

**CHW Survey Indicators**

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|  | INDICATOR | DEFINITION | DATA SOURCE | FREQUENCY |
|  | **CHW TRAINING** |  |  |  |
| 1 | **Proportion of CHWs who received ICCM training.** | **Numerator:** Number of CHWs who have received a government sanctioned training on ICCM at any point  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question CB2 | Annual |
| 2 | **Proportion of CHWs who have received ICCM training in previous 12 months (initial or refresher)** | **Numerator:** Number of CHWs who have received either initial or refresher training in the 12 months preceding the survey  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question CB3 and 4 | Annual |
|  | **KEY HEALTH MESSAGES** |  |  |  |
| 3 | **Proportion of CHWs who are trained in WASH promotion who can state the five critical moments one should wash one`s hands** | **Numerator:** Number of CHWs trained in WASH promotion who can state the five critical moments one should wash ones hands (before preparing food, eating, feeding an infant, after defecation and cleaning a child who has defecated)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question KP6 | 6 months |
| 4 | **Proportion of CHWs trained in IYCF counselling who can state what are the current recommended breast feeding practices** | **Numerator:** Number of CHWs trained in IYCF counselling who can state the current recommendations for breast feeding practices (exclusive breastfeeding for the child's first six months; thereafter, nutritious complementary foods and continue breastfeeding up to the age of two years or beyond. Breast feed as soon as possible after birth)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question KP7 | 6 months |
| 5 | **Proportion on CHWs who can state what advice should be given to a mother caring for a sick infant in the home** | **Numerator:** Number of CHWs who can state what advice should be given to a mother caring for a sick infant in the home (continue feeding, offer more fluids including breast milk)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question KP8 | 6 months |
| 6 | **Proportion of CHWs who have carried out health promotion activities in last 1 month on at least one of the key health messages** | **Numerator:** Number of CHWs who have carried out health promotion activities in last 1 month on at least one of the key health messages (can be adapted to local requirements but should include the following topics: Breast feeding; hand washing; health seeking behaviour; care of the sick infant at home)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question KP5 | 6 months |
|  | **REFERRAL OF SICK CHILDREN** |  |  |  |
| 7 | **Proportion of CHWs who can give 3 reasons to refer a sick child to a health facility** | **Numerator:** Number of CHWs who can give 3 reasons to refer a sick child to a health facility (unable to eat/drink, unconscious, chest in-drawing, very slow skin pinch, bulging fontanel/stiff neck, convulsions, child vomits everything)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question R3 | 6 months |
| 8 | **Proportion of CHWS who can demonstrate how to correctly screen children for severe acute malnutrition using MUAC according to national guidelines** | **Numerator:** Number of CHWs who can correctly demonstrate how to screen children for severe acute malnutrition using MUAC according to national guidelines  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question R7 | 6 months |
| 9 | **Proportion of CHWs who screened children for severe acute malnutrition in the last 3 months** | **Numerator:** Number of CHWs who conducted screening of children for severe acute malnutrition in the last 3 months  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question R6 | 6 months |
| 10 | **Proportion of CHWs who referred children 0-59 months to health facility** **in the last 3 months** | **Numerator:** Number of CHWs who have referred children 0-59 months with danger signs to a health facility in the last 3 months  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question R2 | 6 months |
|  | **AVAILABILITY OF DRUGS USED FOR THE TREATMENT OF DIARRHOEA, PNEUMONIA AND MALARIA** | | |  |
| 11 | **Proportion of CHWs with no stock-out of ORS lasting more than 1 week during the past 3 months.** | **Numerator:** Number of CHWs with no stock-out of ORS and zinc lasting more than 1 week during the past 3 months.  **Denominator:** Total number of CHWs surveyed | CHW Survey, inventory, Question ME15 and 16 | 6 months |
| 12 | **Proportion of CHWs with no stock-out of zinc lasting more than 1 week during the past 3 months.** | **Numerator:** Number of CHWs with no stock-out of ORS and zinc lasting more than 1 week during the past 3 months.  **Denominator:** Total number of CHWs surveyed | CHW Survey, inventory, Question ME15 and 16 | 6 months |
| 13 | **Proportion of CHWs with no stock-out of antibiotics lasting more than 1 week during the past 3 months.** | **Numerator:** Number of CHWs with no stock-out of antibiotics lasting more than 1 week during the past 3 months.  **Denominator:** Total number of CHWs surveyed | CHW Survey, inventory, Question ME17 | 6 months |
| 14 | **Proportion of CHWs with no stock-out of appropriate antimalarials (as per local guidelines lasting more than 1 week during the past 3 months** | **Numerator:** Number of CHWs with no stock-out of appropriate antimalarials (as per local guidelines T lasting more than 1 week during the past 3 months  **Denominator:** Total number of CHWs surveyed | CHW Survey, inventory, Question ME18 | 6 months |
| 15 | **Proportion of CHWs with ICCM medications on the day of survey** | **Numerator:** Number of CHWs with complete ICCM medications, as per local drug list  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question ME1 to 4 |  |
| 16 | **Proportion of CHWs with complete ICCM kit** | **Numerator:** Number of CHWs with complete ICCM kit, as per local equipment list  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question ME5 to 14 | 6 months |
|  | **TREATMENT OF SICK CHILDREN** | | |  |
| 17 | **Proportion of CHWs trained in malaria case management who know the recommended treatment for malaria** | **Numerator:** Number of CHWs trained in malaria case management who know the recommended treatment for malaria (ACT, type to be specified locally)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question T1 | 6 months |
| 18 | **Proportion of CHWs** **trained in diarrhoea case management who know the recommended treatment for diarrhoea** | **Numerator:** Number of CHWs trained in diarrhoea case management who know the recommended treatment for diarrhoea (ORS +/- zinc, to be specified locally)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question T3 | 6 months |
| 19 | **Proportion of CHWs** **trained in pneumonia case management who know the recommended treatment for pneumonia** | **Numerator:** Number of CHWs trained in pneumonia case management who know the recommended treatment for pneumonia (first line antibiotic, to be specified locally)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question T2 | 6 months |
| 20 | **Proportion of CHWs trained in Low Birth Weight case management and Kangaroo Mother Care** **who know the recommended management of a low birth weight infant** | **Numerator:** Number of CHWs trained in Low Birth Weight case management and Kangaroo Mother Care who know the recommended management of a low birth weight infant (Kangaroo mother care, regular feeding)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question T4 | 6 months |
| 21 | **Proportion of CHWs who know the recommended treatment for severe malnutrition** | **Numerator:** Number of CHWs trained in management of severe malnutrition who know the recommended management of severe malnutrition (Plumpynut)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question T5 | 6 months |
| 22 | **Proportion of CHWs who perform post natal check-ups** | **Numerator:** Number of CHWs who carry out postnatal check-ups, both on the mother and infant  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question T7 | 6 months |
|  | **COVERAGE OF CCM** |  |  |  |
| 23 | **Proportion of CHWs who have undertaken ICCM activities in the last month** | **Numerator:** Number of CHWs who have undertaken ICCM activities in the last month, both treatment of sick children and health promotion  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question GC6 | 6 months |
| 24 | **Proportion of CHWs whose catchment area/population does not exceed acceptable limits** | **Numerator:** Number of CHWs whose catchment area/population does not exceed acceptable limits, calculated as a ratio (CHW per *x* population) to be set by the country.  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question GC2, 3 and 4 | 6 months |
|  | **SUPERVISION** | |  |  |
| 25 | **Proportion of CHWs who have attended a reporting meeting in the last three months** | **Numerator:** Number of CHWs who have attended a reporting meeting in the last three months (if reporting meetings are standard practice in the country)  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question S5 | 6 months |
| 26 | **Proportion of CHWs who have received a supervisory visit in the last three months.** | **Numerator:** Number of CHWs who have received a supervisory visit in the last three months.  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question S2 | 6 months |
| 27 | **Proportion of CHWs who have received a supervisory visit in the last three months during which registers and/or reports were reviewed** | **Numerator:** Number of CHWs that received at least 1 supervisory contact in the previous 3 months during which registers and/or reports were reviewed  **Denominator:** Number of CHWs surveyed | CHW Survey, Question S4 | 6 months |
| 28 | **Proportion of CHWs who have received a supervisory visit in the last three months which involved an observation of care** | **Numerator:** Number of CHWs that received at least 1 supervisory contact during the prior 3 months which involved an observation of care  **Denominator**: Number of CHWs surveyed | CHW Survey, Question S4 | 6 months |
|  | **DOCUMENTATION** |  |  |  |
| 29 | **Proportion of CHWs with up to date ICCM job aide** | **Numerator:** Number of CHWs in possession of up to date MoH sanctioned ICCM protocol  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question M1 |  |
| 30 | **Proportion of CHWs with an up to date register** | **Numerator:** Number of CHWs with an up to date register  **Denominator:** Total number of CHWs surveyed | CHW Survey, Question M2 |  |

**References**

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