



CASE STUDY

Successfully Transitioning the Voluntary Medical Male Circumcision Online Training Hub



health

Department:
Health
REPUBLIC OF SOUTH AFRICA

G:ENESIS
UNLOCKING VALUE



Executive Summary

This case study will document the successful transition of South Africa's Voluntary Medical Male Circumcision (VMMC) Online Training Hub (OTH) from a United States Agency for International Development (USAID)-funded programme to a National Department of Health (NDoH) platform.

The OTH is a critical component of the NDoH's VMMC programme. A web-based platform, it provides theoretical training on clinical and management components of the circumcision programme. All VMMC service providers in South Africa must obtain an OTH certificate or a certificate from an accredited VMMC training provider to be deemed competent to participate in the programme.

The original OTH platform was developed and hosted by AIDSFree, a USAID-funded partner, and implemented in South Africa in 2017. With its financial support coming to an end in 2019, AIDSFree handed the OTH training platform over to the NDoH. NDoH IT experts imported the training content onto the internal [Knowledge Hub](#) platform. A dedicated task team introduced two new modules and worked with an audio-visual and recording company to revise the look, feel and content of the material. The IT experts also ensured the content would be useable across multiple devices.

In July 2021, the NDoH launched the South African Medical Association-accredited OTH course.

Under AIDSFree, 1,935 participants registered for the OTH training between July 2018 and March 2020. In that period, 892 participants completed the training, achieving a 46% completion rate. Since NDoH's takeover in July 2021 through December 2022, that number has soared to 5,072 registrations and 3,329 completions, at a 65% completion rate.

Province	OTH Completions July 2018 - March 2020	OTH Completions July 2021 - December 2022
Eastern Cape	8	169
Free State	31	469
Gauteng	179	576
Kwazulu-Natal	272	670
Limpopo	114	175
Mpumalanga	146	428
North West	96	506
Northern Cape	29	206
Western Cape	17	130
Total	892	3329



Introduction

In 2010, the South African government adopted VMMC as an additional HIV prevention strategy to halt the spread of HIV among men. VMMC has been shown to reduce HIV acquisition among heterosexual males by 60%, while their female partners receive indirect benefits (Auvert et al., 2008). It is both an efficacious biomedical prevention intervention and a cost-effective one under South Africa's Investment Case (South Africa Department of Health, South African National AIDS Council, 2016). The NDoH set ambitious targets of circumcising at least 80% of HIV-negative men by 2022 as part of the broader effort to achieve epidemic control.

In its effort to continuously improve VMMC services, the NDoH introduced the VMMC OTH in 2017. The web-based training platform was developed and hosted by the AIDSFree project. The project aimed to improve the quality and effectiveness of evidence-based HIV interventions, with funding from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) through USAID.

AIDSFree's OTH platform was designed to improve the skills and knowledge of clinicians and the non-clinical cadres involved in performing VMMC. Implemented in 12 sub-Saharan African countries, the platform consisted of eight modules that offered a theoretical training and an overview of the circumcision programme. This included a detailed study of the anatomy of the male genital organ as well as national guidance on the provision of a safe surgical circumcision procedure.

The eight modules included in the AIDSFree OTH platform

Module #	Module Topic
1	VMMC and HIV Infection
2	VMMC Data for Decision-Making
3	VMMC In-Service Communication and Counselling
4	Preparing for the MC Procedure
5	MC Procedures for Adolescents and Adults
6	Post-Procedure Care and Management of Complications
7	Infection Prevention and Control for VMMC
8	VMMC Quality Improvement

Facilitators were assigned to assist participants with any course challenges or technical glitches they encountered as they worked through their modules. A general discussion forum was available for the participants to engage on the overall course content and to seek advice where necessary. Additionally, the platform had a repository page that hosted reference materials, including standard operating procedures; information, education and communication materials; and policy and guidance documents.

The AIDSFree Project's OTH platform addressed several challenges the NDoH had confronted in its efforts to provide high-quality and standardised training across the country:

- Service delivery disruptions occurred whenever healthcare workers had to attend in-person trainings. The OTH offered health care workers an opportunity to remain in the facility and complete the training at their own convenience.
- Historically, VMMC training was conducted by PEPFAR training service providers, who often prioritised training provision in PEPFAR-supported districts. In addition, the training delivery method and quality could vary depending on the partner that conducted the training. OTH provided an opportunity to standardise the material and course delivery, ensuring country-wide uniformity.
- The OTH platform resolved concerns about training access for participants, as it was accessible on mobile phones, tablets and laptops and in both rural and urban settings.

In South Africa, all health care workers involved in the VMMC program are required to successfully complete the OTH training or be certified by an accredited VMMC training provider. To be deemed competent in VMMC, a participant must obtain an 80% pass mark for the theoretical course as well as an 80% pass mark on the overall final exam.

The OTH platform supplements the conventional classroom-based theoretical training, though it does not replace the practical hands-on training for clinicians. Upon completion of the online course, clinicians then proceed to practical sessions, where they are required to complete 10 circumcision cases under the supervision of a designated mentor. OTH platform participants are also provided with post-training mentoring tools and a trainee log sheet, both to be signed off by a clinical mentor or supervisor upon completion of the practical training.

The Transition

With USAID support coming to an end in September 2019, AIDSFree proposed handing the OTH project course material over to the NDoH. The NDoH seized the offer, both because of the value of the OTH content and the opportunity country ownership would offer to tailor the platform to South African users. National ownership was also important to mitigate potential VMMC training implementation challenges arising from the inevitable phasing out of PEPFAR support.

The NDoH was technologically well-positioned to take over responsibility for the OTH as it operated an existing Knowledge Hub Platform, which could house the course content. The NDoH's skilled IT experts received the training material from USAID in the form of Shareable Content Object Reference Model (SCROM) files – the collection of specifications for the digital educational product – in July 2020 for upload.

The NDoH then embarked on the process of revising the look, feel and content of the material. These are the steps taken to adapt the OTH into a wholly South African platform:

1. Forming a Task Team

To ensure a successful transition, the NDoH VMMC unit established a task team in September 2020 to oversee the year-long process. The task team included the NDoH's national VMMC program management unit, development agencies as well as leading training experts from PEPFAR partner organisations.

.....

2. Reviewing and Revising Existing Content

The task team launched a survey among a sample of previous OTH participants to gather their feedback about how to improve the platform. The survey asked participants what challenges they had faced, how the platform could be enhanced and if there were any additional modules that might be useful. The respondents requested a narrator who spoke with a South African tone and pronunciation. They also asked for visual materials that captured the experience within a South African health facility. This feedback ultimately helped to guide the OTH platform revisions.

The task team undertook a process of mainstreaming and customising the training material for the South African audience by aligning it to the country's national standards and guidelines and removing irrelevant material. They also drafted and updated the assessments that participants must take at the end of each module.

3. Building New Modules

Based on identified country needs, the task team added two additional modules: a data management and recording module and an infection prevention and control module, thereby increasing the total modules from eight to 10. This proved fortuitous, as the COVID-19 epidemic emerged during the transition.

4. Re-recording OTH Material

The task team commissioned an audio-visual and recording company to record the new and updated material using a narrator with a South African tone and pronunciation. The company had previous audio-visual and recording experience within the health space, which helped to ease the process. The NDoH IT experts simultaneously provided guidance on the audio-visual requirements for the NDoH Knowledge Hub platform to ensure functionality across different devices.

5. Improving the Technology

Meanwhile, the IT experts endeavoured to make sure the new OTH course would be highly efficient. The previous platform required 2GB of data to complete all of the modules, leading to a low course completion rate. The updated platform is intuitive, user friendly and zero-rated, which means it does not require participants to use any of their own data.

The IT team also developed a platform that is highly adaptable, ensuring that existing content could be rapidly updated and new modules could be easily integrated in the future.

6. Assigning Facilitators and boosting Participant Support

While the AIDSFree OTH platform provided some assistance to participants, the task team decided to increase that support. An expert facilitator, drawn either from the NDoH or a partner organisation, was assigned to each module, based on their content expertise. Participants receive the facilitator's details after they sign up for a course and users are encouraged to reach out to those experts for assistance in resolving any challenges they might experience. The facilitators also check on the progress of participants on a weekly basis and offer support when required.

The previous OTH platform included a general discussion forum, but the new NDoH platform built out fora for each module. This encourages participants to collaborate with each other or share challenges, ensuring they do not feel they are completing the course alone while also offering an additional outlet for gathering feedback.

In addition, the task team integrated a selection of documents, including guidelines and policies from the NDoH and WHO, offering additional, pertinent resources for participants looking to learn more about VMMC services. A list of VMMC facilities in each province is also provided.

7. Receiving Continuous Professional Development Accreditation

In May 2021, the newly recorded training content was submitted for Continuous Professional Development (CPD) accreditation. The South African Medical Association confirmed in August 2021 that clinicians would be accredited with 30 CPD points upon successfully completing the course. This was a necessary step to increase course uptake as well as a welcome stamp of approval for the work done by the NDoH and its partners.

8. Launching the OTH Platform

While a thorough, year-long process was necessary to comprehensively migrate the platform, it also required OTH trainings to pause for eight months. By July 2021, the new OTH platform was ready to launch, offering an opportunity to reassert the importance of the OTH, introduce the new features and encourage health care workers to take up the course.

The NDoH ensured there was a large audience, utilising human resources databases to send out emails to all relevant stakeholders beginning a month in advance. More than 1,500 participants attended the online, national launch.

Since that reintroduction, use and completion of the OTH training has increased significantly compared to the period when it was hosted by AIDSFree. Between July 2018 and March 2020, 1,935 participants registered and 892 completed the training, at a 46% completion rate. From the time that the NDoH relaunched the OTH in July 2021 through December 2022, 5,072 participants have registered and 3,392 have completed the training, achieving a 65% completion rate.



Lessons Learned

The NDoH's success in transitioning the OTH into a wholly South African platform offers the following lessons for governments and health ministries that might want to embark on a similar process:

1. Identify a skilled team to oversee the transition process

One of the first steps the NDoH took in the transition was to assign a core task team to oversee the process. The success of the transition hinged on the fact that the team included experts from each facet of the OTH, ensuring that all relevant issues were identified and addressed throughout the process.

2. Understand the needs of participants and tailor the content accordingly

The success of the OTH relies on the ability of clinicians and non-clinical cadres to absorb the material. That necessitated producing content that is contextually relevant and accommodates different learning styles. This effort was aided by hiring an audio-visual and recording company that had experience recording health-related trainings and could help produce content that was engaging and responded to a variety of participant capacities.

3. Coordinate closely and regularly with all relevant stakeholders

In addition to assembling a core task team, it is important that relevant stakeholders are included at each step in the process to identify potential challenges. That means integrating technology professionals and technical partners early, so that they can help map out the transition and lend critical input via regular meetings.

4. Build enthusiasm for the launch

While completion of the OTH is compulsory, it was important to build excitement among health care workers to take advantage of the NDoH OTH platform. The NDoH was able to generate enthusiasm by inviting all relevant stakeholders while highlighting the updated features of the OTH, including improvements that were a direct response to the suggestions of previous participants.



health

Department:
Health
REPUBLIC OF SOUTH AFRICA

G:ENESIS
UNLOCKING VALUE

