



## Good Practices and Promising Interventions Series:

### *Enhancing Midwives Competencies to Deliver Quality Reproductive Health and Family Planning Services – the Midwife Mentoring and Monitoring (3Ms) and Supportive Supervision Plus (SSV+) Programs*<sup>1</sup>

#### **What are the 3Ms and SSV+ approaches?**

Midwife Mentoring and Monitoring (3Ms) and Supportive Supervision Plus (SSV+) are USAID-supported Department of Health (DOH) capacity building strategies that support the Government of the Philippines' Responsible Parenthood and Reproductive Health (RPRH) Law. 3Ms builds local capacity by recruiting successful experienced midwives to mentor those with less experience, while SSV+ complements 3Ms by providing supportive monitoring to ensure midwives follow proper procedures and protocols.

To enhance the clinical skills of public and private midwives, the 3Ms approach, implemented in partnership with the DOH Regional Offices (ROs) and Provincial Health Offices (PHOs), provides four primary types of support:



SSV+ provides technical support to ensure adherence to national standards and policies. Supervisory visits allow for a collegial transfer of knowledge and skills and serve as quality assurance measures by district hospitals, contributing to the overall quality improvement initiatives of a local government unit. The “plus” in SSV+ refers to the addition of a 3M mentor midwife onto the SSV team.

#### **Why is this practice important?**

Licensed midwives, often the first point of care in their communities, play a vital role in delivering affordable maternal, neonatal, and child health and nutrition (MNCHN) and family planning (FP) services. In 2017, for example, midwives provided 50 percent of antenatal care and attended 30 percent of all births in the Philippines,<sup>2</sup> making them a key actor in providing FP information and services. Midwives have also become central to the delivery of effective essential health services in general, particularly in rural areas. 3Ms and SSV+ aim to expand access to quality MNCHN care and FP services at the community level.

<sup>1</sup> USAID/Philippines Collaborating Learning and Adapting for Improved Health (CLAimHealth) Activity. 2021. Midwife Mentoring and Monitoring (3Ms) and Supportive Supervision Plus (SSV+): Locking In and Taking Off. Good Practices and Promising Interventions, Technical Series No. 7. Silver Spring, Maryland: Panagora Group. May 2021.

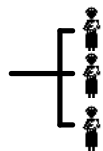
<sup>2</sup> Philippine Statistics Authority (PSA) and ICF. 2018. Philippines National Demographic and Health Survey 2017. Quezon City, Philippines, and Rockville, Maryland, USA: PSA and ICF.

## What are the results?

### Increased Midwife Mentors



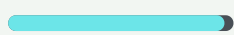
270 midwives trained and assessed as certified mentors



- Mentors assisted 865 midwives to adopt or revise their current midwifery practices.
- Local health offices accredited 87 (32%) of mentors as trainers.

### Changed Midwife FP Practices

A higher proportion of midwives provided FP counselling during antenatal care visits



96% 3Ms/SSV+ project areas<sup>3</sup>



78% Other areas

A higher proportion of midwives provided FP services



94% US government-assisted sites<sup>4</sup>



75% Other sites

### Improved Clinical and Soft Skills Proficiency

3Ms boosted confidence and proficiency in seven clinical skills:

- Antenatal care—initial and subsequent
- Essential intrapartum and newborn care
- Postpartum care
- FP counseling
- Exclusive breastfeeding
- Intrauterine device insertion/removal
- Progestin subdermal implant insertion/removal

### Ensured FP Informed Choice and Voluntarism Compliance

SSV+ teams monitored



167 clinics



461 FP acceptors



339 non-acceptors

### Elevated The Midwife Role

Inclusion of midwives in the SSV+ assessment team acknowledges the reality that most new birthing facilities are midwife-led, and their perspective adds value and enriches facility assessments.

### Paved a path to sustainability

**Inclusion in the midwife curriculum.** Member schools of the Association of the Philippines School of Midwifery adopted the 3Ms program for their four-year Bachelor of Science in Midwifery curriculum.

**DOH endorsement of 3Ms training materials.** DOH endorsed the final editions of the 3Ms manuals and accompanying tools and checklists. The 3Ms training module carries 30 continuing professional development (CPD) credit units by the Professional Regulations Commission.

**Strengthened public-private partnerships at the local level.** 3Ms and SSV+ shared knowledge, resources, and reports among private and public midwives and local health care providers. These professional relationships allowed for public-private service delivery networking, bound by a common objective to provide quality services and standards of care.

<sup>3</sup>Ferrer AJG, Hopanda JC, Carmelita, BMM. 2019. Assessing Impact of Midwife Mentoring and Monitoring Program on the Knowledge, Attitudes, and Practices of Maternal and Child Health and Nutrition Service Delivery Among Midwives in the Philippines. Unpublished.

<sup>4</sup>Ibid

***What are the key features of 3Ms?***



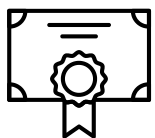
**Training courses.** 3Ms offers midwives valuable opportunities for continuing professional development, particularly in essential MCH and FP training. Training courses provide state-of-the-art technical updates on evidence-based midwifery practices.



**Checklists.** Mentors use the observation checklists that 3Ms developed as their main tool to observe mentee skills and assess competencies. Eleven observation checklists include step-by-step procedures and emphasize sequences that are easy to miss.



**Post-Training Monitoring Evaluation.** QMTs evaluate both mentors and mentees in periodic visits with subsequent recommendation for certification, for mentors who completed the five-day training and for mentees who are certified as having gained competencies in seven key skills areas.

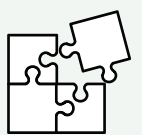


**PhilHealth accreditation.** 3Ms extends technical assistance to help midwives become individually accredited by PhilHealth. The accreditation process heightens awareness among midwives of the importance of standards of practice, guidelines, and treatment protocols. Accreditation also enables midwives to be reimbursed for services – another contribution to the goal of sustainability.

***What are the key features of SSV+?***



**PHO-led and anchored in service delivery networks (SDNs).** SSV+ is anchored in SDNs with member municipalities participating in quarterly supportive supervision visits



**Multidisciplinary team with clear team roles.** The SSV+ monitoring team includes a DOH regional supervisor, a midwives' organization local officer, a DOH representative, and a midwife who institute procedures to evaluate clinical competencies to ensure high quality care. Each member of the team was made responsible for a particular checklist.



**Elevated role for midwives.** Bringing midwives on board as professional members of the government assessment team helps move away from a tendency to underrate their capability and restrict them to working in lower level positions.

## **Recommendations for FP Program Managers**

- 1 Provide funding support to scale up 3Ms** in areas with high incidence of maternal deaths, increase the number of private birthing clinics, and support areas with limited access to midwifery schools.
- 2 Identify and designate a regional officer** who will certify 3Ms midwife-mentors as DOH trainers for midwives; serve as a resource for FP information for community-based health workers; and manage the quality assurance of public and private birthing centers.
- 3 Enact policies to strengthen access to training and education** for public and private midwives, as they not only provide quality care to mothers and their families, but can also can provide regular supportive supervision monitoring to ensure high quality of services at facilities.
- 4 Establish two-way data sharing** for better feedback mechanisms and iterative learning.
- 5 Provide funding support to local government units for implementation research** on scaling up and enhancing 3Ms and SSV+ programs.

The 3Ms and SSV+ approach is one of several good practices and promising interventions (GPPIs) led by the Philippine Government, USAID, and USAID implementing partners. GPPIs are identified and documented by USAID's Collaborating, Learning, & Adapting for Improved Health Project (CLAimHealth). This brief results from documentation of USAID's Community, Maternal, Neonatal, Child Health, and Nutrition Scale-Up (CMSU2) Project (2016–2019), implemented by the Integrated Midwives Association of the Philippines (IMAP). 3Ms and SSV+ were initially established by the CMSU1 Project (2012–2016), also implemented by IMAP.

In consultation with USAID's CMSU2 Project, CLAimHealth validated whether 3Ms and SSV+ were GPPIs through qualitative methods, a desk review, and content analysis of available records and reports. To date, 3Ms and SSV+ continue to be scaled up in Luzon and Visayas.

**Contact us to learn more about establishing or strengthening the 3Ms and SSV+ programs in your region or province:**



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