Minimum Package of Activities (MPA 10)

Self Assessment Tools



June 09











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Self Assessment Tool for National Nutrition Program Staff

The self assessment tool will be used by National Nutrition Program Managers on a quarterly basis to assess NNP staff's performance.

How to use the tool

1. NNP Managers present assessment tool

The assessment tool provides the opportunity for NNP Managers and program staff to identify which activities are going well and which activities need strengthening. It also allows the NNP team to work together to identify ways to strengthen activities and agree on actions.

NNP program staff work individually to complete the form, and then use the form to discuss with the NNP managers.

2. NNP mangers presents and explains assessment form. Give a copy to each NNP staff

The self-assessment tool is divided into 3 columns:

First column provides the nutrition actions

Second column asks you to rate yourself. The rating is divided as following:

- 0 = insufficient
- 1 = fair
- 2 = good
- 3 = very good
- 4 = excellent

For each section rate all items included in each section and add the scores to obtain the total for each section. At the end, sum up the sub totals of each section to obtain the total.

Third column asks you to identify follow up actions section

When the NNP program staff have completed the form – discuss the results in the large group. Give praise for activities that are going well and discuss activities that are not going well. Identify actions to improve the areas that are not going well.

The NNP Managers will keep a record of the recommended actions, follow up on progress and discuss at the next assessment .The self assessment can be conducted quarterly.

Self Assessment Tool for NNP Staff

Key Action	Rating*	Recommended Actions
1. Monitoring and supervision.		
Provincial and district HIS data reviewed before supervision plan developed. Priority districts identified according to activity reports and HIS data		
Quarterly supervision plan developed and approved by manager		
All monitoring and supervision of MPA 10 activities at provincial and district level conducted as planned during the last quarter		
At provincial level previous district assessment forms reviewed and follow up actions discussed		
Self assessment tool completed by provincial and district staff, results discussed and areas for action identified and recorded		
Problems encountered during monitoring and supervision reported back to NNP manager at national level		
Copy of provincial self assessment form and FU actions provided to NNP manager at national level		
Total		
2. Recording and reporting		
Monthly HIS reports received from provinces on time		
Provinces slow to provide HIS data contacted and reminded		
HIS reports from provinces reviewed, analyzed and prompt feedback given to provinces		
Quarterly and yearly HIS data for each province reviewed and results summarized for each province with feedback.		
Electronic copy of summary feedback provided to provinces annually before Review Workshop		
Total		
3. MMN Stock management		
Annual forecasting for IFA and VAC submitted on time		
Quarterly stock reports requested and received from CMS		
Timely follow up of provinces reporting stock outs		
Quarterly stock inventory of VAC, IFA and Mebendazole conducted by NNP supervisor during supervision visits (stock balance, quality, expiry date, days of stock out)		

Key Action	Rating*	Recommended Actions
4. Bi annual vitamin A round		
Priority low coverage provinces and districts identified for support during VAC round and supervision plan discussed with Program Manager		
Participation in planning meeting with target provinces		
IEC materials distributed to all provinces as available		
Quantity, quality, expiry date and estimated requirements of vitamin A checked in each province before VAC round		
VAC round monitored by NNP staff in priority district and provinces		
VAC HIS data reviewed and prompt feedback given to provinces about performance		
Prompt follow up by NNP staff in provinces / districts with low coverage		
Results of National VAC round presented and discussed with provincial/district staff at Annual Review Workshop		
Total		
5. Special nutrition events		
Meeting held with priority provinces to plan activities for World Breast Feeding Week		
Adequate IEC materials distributed to all provinces		
Other events		
Total		
Overall score		
Rating: 0 = insufficient; 1 = fair; 2 =	aooq. 2 =	: very good: $V = excellent$

Follow up action plan

Signature Supervisor							
Person responsible							
Key Actions							
Date							

Self Assessment Tool for Provincial Supervisors

The self assessment tool will be used during supervision visit by the National Nutrition Program

How to use the tool

1. National Nutrition supervisor will present the tool to provincial supervisors

The assessment tool provides the opportunity for provincial supervisors to identify which nutrition activities are going well in their province and which activities need strengthening. It also allows the national nutrition program staff and provincial staff to work together to identify ways to strengthen activities and agree on some actions

Provincial supervisors work in a group to complete the form, and then use the form to discuss with the National Nutrition Program Supervisors.

2. NNP supervisor presents and explains the self assessment form. Give a copy to each participant

The self-assessment tool is divided into 3 columns:

First column provides the nutrition actions at provincial level

Second column asks you to rate yourself. The rating is divided as following:

- 0 = insufficient
- 1 = fair
- 2 = good
- 3 = very good
- 4 = excellent

For each section rate all items included in each section and add the scores to obtain the total of each section. At the end, sum up the sub totals of each section to obtain the total

<u>Third column</u> asks you to identify follow up actions for each section. Identify the sections with the lowest scores

When the self assessment form has been completed – discuss the results with the NNP supervisor Acknowledge the activities that are going well and praise staff for their efforts. Discuss activities that are not going well. Identify actions to improve the areas that are not going well.

The provincial supervisors and the NNP supervisors will keep a record of recommended actions and follow up on progress and discuss at the next supervision visit.

Rating: 0 = insufficient; 1 = fair; 2 = good; 3 = very good; 4 = excellent

Self Assessment Tool for provincial supervisors

Key Action	Rating*	Recommended Actions
1. Nutrition integrated into Annual AOP		
AOP includes budget for nutrition activities such as World Breast Feeding Week, VAC supplementation round		
Budget for nutrition activities requested and provided to districts in time		
Budget problems followed up promptly		
End of year review conducted with OD's		
Annual indicators and targets for nutrition set		
Total		
2. Monitoring and supervision		
HIS data reviewed and priority districts for monitoring identified		
Monitoring and supervision of MPA 10 activities at OD level conducted as planned during the last three months		
Self assessment tool provided to OD supervisor Results discussed and areas for action identified and recorded		
Problems encountered during monitoring and supervision reported back to provincial chief		
Copy of supervision report sent to provincial chief and filed.		
Total		
3. Recording and reporting		
Monthly HIS reports received from OD on time		
HIS reports from district level reviewed/ analyzed and feedback given to OD during monthly OD meeting		
Monthly HIS reports compiled and sent to national level on time		
4. Stock management		
Quarterly requests for VAC, IFA and other nutrition commodities received from OD's on time		
Quarterly requests for MMN supplies sent to CMS on time		
Quarterly inventory of VAC, IFA and Mebendazole conducted at OD stores (amount, quality, expiry date)		
Total		

Key Action	Rating*	Recommended Actions
5. Bi annual vitamin A round		
Meeting held with districts to discuss and plan VAC round		
Budget for vitamin A rounds distributed to districts on time		
IEC materials distributed to all districts as available		
Quantity of stock of vitamin A checked by OD and also quality and expiry data		
Low coverage OD monitored by provincial supervisors during VAC round		
VAC HIS data reviewed and prompt feedback given to districts about performance during monthly meeting		
Total		
6. Special nutrition events		
Meeting held to plan activities eg. for World Breast Feeding Week		
IEC materials distributed to all OD's		
Other events		
Total		
Overall score		
Rating: 0 = insufficient; 1 = fair; 2 =	good; 3 =	very good; 4 = excellent

Follow up action plan

Date	Key Actions	Person responsible	Signature Supervisor

Self Assessment Tool for District Supervisors

The self assessment tool is used during supervision visit by the Provincial Supervisor

How to use the tool

1. Provincial supervisor will present the tool to district supervisors

The assessment tool provides the opportunity for district supervisors to identify which nutrition activities are going well and which activities need strengthening. It also allows the district and provincial supervisors to work together to identify ways to strengthen activities and agree on actions

District supervisors work in a group to complete the form, and then use the form to discuss with the Provincial Supervisors.

2. Provincial supervisor presents and explains the self assessment form. Give a copy to each participant

The self-assessment tool is divided into 3 columns:

First column provides the nutrition actions at district level

Second column asks you to rate yourself. The rating is divided as following:

- 0 = insufficient
- 1 = fair
- 2 = good
- 3 = very good
- 4 = excellent

For each section rate all items included in each section and add the scores to obtain the total of each section. At the end, sum up the sub totals of each section to obtain the total

Third column asks you to identify follow up actions. Identify the sections with the lowest scores

When the self assessment form has been completed – discuss the results with the provincial supervisor. Acknowledge the activities that are going well and discuss activities that are not going well. Identify actions to improve the areas that are not going well.

The district supervisors and the provincial supervisors will keep a record of recommended actions and follow up on progress and discuss at the next supervision visit.

Self Assessment Tool for District Supervisors

Key Action	Rating*	Recommended Actions
1. Nutrition integrated into Annual AOP		
AOP includes budget for nutrition activities such as World Breast Feeding Week, VAC supplementation round		
Budget for nutrition activities requested and provided to health centers in time for conducting planned activities		
End of year review conducted with HC's		
Annual indicators and targets related to nutrition set		
Total		
2. Monitoring and supervision		
Health centers with problems identified and quarterly monitoring and supervision plan developed		
Monitoring and supervision of MPA 10 activities at health centers conducted as planned during the last three months		
Health center HIS data reviewed before monitoring visit conducted and problems identified		
Self assessment tool provided to health center staff. Results discussed and areas for action identified and recorded		
Problems encountered during monitoring and supervision reported back to OD chief		
Copy of supervision report sent to OD chief and filed.		
Total		
3. Recording and reporting		
Monthly HIS reports received from health centers on time		
HIS reports from health centers reviewed and feedback given to HC during monthly OD meeting		
Monthly HIS reports compiled and sent to provincial level on time		
Total		
4. Stock management		
Monthly and quarterly requests for VAC, IFA, deworming received from health centers on time		
Quarterly requests for MMN supplies sent to provincial level on time		
Quarterly inventory of VAC, IFA and deworming conducted (amount, quality, expiry date)		
Total		

Key Action	Rating*	Recommended Actions
5. Bi annual vitamin A round		
Meeting held with health centers to discuss and plan VAC round		
Budget distributed on time to health centers for VAC round		
IEC materials distributed to health centers as available		
Quantity, quality and expiry date of vitamin A stock checked		
VAC round monitored by OD supervisors		
VAC HIS data reviewed and prompt feedback given to health center about performance at health center /OD meeting		
Mop up activities conducted in areas with low coverage		
Total		
6. Special nutrition events		
Other events		
Meeting held with health centers to plan activities for eg. World Breast feeding week		
Available IEC materials distributed to all health centers		
Total		
Overall score		
Rating: 0 = insufficient; 1 = fair; 2 =	good; 3 =	very good; 4 = excellent

Follow up action plan

Date	Key Actions	Person responsible	Signature Supervisor

Self Assessment Tool for Health Center Staff

The self assessment tool will be used during supervision visits by the district supervisors

How to use the tool

1. District supervisor will introduce the tool to health center staff

The assessment tool provides the opportunity for health center staff to identify which nutrition activities are going well and which activities need strengthening. It also allows the health center staff and district supervisors to work together to identify ways to strengthen activities and agree on actions

Health center staff work in a group to complete the form, and then use the form to discuss with the district supervisors

2. District supervisor explains the self assessment form. Give a copy to each participant

The self-assessment tool is divided into 3 columns:

<u>First column</u> provides the nutrition actions at health center level

Second column asks you to rate yourself. The rating is divided as following:

- 0 = insufficient
- 1 = fair
- 2 = good
- 3 = very good
- 4 = excellent

For each section rate all items included in each section and add the scores to obtain the total of each section. At the end, sum up the sub totals of each section to obtain the total

Third column asks you to identify follow up actions. Identify the sections with the lowest scores

When the self assessment form has been completed – discuss the results with the OD supervisors. Acknowledge activities that are going well and praise the health center staff for their achievements. Discuss activities that are not going well. Identify actions to improve the areas that are not going well.

The health center chief and the district supervisors will keep a record of recommended actions and follow up on progress and discuss during the next supervision visit.

Self Assessment Tool for Health Center Staff

Key Action	Rating*	Recommended Actions
1. Ante- natal contact		
All pregnant women in the coverage area receive 60 tablets of IFA at first contact and 30 tablets of IFA at second contact		
All pregnant women are counseled on how to take IFA and about side effects of IFA and how to manage side effects		
All pregnant women are screened for palmar pallor at each visit		
Pregnant women with palmar pallor receive treatment as per the national guidelines for IFA		
All pregnant women received deworming (Mebendazole) after they have completed the 1st Trimester of pregnancy		
All pregnant women are counseled about eating an extra meal every day during pregnancy and eating a variety of foods		
All pregnant women are told about the importance of using iodized salt in family foods		
All pregnant women are counseled about exclusive breast feeding for six months		
All pregnant women are provided with information about early initiation of breast feeding and skin to skin contact		
Total		
2. Post partum contact		
All mothers are supported to give skin to skin care		
All mothers initiate breast feeding within 1 hour of delivery		
All mothers are counseled about exclusive breast feeding for the first six months		
All mothers are advised to breast feed frequently on demand day and night (at least 8 times)		
All mothers are provided with 42 tablets of IFA as soon as possible after delivery		
All mothers are given vitamin A 200,000 IU as soon as possible after delivery		
All mothers receive deworming (mebendazole 500mgs) soon after delivery		
New born babies receive BCG and HepB as soon as possible after delivery		

Key Action	Rating*	Recommended Actions
All mothers receive information about eating		
an extra meal every day when they are breast		
feeding All mothers receive information about good		
nutrition and a varied diet		
Total		
3. Well and sick child visit		
All children are evaluated for health problems		
and treated according to IMCI guidelines (skip if not yet trained)		
All children are checked for immunization		
status and immunized as needed		
All children who attend health center are		
weighed and their weight recorded on a Child Health Card		
All parents are counseled about appropriate		
complementary feeding practices		
Severely malnourished children are referred		
to hospital		
All children are checked for anemia and treated		
All children are checked for vitamin A deficiency		
and treated according to national guidelines		
Total		
4. Outreach session		
Outreach sessions are always conducted as planned		
Village chief and volunteers are informed in advance		
Village volunteer keeps an updated list of all children 0-5 and pregnant women		
Equipment and supplies (vaccine, vitamin A,		
IFA, Mebendazole, family planning) are always available for outreach		
Tally sheets are prepared in advance and used during outreach		
Services/supplement provided are recorded on Child's Health /Card Mother Card		
Village volunteer participates in outreach session		
Total		
5. Bi annual Vitamin A round		
Preparation three months before VAC Round		
Number of children and mothers eligible for VAC and Mebendazole are estimated		
VAC and Mebendazole stock is checked for quality, expiry date and amount		

Key Action	Rating*	Recommended Actions
VAC and Mebendazole are ordered as needed		
Preparation one month before VAC Round		
Planning meeting is held with village volunteers		
Schedule for VAC round is communicated to each village leader and village volunteers		
IEC materials are distributed		
Tally sheets are prepared for each village		
Village volunteers register is updated		
On day of VAC distribution		
Village volunteers and village authorities help with mobilization		
Village volunteers participate and provide health education		
VAC and Mebendazole supplementation is recorded on Child Health Card, village register and tally sheet		
Immediately after the VAC round		
Village volunteers register is checked for missing children		
Mop up activities are planned with village volunteer		
Village volunteer is given required amount of VAC and Mebendazole		
Mop up activities are reported by village volunteer to health staff		
Tally sheet data is promptly transferred to HIS report		
Vitamin A coverage is discussed with HC staff and VHSG		
Total		
6. Micronutrient stock management		
Quarterly inventory of VAC, Mebendazole and IFA stock are conducted		
Expired drugs are reported to the OD		
MMN Stocks are ordered on time		
Ordered drugs are provided on time by the district		
Total		

Key Action	Rating*	Recommended Actions
7. HIS data management		
Monthly HIS reports completed and sent to OD on time		
HIS reports are reviewed by health center chief and any problem are followed up promptly		
Copies of tally sheets are stored at health center		
Health center has targets for VAC coverage		
Health center has targets for IFA coverage		
All children are checked for anemia and treated		
Health center has targets for Mebendazole coverage		
Total		
8. Salt testing		
Kits are available for salt testing		
Salt testing is carried out by health staff		
Results of testing are reported to village chief		
Necessary action discussed with village chief		
Results reported to OD		
Total		
9. Special nutrition events		
Meeting held with communities and volunteers to plan special events such as World Breast Feeding Week		
Other events		
IEC materials distributed to villages		
Total		
Overall score		
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Rating: 0 = insufficient; 1 = fair; 2 =	gooa; 3 =	very good; 4 = excellent

Follow up action plan

Signature Supervisor							
Person responsible							
Key Actions							
Date							

Self Assessment Tool for Village Volunteers

The self assessment tool will be used during village volunteer meetings held at health center level

How to use the tool

1. Health center staff introduce the assessment tool.

The assessment tool provides the opportunity for village volunteers and health staff to identify which nutrition activities are going well in their area, and which activities need strengthening. It allows the group to work together to identify ways to strengthen their activities and agree on some actions

Village volunteers will work individually to complete the form, and then use the form to discuss in the larger group with other volunteers and the health staff.

NB. If village volunteers have low literacy skills the health staff can read each point in the assessment form and fill it in according to the village volunteers feedback.

2. Health staff present and explains assessment form. Give a copy to each volunteer

The self-assessment tool is divided into 3 columns:

First column provides the nutrition actions at each contact point

Second column asks you to rate yourself. The rating is divided as following:

- 0 = insufficient
- 1 = fair
- 2 = good
- 3 = very good
- 4 = excellent

For each section rate all items included in each section and add the scores to obtain the total of each section. At the end, sum up the sub totals of each section to obtain the total

<u>Third column</u> asks you to identify follow up actions. Identify the topics with the lowest scores

When every one has completed the form – discuss the results in the large group. Give praise for activities that are going well and discuss activities that are not going well. Identify actions to improve the areas that are not going well.

The health center staff will keep a record of recommended actions and follow up on progress and discuss at the next village volunteer meeting. The self assessment can be conducted twice per year (following the bi annual vitamin A rounds).

Rating: 0 = insufficient; 1 = fair; 2 = good; 3 = very good; 4 = excellent

Self Assessment Form for Village Volunteers

Key Action	Rating*	Recommended Actions
1. All pregnant women in my village:		
Are registered in my village register		
Attend antenatal care 4 times during pregnancy		
Take 90 tablets of iron folate tablets during pregnancy		
Receive deworming medicine after the first 3 months		
Eat an extra meal per day during pregnancy		
Know danger signs during pregnancy		
Plan and prepare for transport costs for delivery		
Have received information about exclusive breastfeeding and early initiation of breast feeding		
Total		
2. All post partum women and newborn in my village:		
Are registered in my village register		
All mothers are supported to give skin to skin care		
All mothers initiate breast feeding within 1 hour of delivery		
All mothers are counseled about exclusive breast feeding for the first six months		
All mothers are advised to breast feed frequently on demand day and night		
All mothers are provided with 42 tablets of IFA as soon as possible after delivery		
All mothers are given vitamin A 200,000 IU as soon as possible after delivery within the first six weeks		
All mothers receive deworming (mebendazole 500mgs) soon after delivery		
New born babies receive BCG and HepB as soon as possible after delivery		
All mothers receive information about eating an extra meal every day when they are breast feeding		
All mothers receive information about good nutrition and a varied diet		
Total		

Key Action	Rating*	Recommended Actions
3. All children 0 – 5 years in my village:		
Are registered in my village volunteer register		
Are exclusively breast fed for 6 months		
Mothers have received information about complementary foods, consistency, variety, amount and frequency		
Start complementary foods at six months		
All children from 6 – 11 months receive vitamin A capsule 100,000 IU twice per year during May and November		
All children 12 – 59 months receive Vitamin A capsule 200,000 IU and Deworming medicine twice per year during May and November		
Mothers always bring Child Health card to outreach session and health center		
Vitamin A and Mebendazole are recorded on the yellow card		
Mothers have received information about vitamin A, iron and iodine rich foods		
Total		
4. Vitamin A supplementation rounds around May and November		
One month before the vitamin A round		
Village volunteers attend HC meeting to help plan vitamin A supplementation round		
Village register is updated before round and information about the number of children is provided to the health center staff		
Village chief and community is informed of the day, time and location of vitamin A round		
During Vitamin A Supplementation Round		
Banners and posters about vitamin A are displayed in the village		
Parents and caretakers have received information about the importance of vitamin A supplementation		
On the day of the round village volunteers calls mothers and children to attend and reminds them to bring Child Health Card		
Village volunteer provides information to mothers about Vitamin A		
Village volunteer records on their list the children who have received vitamin A		
Total		

Key Action	Rating*	Recommended Actions
5. Mop up activities for vitamin A round		
In my village following the vitamin A round		
Village volunteer discusses with health center staff about how many children missed the supplementation round		
Health center staff and village volunteer compare tally sheet and village volunteer register		
Village volunteer receive VAC and deworming medicine to give to children who have missed round		
Village volunteer explains to mother about vitamin A and gives the child the VAC and deworming if 12 – 59 months		
Village volunteer records on Child Health Card and register that child has received vitamin A during the outreach session in village		
Village volunteer reports back to health staff and return any unused vitamin A and deworming medicine		
Total		
6. Testing of iodized salt		
In my village:		
Community members have received information about iodine and iodized salt		
Village volunteers participate in testing salt samples as instructed by health staff and provide information to the community about the status of salt in their community		
Village volunteer reports back to village leader and health staff the results of salt testing		
Total		
Overall score		
Rating: 0 = insufficient; 1 = fair; 2 =	good; 3 =	very good; 4 = excellent

Follow up action plan

Date	Key Actions	Person responsible	Signature Supervisor