial process, they scored 37 out of 48 (77%).

Finance and administration: Sumve has a bank account and guidelines on selection of signatories. The institution does not have a treasurer or accountant with sufficient knowledge and there is no financial and administrative manual. Guidelines for accounting are followed and accounting tools are used, but there is a weak accounting software. They scored 17 out of 32 (53%) of total score.

Infrastructure and Assets: The institution has its own land that they are developing it and buildings are adequate but quality of the buildings can still be improved. Most of the infrastructure is adequate but the IT infrastructure is of poor quality. They scored 11 out of 16 (69%).

Advocacy, Networking and media relation: Sumve Health Training Institution is not a member of any network. There is a data base for students. Relations with media are weak and no research is conducted. They scored 3 out of 16 (19%).

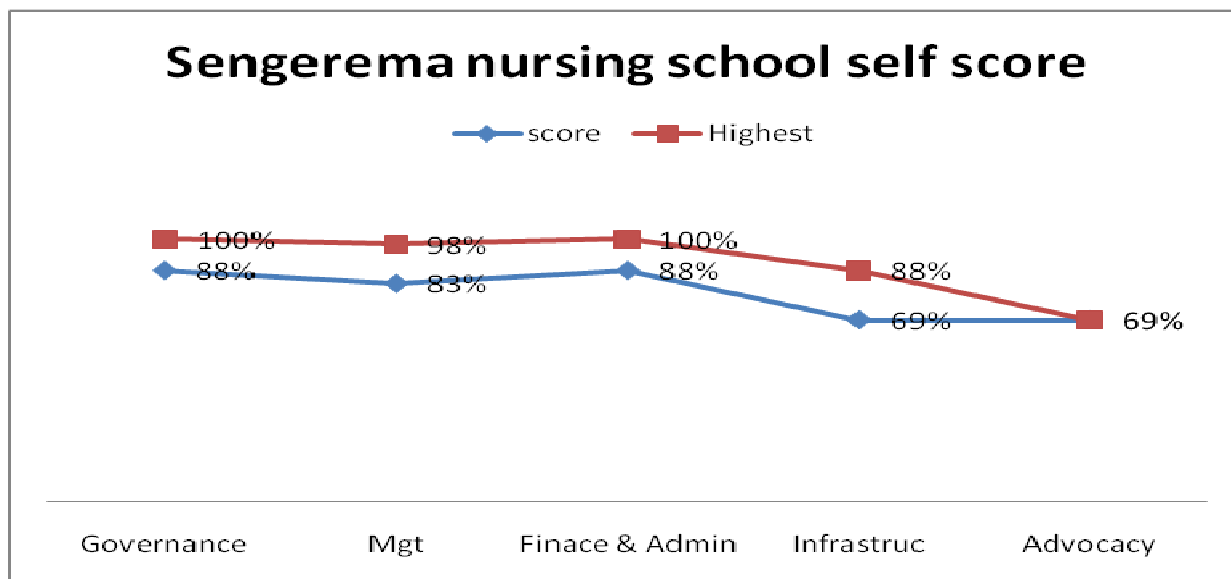
3.7 Sengerema School of Nursing

Introduction: Sengerema School of Nursing is affiliated to TEC and located in Sengerema district in Mwanza region (contact mobile number 0754 533169). With 21 staff members and approximately 200 students (no disaggregation made by sex given), they offer Diploma in Nursing. The main source of funding is the school fees from the students. The self assessment form was filled by the Principal Samuel Mathew and John Christopher.

Summary of overall score

| Sengerema School of Nursing | | | |
|------------------------------------|-------|-----------|-----|
| | Score | Max Score | % |
| Governance | 35 | 40 | 88% |
| Mgt Process | 40 | 48 | 83% |
| Finance & Admin | 28 | 32 | 88% |
| Infrastructure & Assets | 11 | 16 | 69% |
| Advocacy & Networking | 11 | 16 | 69% |
| Total | 125 | 152 | 82% |

Comparison of Sengerema nursing school score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail

Governance: Sengerema Health Training Institution has a constitution, but its quality needs to be improved. The institution is accredited by NACTE and has the registration number HAS/068, Ministry of Health. They have a board (composition needs to be further explored). They have no promotion system for staff. They have a mission and vision (further information on design and functioning needed). On governance, Sengerema School of Nursing scored 35 out of 40 (88%).

Managerial process: Sengerema school of nursing has an organogram, which was not attached. The institution has made some progress in a long term plan but in poor quality and weak objectives. Monitoring and Quality assurance needs to be verified, because justification to the score is not given. On managerial process, Sengerema scored 40 out of 48 (69%).

Finance and administration: Sengerema has a bank account and guidelines on selection of signatories are given. Accountants have efficient knowledge. Financial and Administrative manual is accessible to staff but in poor quality (no attachment given). Accounting tools are used but accounting software is only in progress. The score of 28 don't match the explanation. Sengerema school of nursing scored 28 out of 32 (88%) of total score.

Infrastructure and Assets: The institution has considerable progress of ownership of land and facilities. Telephone and fax facilities are only in considerable progress of accessibility by all staff. IT infrastructure quality can still be improved. They scored 11 out of 16 (69%).

Advocacy, Networking and media relation: Sengerema is a member of a network (name of network and type not given). Data base for students is still in a beginning stage. They scored 11 out of 16 (69%).

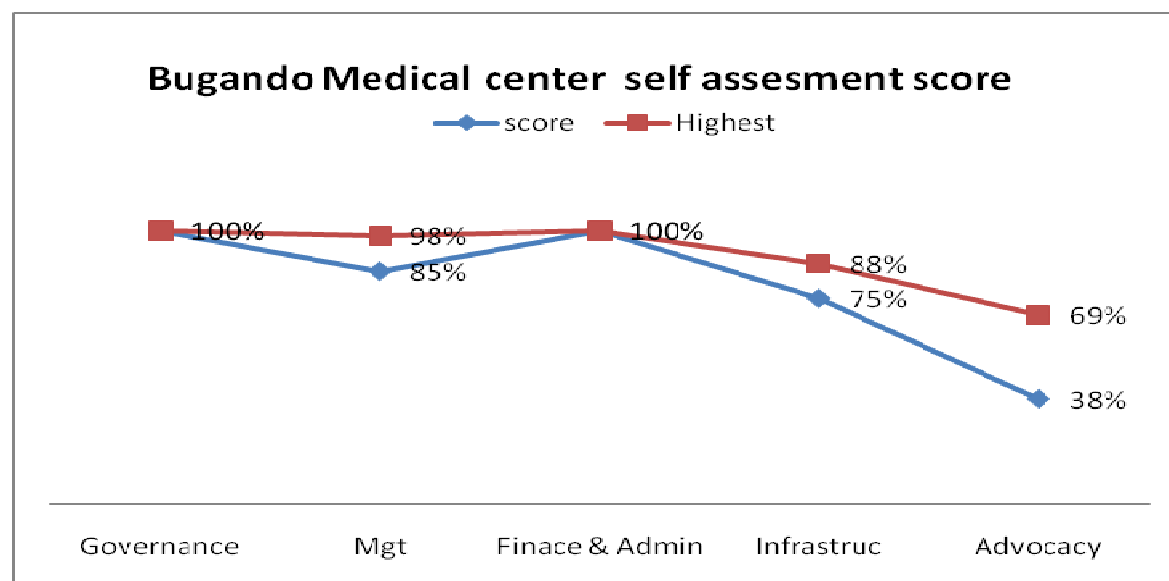
3.8 Bugando Medical Centre

Introduction: Bugando Medical Centre is affiliated to TEC and located in Mwanza (hospbugando@gmail.com). The institution started under BMC since 2009 and the annual budget started with T.Shs. 350,000,000.00. The Medical Centre has about 227 staff, Bugando offers Bachelor of Science in education (nursing and anaesthesia). The self assessment form was filled by Dr. Charles Majinge, Fr. Peter A. Mwanjonde, Ms. Anastasia Dinho Pole, Mr. Joachiam Wangabo, Sr. Suzan Batholomew, Sr. Evodiah T. Lupagaro, Sr. Benedicta Mwingizi and Sr. Viola Munishi.

Summary of overall score

| Bugando Medical Centre | | | |
|-------------------------|------------|------------|------------|
| | Score | Max Score | % |
| Governance | 40 | 40 | 100% |
| Mgt Process | 41 | 48 | 85% |
| Finance & Admin | 32 | 32 | 100% |
| Infrastructure & Assets | 12 | 16 | 75% |
| Advocacy & Networking | 6 | 16 | 38% |
| Total | 127 | 152 | 84% |

Comparison of Bugando score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail;

Governance: Bugando School of Nurse Teachers has a constitution and is accredited (accreditation status and number needs to be verified). Meetings are conducted regularly (composition need to be further explored). They have a promotion system for staff (further information on design and functioning needed). They have a mission and vision statement of good quality. On governance, Bugando scored 40 out of 40 (100%).

Managerial process: Bugando has an organogram, but it has not been attached as required. The system of recruitment of staff and students need verification (design and function). The institution share business plan and objectives with the hospital. Staff meetings are regular and students can raise their issues (functioning needs to be further explored).

System of monitoring and quality assurance needs to be identified and the system to collect, analyze and document data is manually kept. On Managerial process, they scored 41 out of 48 (85%).

Finance and administration: Bugando has a bank account and guidelines on selection of signatories. The institution has accountant with sufficient skills but the financial manual needs updating. Further information about accounting tools, guidelines and procedures for accounting and financial reports need to be put forward to verify their score 32 out of 32 (100%) of total score. However, the fact that the financial manual needs updating and account tools not reported, indicate doubts on the score of 100%.

Infrastructure and Assets: The institution have own land that they are developing it. Buildings are of poor quality. Infrastructure such as telephone and fax facilities are of good quality, IT infrastructure needs some improvements. They scored 12 out of 16 (75%).

Advocacy, Networking and media relation: Bugando Health Training Institute has not stated any membership of network (needs to be further explored, because one source says “BMS has a strong national and international network and donor network”). Some research is conducted. Student data base and relations with media are weak (needs to be further explored, source say “BMS has a strong national and international network and donor network”). They scored 6 out of 16 (38%).

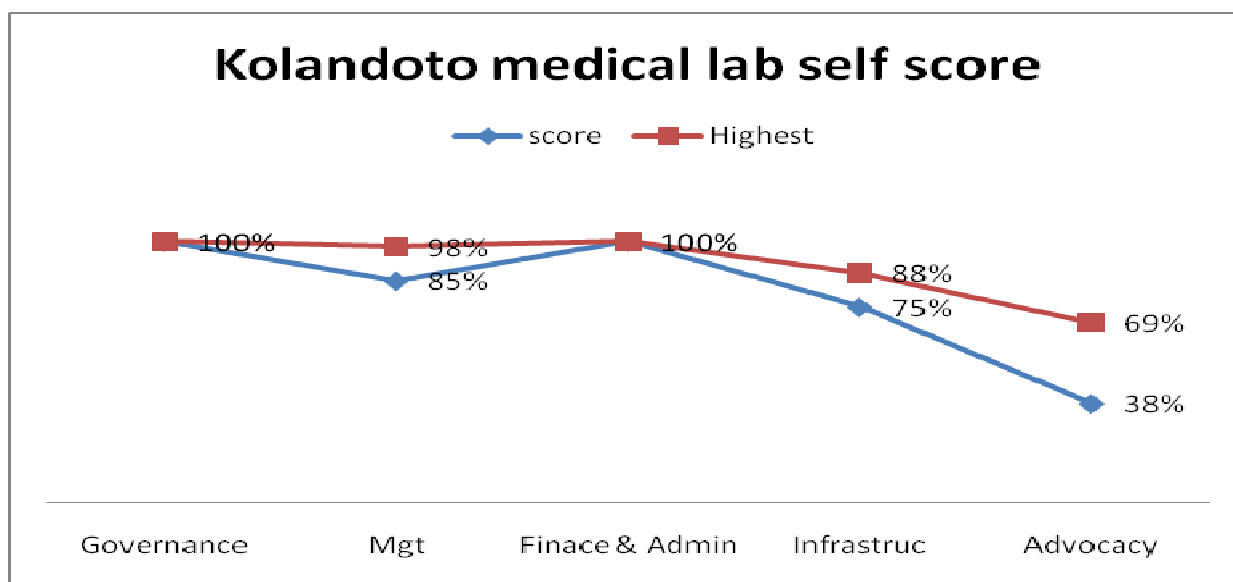
3.9 Kolandoto School of Medical Laboratory Assistant

Introduction: Kolandoto School of Medical Laboratory Assistant is affiliated to CCT and located in Kolandoto district in Shinyanga (Kolandotohealthschool@yahoo.com). With 10 staff members, it has about a total of 150 students (male: 87, female: 63) offering certificate in Medical Laboratory Assistant. The institutions annual budget in 2008/2009 the income was 89,505,500 and expenditure Tshs. 87.895,800. The main source of funding is the school fees from the students and subsidy from MOHSW amounting to Tshs 30,000/= per student per year. The self assessment form was filled by the Principal.

Summary of overall score

| Kolandoto School of Medical Laboratory Assistant | | | |
|---|------------|------------|------------|
| | Score | Max Score | % |
| Governance | 35 | 40 | 88% |
| Mgt Process | 39 | 48 | 81% |
| Finance & Admin | 27 | 32 | 84% |
| Infrastructure & Assets | 11 | 16 | 69% |
| Advocacy & Networking | 8 | 16 | 50% |
| Total | 120 | 152 | 79% |

Comparison of Kolandoto School of Medical Laboratory Assistant score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail

Governance: Kolandoto School of Medical Laboratory Assistant has a written constitution for its formation but can still be improved. Kolandoto is on provisional registration stage II, with registration Number HAS/060p. They have a board that meets (composition need to be further explored). They have a promotion system for their staff (further information on design and functioning needed). They have a mission statement of good quality but their vision statement needs improvements. On governance, they scored 35 out of 40 (88%).

Managerial process: Kolandoto Health training institution has an oraganogram that shows clear lines of responsibilities but may need some improvement (has not been attached as required). Recruitment of staff and of students needs to be further explored, design and functioning needed. Monitoring and quality assurance is in considerable progress but quality can still be improved, further information and verification may be needed. On managerial process, they scored 39 out of 48 (81%).

Finance and administration: Kolandoto School of Medical Laboratory Assistant has a bank account (Kolandoto School of Laboratory 024103002410) and guidelines on selection of signatories. The institution uses a financial and administrative manual, but it has not been attached as requested. They use accounting tools but a weak accounting software. Financial reports are prepared. They scored 27 out of 32 (84%) of total score.

Infrastructure and Assets: The institution has its own land that they are developing. There are poor telephone and fax facilities and satisfactory quality of IT infrastructure. They scored 11 out of 16 (69%).

Advocacy, Networking and media relation: Relations with media are weak and some research in students' field is conducted. They scored 8 out of 16 (50%).

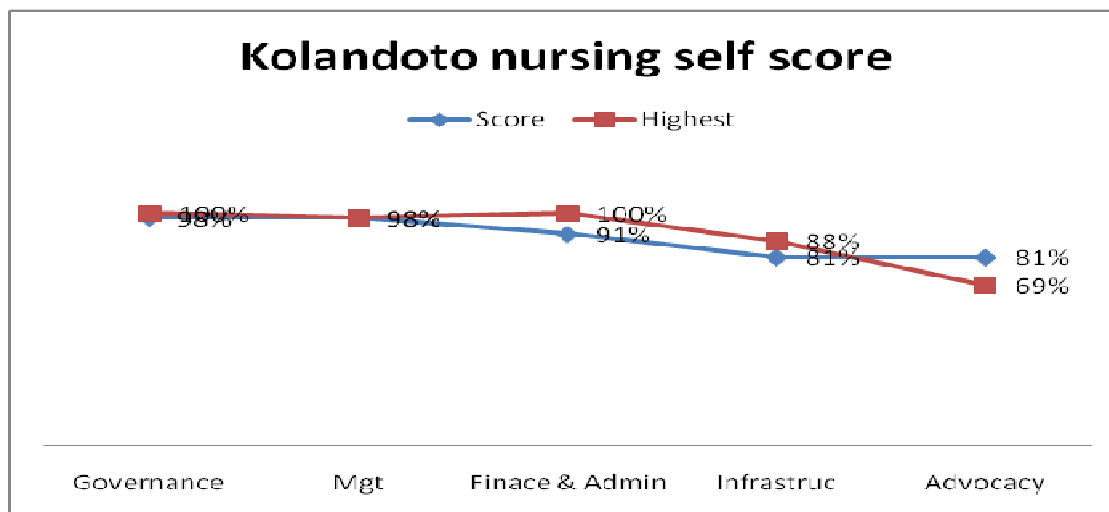
3.10 Kolandoto School of Nursing

Introduction: Kolandoto School of Nursing is affiliated to CCT and located in Kolandoto district in Shinyanga (no contact information). With 9 staff members, it has about 179 students (no disaggregation by course and sex made) offering diploma in nursing. The main sources of funding are the school fees from the students and contributions. The self assessment form was filled by the principal.

Summary of overall score

| Kolandoto School of Nursing | | | |
|------------------------------------|------------|------------|------------|
| | Score | Max Score | % |
| Governance | 39 | 40 | 98% |
| Mgt Process | 47 | 48 | 98% |
| Finance & Admin | 29 | 32 | 91% |
| Infrastructure & Assets | 13 | 16 | 81% |
| Advocacy & Networking | 13 | 16 | 81% |
| Total | 141 | 152 | 93% |

Comparison of Kolandoto School of Nursing score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail

Governance: Kolandoto School of Nursing has a written constitution and is registered using registration number HAS/008 by has full accreditation by NACTE. They have a board that meets regularly and representatives with varied interests (composition need to be further explored). They have promotion system for staff (further information on design and functioning needed). They have a mission and vision. On governance, Kolandoto scored 39 out of 40 (98%).

Managerial process: Kolandoto Health training institution has an organogram but it has not been attached as requested. Information about the design and function of recruitment of staff is needed. The institution has a long term plan with SMART objectives. Regular meetings are conducted (more information on composition needed). Monitoring and quality assurance is of very good quality (further information of "how?" needs to be verified). On Managerial process, they scored 47 out of 48 (98%).

Finance and administration: Kolandoto has a bank account and guidelines on selection of guidelines (further information of selection). The institution has an administration manual and financial system (no attachment). Accounting tools are used but weak they have a weak accounting software. They scored 29 out of 32 (91%) of total score. The score seems to be high and yet not verified.

Infrastructure and Assets: The institution have own land that they are developing it. The institution has no fax facilities but use mobile phones. Kolandoto has IT personnel. They scored 13 out of 16 (81%).

Advocacy, Networking and media relation: Kolandoto to Health Training Institution is recognized by MOH & SW, in addition, they are also members of CSSC, TCMA and NACTE and there is a date base for students. They scored 13 out of 16 (81%).

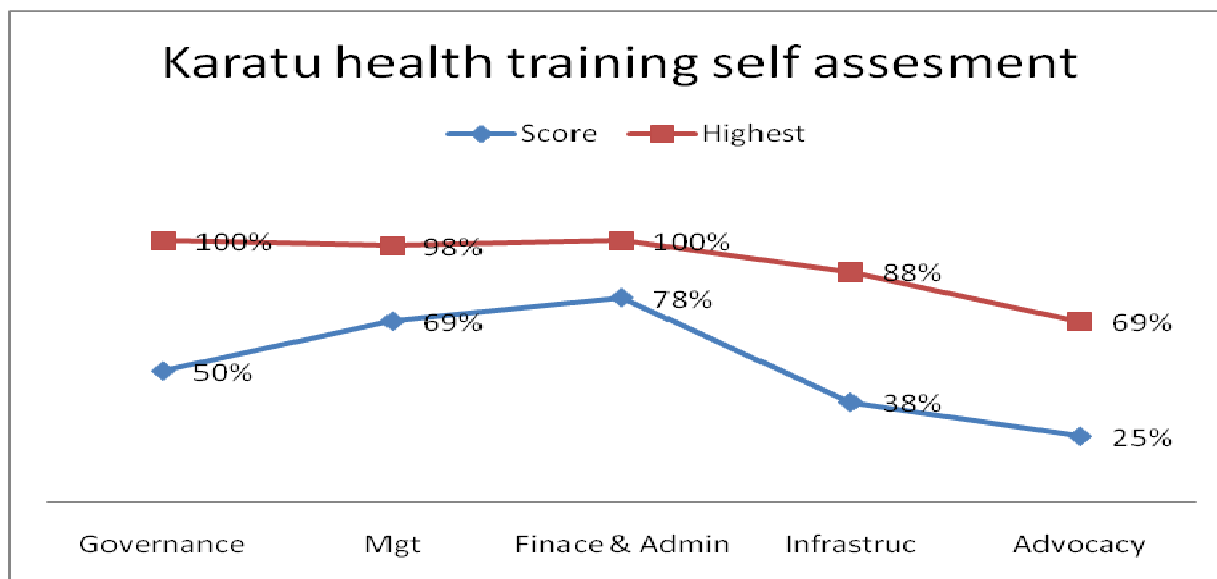
3.11 Karatu Health Training Institute

Introduction: Karatu Health Training Institute is affiliated to CCT and located in Karatu district in Arusha region (karatu-hosp@africaonline.co.tz). Number of staff members and number of students annually disaggregate by course and sex needs to be identified. The institution offers clinical officer training and a diploma in nursing. The annual budget has not been provided but their main source of income is from school fees. The self assessment form was filled by medical officer, in charge doctor, principal and hospital treasure.

Summary of overall score

| Karatu Health Training Institute | | | |
|----------------------------------|-----------|------------|------------|
| | Score | Max Score | % |
| Governance | 20 | 40 | 50% |
| Mgt Process | 33 | 48 | 69% |
| Finance & Admin | 25 | 32 | 78% |
| Infrastructure & Assets | 6 | 16 | 38% |
| Advocacy & Networking | 4 | 16 | 25% |
| Total | 88 | 152 | 58% |

Comparison of Karatu Health Training Institute score and the highest score of all health training institutions



In subsections below, specific areas assesed are described in further detail

Governance: Karatu does not have a written constitution but shall use the hospital constitution and are in process of developing and adopting laws. They have not been accredited by NACTE. The taskforce committee meets every month and its representatives are from local government and the diocese. Membership of the board is for 4 years. In their proposal write-up they have a system for promotion of staff, a mission and vision statement (but these have not been put into action). On governance, Karatu scored 20 out of 40 (50%).

Managerial process: The institution does not have an organogram but are planning one in their proposal write-up (verification to follow up the proposal write-up). They use the Diocesan Human Resource manual for recruitment of staff and are adopting the Ministry of Health selections guidelines for the recruitment of students.

They are lacking a long business plan. There is weak quality assurance system and most of the data is manually kept and data is reported to be used for monitoring and evaluation purpose. This may need to be verified. On Managerial process, they scored 33 out of 48 (69%).

Finance and administration: Karatu has a bank account with NMB-Karatu Branch and their guidelines on selection of signatories have been approved by higher level authority (Diocesan). The institute uses the hospital accountant and has adopted the hospital financial and administrative manual. Quick book accounting package are used and the reports are generated as a part of the hospital requirement. They scored 25 out of 32 (78%) of total score.

Infrastructure and Assets: The institution has its own land that they are developing it. (12 acres) and their buildings are still under construction. Most of the infrastructure used by the college is owned by the hospital such as telephone, faxes, computers etc. They scored 6 out of 16 (38%).

Advocacy, Networking and media relation: Karatu Health Training Institution is a member of TNMC, TMA & TCMA and has no student data base. Relations with media are weak, sometimes with news papers, and no research conducted. They scored 4 out of 16 (25%).

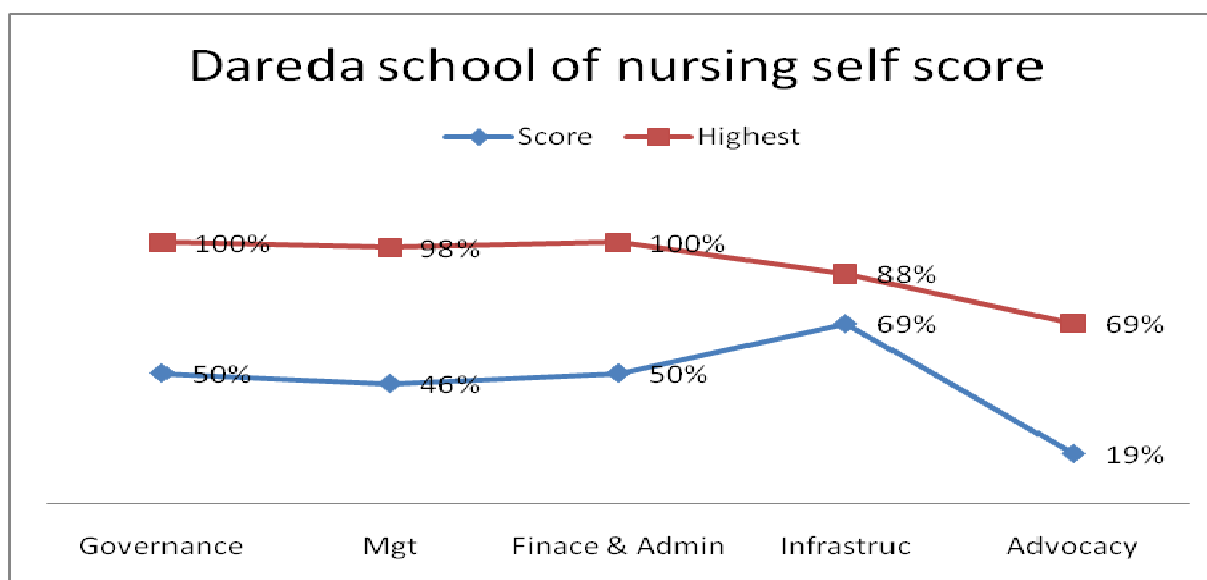
3.12 Dareda School of Nursing

Introduction: Dareda School of Nursing is affiliated to TEC and located in Babati district in Manyara (daredanurssch@yahoo.com). They have five qualified tutors and two are attending further studies (one at Bugando and the other at Muhimbili) and about 134 students (129 being females and 9 males). The course that is offered is Diploma in Nursing. The institutions' annual budget was in 2009/2010 Tshs 82,360,000 and for 2010/2011 it is Tsh. 102,255,500. The main sources of funding are the school fees from the students, Ministry of Health, donors and income generating project within the college. The self assessment form was filled by principal, tutor and diocesan health secretary.

Summary of overall score

| Dareda School of Nursing | | | |
|--------------------------|-------|-----------|-----|
| | Score | Max Score | % |
| Governance | 20 | 40 | 50% |
| Mgt Process | 22 | 48 | 46% |
| Finance & Admin | 16 | 32 | 50% |
| Infrastructure & Assets | 11 | 16 | 69% |
| Advocacy & Networking | 3 | 16 | 19% |
| Total | 72 | 152 | 47% |

Comparison of Dareda School of Nursing score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail

Governance: There is no constitution for the Dareda School of Nursing and laws need to be reviewed and approved by the authority. The school was accredited by NACTE with registration number REG/HAS/010. The committee has regular meetings in which they make decisions that guide the institutional development such as expansion of male dormitory and purchase of the new car from the donors. The committee members are from parish representative and all the tutors. They see the need of including members from the community, professionals, council and other stake holders, but this has not yet been accomplished. The current members of the committee are selected only by the administration of the College for a duration of the three years. They need to develop the process, make it function and consistence of the members and agree who will be responsible for its formation. Members have never

interfered with the administration/managerial tasks. The School of nursing staff members are employee of the hospital, the promotion is done by the hospital administration.

Mission statement: *“To create an environment that is conducive to students, learning and development of student’s nurses and staff.”* Vision statement: *“Improvement of the academic standards of the school in order to improve the health care of the community.”* On governance, Dareda scored 20 out of 40 (50%).

Managerial process: Dareda Health training institute has an organizational structure which needs to be approved by the Bishop of the Catholic Diocese of Mbulu. The School of Nursing has five qualified tutors at the level of Advanced Diploma, and where of two are currently undergoing the tutorship study at an Advanced Diploma Level.

The college wants to train more tutors in order to replace those who are going to retire. The Dareda School of Nursing is not recruiting the tutors, the school appoints the person for study and the Hospital provides the fees for the study. In this way the college is immature for the whole process/plans to developed human resources for the college and they acknowledge that this needs to be changed. The recruitment of students is a clear process: first they receive an application from the students. Second they are invited for entry exams. Thirdly, they are selected based on the exams results and National Form Four and Six Results focusing on science subjects as per government regulations instructions. But they see the need to establish a recruitment team which will include professionals who are out of school. They do not have a long term business plan for the college, as it is included in the hospital business plan. There are regular staff meetings and the college's administration is responsible to invite the staff for the meetings every quarter. Students have their own leadership, selected by themselves, and presenting their problems to the administration. The institution looks to establish meetings with students twice per year in the future. The college is producing six months report for the Ministry of Health and Social Welfare and NACTE based on students selection criteria, examination results, financial management and number of tutors available in the College. The external Examiners are appointed by MoHSW - Training Department.

Their annual report mainly includes: students performance, donor funds, and financial report for the Hospital Board Meeting. Data base for students is usually sent to MoHSW regularly. On Managerial process, they scored 22 out of 48 (46%).

Finance and administration: Dareda has a bank account (Dareda School of Nursing, Account no 4072300478 NMB Babati Branch) and they currently have three signatories, principal and two nursing tutors. These three people are acting in a cultural way. Clear guidelines for the organization are in need to be established. The organization has an assistant accountant but needs to improve his knowledge. (Have certificate of VETA from stage I - III). They use the hospital guidelines for the financial management of the school and it is not used by/accessible to the staff. Cash book, payment voucher are available and they are kept and up-to-date, they do not use the accounting software only to print the financial report. Dareda

School of Nursing usually prepare financial reports quarterly/half year and conducted annual audit has to be submitted to NACTE, Hospital Board and Donors. They scored 16 out of 32 (50%) of total score.

Infrastructure and Assets: The Dareda Nursing School is owned by the Catholic Diocese. They have three classes for the students, three buildings-dormitories, computer class, administration building and kitchen and dining. The dining room is very small, so the students take meals at interval because the space is inadequate. Telephone facilities are reliable and accessible to all staff but fax is not working. There are computers for administration block, printer and network and internet access only for the staff. They scored 11 out of 16 (69%).

Advocacy, Networking and media relation: Dareda School of Nursing is not a member of any network. They recently started feeding the nursing students data into the computer, particularly with student profiles. Relations with media are weak and no research conducted. They scored 3 out of 16 (19%).

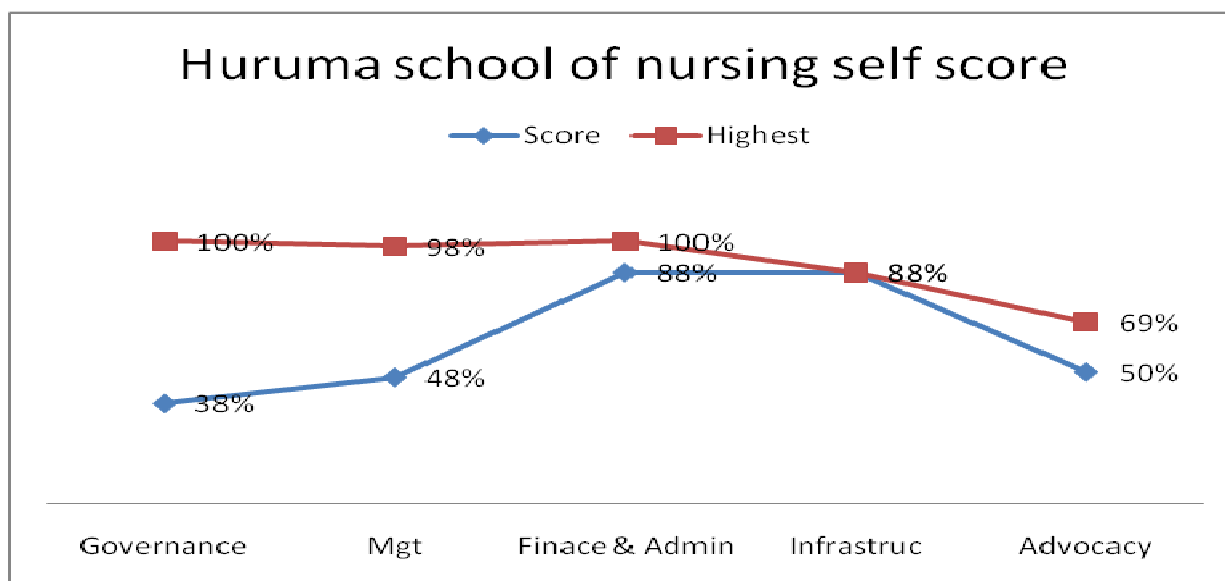
3.13 Huruma School of Nursing

Introduction: Huruma School of Nursing is affiliated to TEC and located in MKUU Rombo district in Kilimanjaro region (hurumainsetpe@yahoo.co.nz). With 11 fulltime tutors and 15 subordinates, it has 148 students (147 females and only 1 male) but also 71 female and 7 male in-service, offering diplomas in nursing. The main source of funding is the school fees from the students and Government grant. The annual budget in 2007 was Tshs. 100,582,870/=, 110,313,371/= in year 2008 and 130,593,201/= in 2009 in year. The self assessment form was filled by medical officer in-charge, hospital secretary, hospital accountant, hospital Matron and a tutor.

Summary of overall score

| Huruma School of Nursing | | | |
|---------------------------------|-----------|------------|------------|
| | Score | Max Score | % |
| Governance | 15 | 40 | 38% |
| Mgt Process | 23 | 48 | 48% |
| Finance & Admin | 28 | 32 | 88% |
| Infrastructure & Assets | 14 | 16 | 88% |
| Advocacy & Networking | 8 | 16 | 50% |
| Total | 88 | 152 | 58% |

Comparison of Huruma School of Nursing score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail

Governance: Huruma School of Nursing uses the Huruma hospital constitution and is registered by Tanzania Nurses and Midwives Council (TNMC) with provisional registration by National Council of Technical Education (NACTE). Laws are developed and are adopted by the church and MOHSW. The school board is weak; however, in Huruma Hospital one is established. They have mission and vision statements (further information on design and functioning needed). On governance, Huruma scored 15 out of 40 (38%).

Managerial process: Huruma Health training institute has a weak organogram and wishes to fulfil the NACTE requirements at a later stage. Huruma uses the hospital recruitment policy (Government recruitment policy) and follow the recruitment set by MOHSW curriculum. The institution doesn't have a long term plan or objectives, but regular staff meetings are conducted every third month and when necessary. There is a weak quality assurance system; and most of the data is manually kept.

No trained personnel are available to improve the system, therefore students' examinations results are discussed in the tutors committee. Collected data and information for decision making is only partially used. On Managerial process, they scored 23 out of 48 (48%).

Finance and administration: Huruma has a bank account and guidelines on selection and there are two compulsory signatories i.e. Medical Officer in charge of the hospital. There are 2 accountants, one with certificate in accounting and one with diploma. The institution uses administration manual and financial systems of the Huruma hospital and use accounting tools (i.e. cheque books) but no accounting software.

The reports are generated as part of the hospital requirements. They scored 28 out of 32 (88%) of total score.

Infrastructure and Assets: The institution have own land that they are developing, and acknowledge that more standards dormitories, libraries, labs skills class room and hall are needed. Telephone and fax facilities are accessible by all staff and Vodacom modern is used for internet services. They scored 14 out of 16 (88%).

Advocacy, Networking and media relation: Huruma Health Training Institution is a member of Tanzania Christian medical Association (TCMA), TNMC and NACTE and keep student data base manually. Relations with media are only invited during graduation and little research is conducted. They scored 8 out of 16 (50%).

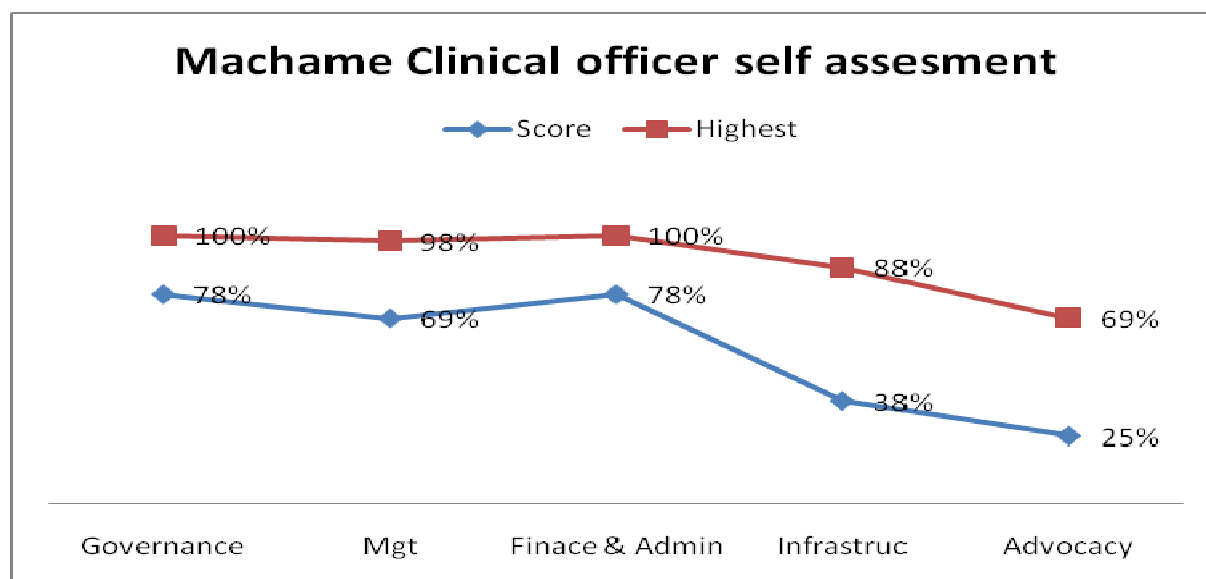
3.14 Machame Clinical Officers' Training Center

Introduction: Machame Clinical Officer Training Center is affiliated to CCT and located in Hai district in Kilimanjaro (machame-hospital@elt.org). With 16 fulltime staff, It has about 150 students (45 females and 105 males) offering clinical officer training course. The main source of funding is the school fees from the students. The self assessment form was filled by vice chancellor, hospital secretary and the principal.

Summary of overall score

| Machame Clinical Officers Tr. Centre | | | |
|---|-----------|------------|------------|
| | Score | Max Score | % |
| Governance | 31 | 40 | 78% |
| Mgt Process | 33 | 48 | 69% |
| Finance & Admin | 25 | 32 | 78% |
| Infrastructure & Assets | 6 | 16 | 38% |
| Advocacy & Networking | 4 | 16 | 25% |
| Total | 99 | 152 | 65% |

Comparison of Machame Clinical Officers Tr. Centre score and the highest score of all health training institutions



In subsections below, specific areas assesed are described in further detail

Governance: Machame Health Training Institution uses the hospital constitution and is registered using registration number HIAS/087. They have a board that meets three times a year and elected every four years (composition need to be further explored). They have promotion system for staff (further information on design and functioning needed). They have no mission or vision. On governance, Machame scored 31 out of 40 (78%).

Managerial process: Machame Health training institute uses the ministry of health student recruitment criterion. The institution does not have a long term plan, but regular staff meetings are conducted and students have leadership referred to as MUWATA through which they can raise issues to the college administration. There is weak quality assurance system and most of the data is manually kept and data is reported to be used for monitoring and evaluation purposes (not verified). On Managerial process, they scored 33 out of 48 (69%).

Finance and administration: Machame has a bank account and guidelines on selection of signatories. The institution uses administration manual and financial systems of the hospital and use the accounting system (Quick book). The reports are generated as part of the hospital. They scored 25 out of 32 (78%) of total score.

Infrastructure and Assets: The institution has own its land that they are now developing it. Most of the infrastructure used by the college is owned by the hospital such as telephone, faxes, computers etc. They scored 6 out of 16 (38%).

Advocacy, Networking and media relation: Machame Health Training Institute is a member of TNMC and keep student data base manually. Relations with media are weak and no research conducted. They scored 4 out of 16 (25%).

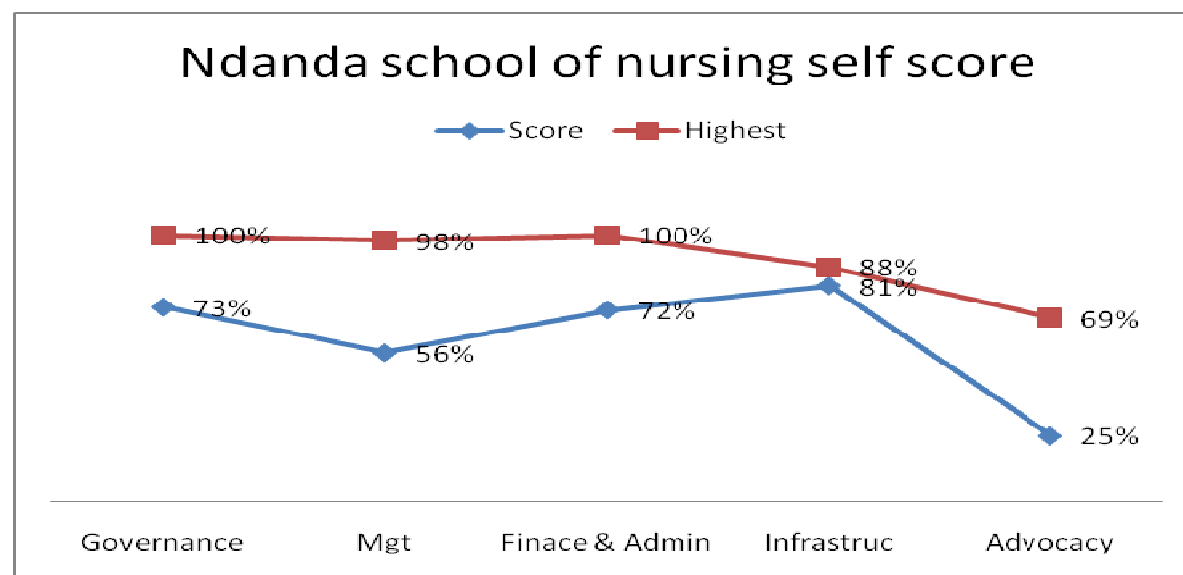
3.15 Ndanda School of Nursing

Introduction: Ndanda School of Nursing is affiliated to TEC and located in Masasi district in Mtwara (hospital@ndanda.net). It has about 105 students (female 77, male 28) offering nursing diploma. The institutions' annual budget in 2007 was Tshs.1,362,798,013, 1,650,379,430 in year 2008 and Tshs.1,827,804,083 for 2009. The main sources of funding are the school fees from the students, donations and government student's grant. The self assessment form was filled by doctor in charge, principal tutor, deputy principal tutor and the hospital administrator.

Summary of overall score

| Ndanda School of Nursing | | | |
|--------------------------|-----------|------------|------------|
| | Score | Max Score | % |
| Governance | 29 | 40 | 73% |
| Mgt Process | 27 | 48 | 56% |
| Finance & Admin | 23 | 32 | 72% |
| Infrastructure & Assets | 13 | 16 | 81% |
| Advocacy & Networking | 4 | 16 | 25% |
| Total | 96 | 152 | 63% |

Comparison of Ndanda School of Nursing score and the highest score of all health training institutions



In subsections below, specific areas assessed are described in further detail

Governance: Ndanda school of Nursing has a written constitution for its formation and laws are developed and adopted by the board of trustees. The institution is fully registered with NACTE but the accreditation process is still in process. They have a Management team and a board of trustees, but not yet an advisory board for the nursing school. They are only in a beginning stage of establishing a system for promotion of staff. The institution has a mission statement and the vision statement is concerned with quality but not quantity. On governance, Ndanda scored 29 out of 40 (73%).

Managerial process: Ndanda School of Nursing has an organization charts showing clear lines of responsibilities. All their tutors are nursing officers with training from CEDHA and Muhimbili nurse tutor training. There is no recruitment of staff, the intake of students follows Ministry procedures with intake examinations and interviews. Only the Hospital developed a strategic plan, Ndanda school of nursing has no multi-year business plan. The staff has regular meetings monthly and students can raise issues through student representation. For quality assurance they use national examinations, Tanzania nurses and midwives council and to ensure data quality they have regular teacher meetings on student results. Students are individually followed up and programs adjusted for them if necessary. This may need to be verified. On Managerial process, they scored 27 out of 48 (56%).

Finance and administration: Ndanda has a bank account and guidelines on selection of signatories, a double system is in place and these signatories are selected in consultation with the board. A local qualified accountant is needed and financial manual is not available but the administrative manual is approved by board. Accounting tools are used and accounting software (banana accounting software+ automated salary system. Daily Entry of data) and the exact accounting software is being introduced with patient billing (may need follow-up and verification). Reports are prepared for board and donors but the hospital is not yet externally audited. They scored 23 out of 32 (72%) of total score.

Infrastructure and Assets: The institution has its own land and that they are developing it; buildings are adequate but improvements are needed. There are no fixed telephone lines in the area. Good email/internet connections. Documents can be scanned and sent as PDF files and there are good mobile phone connections. There is free internet access for all staff and students in computer resource centre with usergate control software and Eset antivirus system. They scored 13 out of 16 (81%).

Advocacy, Networking and media relation: Ndanda Health Training Institution is participating in Southern Zonal Training Centre meetings. Data base for students are in process. Relations with media are weak and no research conducted. They scored 4 out of 16 (25%).

3.16 Kilimatinde Nurses' and Midwives' Training School

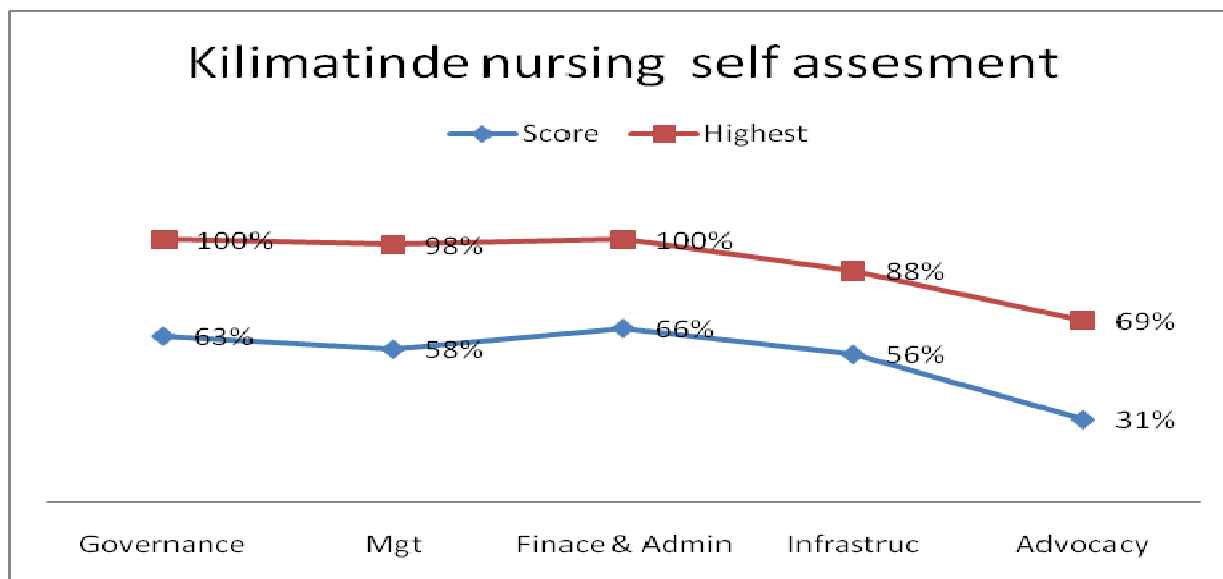
Introduction: Kilimatinde Nurses' and Midwives' Training School is affiliated to CCT and located in Manyoni district in Singida (0732-960765, 0714-080585). With 10 staff members (4 tutors, 1 secretary, 4 cooks and 1 driver) and about 123 students (1st year male: 10 and female: 54, 2nd year male: 5 and

female: 54), the institution offers nursing course and midwifery course. Kilimatindes' annual budget was in 2007-2008, income: 53,011,126 expenditure: 56,798,186. In 2008-2009, income: 67,900,000 expenditure; 88,686,150 and in year 2009-2010 the income: 116,400,000 expenditure.: 121,730,595. The main sources of funding are the school fees from the students and government grant which is 40,000 TSH/student annually. The self assessment form was filled by principal, vice principal and two tutors.

Summary of overall score

| Kilimatinde Nurses' and Midwives' Training School | | | |
|---|-----------|------------|------------|
| | Score | Max Score | % |
| Governance | 25 | 40 | 63% |
| Mgt Process | 28 | 48 | 58% |
| Finance & Admin | 21 | 32 | 66% |
| Infrastructure & Assets | 9 | 16 | 56% |
| Advocacy & Networking | 5 | 16 | 31% |
| Total | 88 | 152 | 58% |

Comparison of Kilimatinde Nurses' and Midwives' Training School score and the highest score of all health training institutions



In subsections below, specific areas assesed are described in further detail

Governance: Kilimatinde has a written constitution, training policy and curriculum developed by the Ministry of Health and Social Welfare. The school is not yet accredited by the National Council for Technical Education (NACTE) as it has not yet met the standards set. They have a board with members

from church, community, government and higher learning institutions in health and have had one meeting in January 2010. Due to financial constraints no other meeting has been conducted. They have a clear mission and vision. On governance, Kilimatinde scored 25 out of 40 (63%).

Managerial process: Kilimatinde Nursing School has no organogram showing responsibilities. Three members of their staff have diploma in Health personnel education from CEDHA. The institution does not have a system for recruitment of staff, but the school adopts government policy in recruiting students. There is no long term plan with SMART objectives. Regular staff meetings have been conducted and students can raise issues through meetings with teachers, students and their leaders. External Examiners are used for quality assurance at the end of the course for invigilation. On managerial process, they scored 28 out of 48 (58%).

Finance and administration: Kilimatinde has a bank account and guidelines on selection of signatories. The accountant lack sufficient qualifications and the institution do not have a financial and administrative manual. Guidelines and procedures are available for accounting and use accounting tools, transactions by cash books are done daily and monthly but there is no accounting software. Reports and annual external auditing is done. The reports are generated as part of the hospital. They scored 21 out of 32 (66%) of total score.

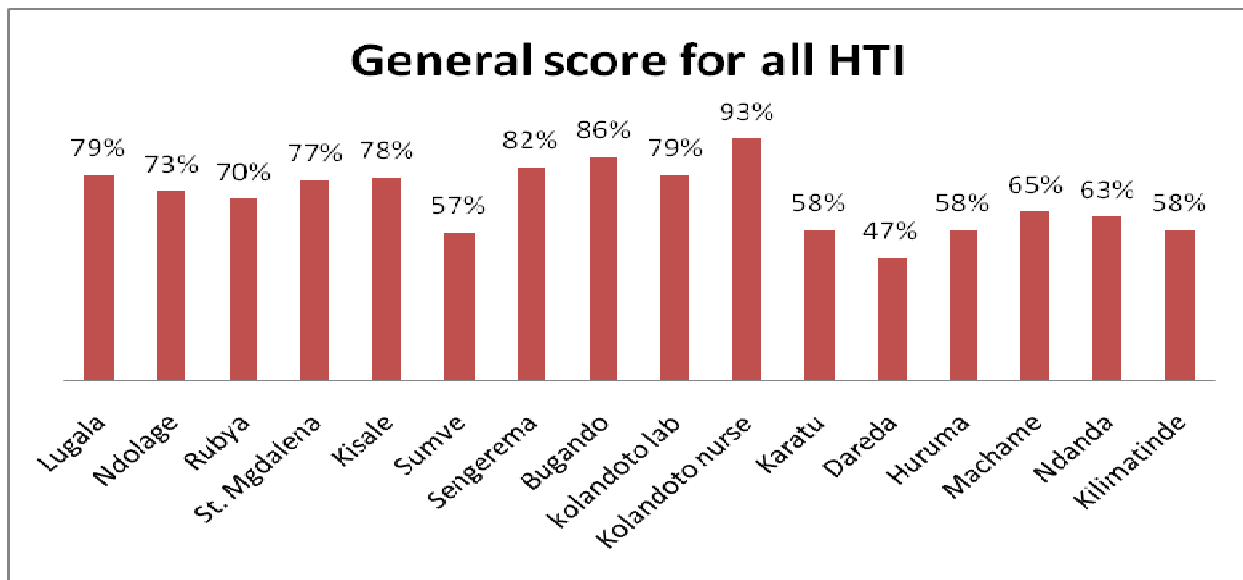
Infrastructure and Assets: The institution have own land that they are developing. Buildings are also available however, there is need for improvement to meet NACHTE standards and number of students. There are two computers, without internet access, one telephone but no fax. They scored 9 out of 16 (56%).

Advocacy, Networking and media relation: Kilimatinde School of nursing is not a member of any network, student data base is on hardware and the institution only uses media (radio) for special announcements e.g. advertising the beginning of new intake. No research is conducted. They scored 5 out of 16 (31%).

4. CONCLUSION

We conclude by showing a table with general score for all health training institutions. The highest score came from Kolandoto nursing school in Lake Zone followed by Bugando and Sengerema. The lowest score came from Dareda in the northern zone followed by Sumve in Mwanza in the lake zone. Whereas these score may be indicative of the inherent capacity, it is important to understand that it was self assessment thus verification of the information provided warrant consideration. The average highest score was 79% which was on finance and administration, followed by governance (75%) and last average score was advocacy (38%). The highest score was for governance and finance and administration (100%), 98% for managerial process (98%) and 88% for infrastructure. Even for the highest performer, advocacy and networking score was 69% indicating the need to support in the area.

However, the given score must be read with caution because attachments are missing to verify the scores. E.g. accreditation status and number need to be identified, meetings and board members composition need to be further explored and further information on design and functioning for the promotion system is needed. Therefore it is important to not only look at the highest score but to read the overviews for each HTI on every section. The quality and quantity of information the HTIs have given vary greatly and this can be recognized by the length of their summaries. The ones that are short will need more attention and time efforts on the physical assessments, than the ones that have already have provided a lot of information/comments and verified scores with attachments to the filled form.



Overview of all Health Training Institutions individual score (%) / section, and total (%) on the self-assessment

| Zone | Health Training Institution | Governance | Mgt Processes | Finance & Admin. | Infrastructure & Assets | Advocacy & Networking | Total |
|---------------|---|------------|---------------|------------------|-------------------------|-----------------------|------------|
| Eastern Zone | Lugala Nurses and Midwives Training School | 88% | 85% | 91% | 63% | 31% | 79% |
| Lake Zone | Ndolage School of Nursing | 78% | 77% | 78% | 75% | 38% | 73% |
| | Rubya School of Nursing and Midwifery | 85% | 77% | 66% | 44% | 44% | 70% |
| | St. Magdalene Nursing School | 80% | 67% | 97% | 88% | 50% | 77% |
| | Kisare Nursing School | 90% | 81% | 91% | 81% | 6% | 78% |
| | Sumve nursing School | 48% | 77% | 53% | 69% | 19% | 57% |
| | Sengerema School of Nursing | 88% | 83% | 88% | 69% | 69% | 82% |
| | Bugando Medical Centre | 100% | 85% | 100% | 75% | 38% | 86% |
| | Kolandoto School of Medical Laboratory | 88% | 81% | 84% | 69% | 50% | 79% |
| | Kolandoto School of Nursing | 98% | 98% | 91% | 81% | 81% | 93% |
| Northern Zone | Karatu Health Training Institution | 50% | 69% | 78% | 38% | 25% | 58% |
| | Dareda School of Nursing | 50% | 46% | 50% | 69% | 19% | 47% |
| | Huruma School of Nursing | 38% | 48% | 88% | 88% | 50% | 58% |
| | Machame clinical Officers Tr. Centre | 78% | 69% | 78% | 38% | 25% | 65% |
| Southern Zone | Ndanda School of Nursing (St.Bened.H) | 73% | 56% | 72% | 81% | 25% | 63% |
| Western Zone | Kilimatinde Nurses and Midwives Training School | 63% | 58% | 66% | 56% | 31% | 58% |
| | Average: | 75% | 72% | 79% | 68% | 38% | |
| | Highest: | 100% | 98% | 100% | 88% | 69% | |
| | Lowest: | 38% | 46% | 50% | 38% | 6% | |

List of Health Training Institutions that filled out the questionnaire, sorted by CSSC zone and region

| Zone | Region | Health Training Institution (HTI) | District | CCT/TEC | Course offered |
|---------------|---------------|---|------------------------------------|---------|--|
| Eastern Zone | Morogoro | Lugala Nurses and Midwives Training School | Ulanga | CCT | Certificate |
| | | | | | |
| Lake Zone | Kagera | Ndolage School of Nursing | Kamachumo-Muleba | CCT | Diploma in Nursing |
| | | Rubya School of Nursing and Midwifery | Muleba | TEC | Nursing and Midwifery |
| | | St. Magdalene Nursing Shool | Missenyi | TEC | Diploma in Nursing |
| | Mara | Kisare Nursing School | Serengeti | CCT | Certificate in Nursing |
| | Mwanza | Sumve nursing School | Kwimba | TEC | Certificate in Nursing |
| | | Sengerema School of Nursing | Sengerema | TEC | Diploma in Nursing |
| | | Bugando Medical centre | Bugando | TEC | Bachelor of Science in Nursing Education - Anaesthesia |
| | Shinyanga | Kolandoto School of Medical Laboratory | Kolandoto | CCT | Certificate in Medical Laboratory Assistant |
| | | Kolandoto School of Nursing | Kolandoto | CCT | Diploma in Nursing |
| | Northern Zone | Arusha | Karatu Health Training Institution | | |
| Manyara | | Dareda School of Nursing | Babati | TEC | Diploma in Nursing |
| Kilimanjaro | | Huruma School of Nursing | MKUU Rombo | TEC | Diploma in Nursing |
| | | Machame clinical Officers Tr. Centre | Hai | CCT | Clinical Officer Training |
| Southern Zone | Mtwara | Ndanda School of Nursing (St.Bened.H) | Masasi | TEC | Diploma in Nursing |
| Western Zone | Singida | Kilimatinde Nurses and Midwives Training School | Manyoni | CCT | Nursing and Midwifery |

5. APPENDICES

Experience in using OCA tool

The Organizational Capacity Assessment was developed by Human Development Trust (www.hdt.or.tz) for the first time in 2007 while undertaking a capacity building project in Botswana under the American International Health Alliance (AIHA). It was developed from the experience that HDT has on capacity development in Tanzania. It was developed after reviewing other available tools and using the accumulated experience from HDT, both numerical and qualitative variables were included in the tool. After development of the tool, HDT has used it in Botswana, Tanzania mainland and in Zanzibar. The tool has been modified to suit the level of organization.

The tool has been made in excel format with formulas with two pages, the first page is the explanation on the use of tool and the second page is the actual tool. The first sheet is self explanatory on how the tool should be used, which aims to guide the use and create consistency on the use of the tool across different settings.

Use of the tool has in principle been useful for both the assessor and the institutions being assessed. On the first hand it reminds the institution on critical reflection on various performance sections and what they need to do in future. For the assessor, one has to be careful on how to ask questions so that you are not interpreted as policing, but rather intending to be precise and ensure that you all have the same understanding and develop reliable information. The user, needs to accept the work load to review the documentations provided to ensure the quality of the same.

At the end of the tool, it provides for total score and the opportunity to discuss with the institution on their preferred next score. This is only useful when there is intention to further develop the capacity of the institution. Discussion can also be done for each of the areas assessed and scores decided which the organization should be working towards. The OCA tool is inserted below. To open the tool double click the icon.



OCA for nuffic.xls