

Training Supervisors to Mentor Health Workers Who Provide Counselling on Infant and Young Child Feeding

A Three-Day Course for Kyrgyz Mentor-Supervisors
Facilitator's Guide



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Training Supervisors to Mentor Health
Workers Who Provide Counselling on
Infant and Young Child Feeding

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About SPRING

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a six-year USAID-funded Cooperative Agreement to strengthen global and country efforts to scale up high-impact nutrition practices and policies and improve maternal and child nutrition outcomes. The project is managed by JSI Research & Training Institute, Inc., with partners Helen Keller International, The Manoff Group, Save the Children, and the International Food Policy Research Institute.

Disclaimer

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Elements of this training are based on:

- The UNICEF *Community Infant and Young Child Feeding (IYCF) Counselling Package: Module on Supportive Supervision/Mentoring and Monitoring*, developed under a strategic collaboration with the United Nations Children's Fund (UNICEF) New York, with combined technical and graphic input from Nutrition Policy Practice (NPP) and the Center for Human Services, the not-for-profit affiliate of University Research Co., LLC (URC/CHS).
- Food Security and Nutrition Network Social and Behavioral Change Task Force. 2014. *Care Groups: A Training Manual for Program Design and Implementation*. Washington, DC: Technical and Operational Performance Support Program.

Acronyms

GMP	growth monitoring and promotion
HW	health worker
IFA	iron-folic acid
IYCF	infant and young child feeding
NPP	nutrition policy practice
UNICEF	United Nations Children's Fund

Introduction

Training Supervisors in Mentoring and Related Monitoring Activities

This guide provides facilitators with the technical knowledge and skills they need to help supervisors mentor health workers who provide infant and young child feeding (IYCF) counselling.

Purpose

The purpose of this facilitator's guide is to prepare mentor-supervisors to help health workers improve their counselling performance through the provision of ongoing mentoring. Although the focus of this particular training is infant and young child feeding (IYCF), these mentoring skills can be applied to other content areas such as counselling on maternal and adolescent nutrition and anemia; and growth monitoring and promotion, where the mothers/caregivers receive counselling on the feeding and care of their children based in part on the results of their anthropometric and feeding assessments. Mentoring is intended to be used flexibly and as needed. As health workers become more proficient in one area (e.g., IYCF counselling), the mentoring process may be used to address another task (e.g., counselling on women's nutrition), checking periodically to see that the worker continues to retain the skills developed in IYCF counselling.

Specific Objectives of the Training of Mentor-Supervisors

By the end of the training, participants will have acquired and/or strengthened the following knowledge and skills:

Knowledge

Participants will be able to:

1. Define mentoring (mentoring-supervision) and its components
2. Suggest a model of mentoring appropriate for their setting
3. Describe how mentoring can contribute to monitoring and improved programs, services and worker performance

Skills

Participants will be able to:

1. Use mentoring skills to help a health worker improve his/her IYCF counselling performance
2. Provide effective feedback based on observation of IYCF counselling, including feedback on basic IYCF counselling skills: *Listening and Learning*, *Building Confidence* and *Giving Support*, and 3-Step (Assess, Analyze, Act) IYCF counselling
3. Use tools (job aids and tabulation forms) to facilitate mentoring
4. Identify individual worker weaknesses and shared group challenges, and determine a course of action to identify how to address the issues
5. Develop action plans for needed actions (at national, *oblast*, or *rayon* levels) to implement mentoring within the existing supervision system

Terminology

This guide uses the term 'mentoring' (or 'mentoring-supervision'), as opposed to 'supportive supervision,' to avoid potential confusion with the Kyrgyz use of 'supportive supervision.' In the Kyrgyz Republic, 'supportive supervision' refers to administrative oversight delivered in a supportive manner and provided periodically to oversee and monitor a facility's services, records, supplies, finances, and workers.

The term 'mentoring' is used here to mean supervisor coaching of individual health workers to improve the quality of health service delivery—in this case, mentoring to strengthen the knowledge and skills needed to counsel a mother on infant and young child feeding.

3-Day Training Schedule:

Training of Mentor-Supervisors in Mentoring and Related Monitoring

TIME	DAY 1	DAY 2	DAY 3
9:00–9:15	Session 1: Introductions, Expectations and Schedule (60 min)	Daily Review	
9:15–10:15		Session 7: Practice Mentoring (120 min)	Session 12: Clinical Practice and Feedback (180 min Clinical Practice and Feedback, plus Travel)
10:15–10:30	Tea Break		
10:30–11:30	Session 2: Introduction to Mentoring: Definition and Components (60 min)	Session 7: Practice Mentoring , (continued)	Session 12: Clinical Practice and Feedback , (continued)
11:30–13:00	Session 3: Identify Elements Needed to Build an Effective Mentoring System (60 min) Session 4: Review Job Aids for Workers and Corresponding Tools for Mentors (Mentor-Supervisors) (40 min total)	Session 8: Monitoring (45 min) Session 9: Using Observation Checklist Data (60 min)	Session 12: Clinical Field Practice and Feedback , (continued)
13:00–14:00	Lunch		
14:00–15:00	Session 5: Help Mentors (Mentor-Supervisors) Develop the Necessary Skills: Demonstration (75 min total) Session 6: Match Tools to Steps in the Mentoring Process (60 minutes)	Session 9: Using Observation Checklist Data , (continued)	Session 12: Action Plan II (90 min)
15:00–15:30		Session 10: Action Plan Development I	

TIME	DAY 1	DAY 2	DAY 3
		(60 minutes)	
15:30–15:45	Tea Break		
15:45–17:00	Session 6: Match Tools to Steps in the Mentoring Process, (continued) Session 7: Practice Mentoring (Mentoring-Supervision) (120 minutes, continues on Day 2)	Session 10: Action Plan Development I, (continued) Session 11: Preparation for Clinical Field Practice (30 min)	Session 13: Feedback and Closing

Session 1: Introductions, Expectations and Objectives, Schedule and Training Materials

Time: 60 minutes

Objectives

After completing this session, participants will be able to:

1. Identify facilitator-trainers and participants
2. Discuss participants' expectations, compare them to the objectives of the training, clarify the priorities/focus of the training, and review the training schedule
3. Orient participants to the training materials

Preparation

- Provide participants with name tags
- Prepare flipchart: Introductions
- Prepare flipchart: Objectives of the Training
- Label a blank flipchart: Participant Expectations
- Have ready:
 - Handout: Training schedule
 - Handout for preparation for Day 3 – A Action Plan Template: Actions Needed to Implement Mentoring (in IYCF Counselling) for Health Workers

Activity Objective 1: Introduce Facilitator-Trainers and Participants

Methodology: Matching game

Suggested Time: 20 minutes

Instructions:

1. Welcome participants as they arrive; provide them with a nametag with their first name written in large print. Ask participants to be seated in a U or circle.
2. Use illustrations of foods cut into two pieces. On the back of the illustration, write the number of a Counselling Card. Give a part of the illustration to each participant and ask them to find their match. Pairs of participants should introduce themselves, giving their name, where they work, sharing one expectation for the training, and naming their favorite food.

One co-facilitator should write each participant's expectation as his/her partner introduces him/her. When a participant mentions an expectation that has already been named, the co-facilitator can put an additional ✓ by that expectation.

3. After both participants have been introduced, ask the pair to hold up the Counselling Card matching the number on the back of their illustration. Describe the content illustrated on that Counselling Card.

Activity Objective 2: Discuss Participants' Expectations and Compare with Objectives of the Training

Methodology: Interactive presentation

Suggested Time: 20 minutes

Instructions:

1. Show the prepared flipchart: Objectives of the Training.
2. Guide the participants in matching their expectations with the activity objectives; discuss the similarities and differences.
3. Post the flipcharts with the training objectives and the participant expectations on one side of the room for review at the end of the training.

Activity Objective 3: Review Training Schedule and Materials

Methodology: Interactive presentation

Suggested Time: 20 minutes

Instructions:

1. Distribute **handout:** Training Schedule.
2. Review the training schedule.
3. Review advance preparation necessary for Day 3, Session 12: Next Steps.
 - Explain to participants that on Day 3 of the training, they will present their action plans to the group.
 - In preparation for their presentations, distribute the **handout** from Session 12: Action Plan Template: Actions Needed to Implement Mentoring (in IYCF Counselling) to Health Workers.
 - Ask participants to find time to meet together (with other participants from their level: national, *oblast*, or *rayon*) during Days 1 and 2. There will be additional discussion on Days 1 and 2 to help inform their planning.
 - Task participants to submit a written copy of their Action Plans on Day 3 of training.

Key Content

Objectives of the Training

1. Define mentoring (and terms used for the same/similar concept) and its components.
2. Discuss a model of mentoring that might work in your setting.
3. Introduce job aids to facilitate mentoring.

4. Help mentors (or mentor-supervisors) develop the necessary skills to provide mentoring.
5. Describe how mentoring can contribute to related monitoring and contribute data to help improve programs, services and health worker (HW) performance.
6. Practice tabulation and analysis of data from mentors' observation checklists.
7. Develop action plans that describe necessary additions to the existing system to implement mentoring in IYCF counselling for health workers.

Session 2: Introduction to Mentoring: Definition and Components

Time: 60 minutes

Objectives:

After completing this session, participants will be able to:

1. Define mentoring (also known as 'supportive supervision')
2. Define its components

Preparation:

- **Flipchart:** Definition of Mentoring
- **Flipchart:** Terms Associated with Mentoring
- **Seven cards:** WHO, WHY, WHEN, WHERE, WHAT, HOW, WHAT FOR
- **Seven matching content cards**

Activity Objective 1: Define Mentoring

Methodology: Small group work and discussion

Suggested Time: 20 minutes

Instructions:

1. Divide participants into seven small groups.
2. Ask small groups to brainstorm terms they associate with 'mentoring.'
3. Have each group share a term associated with mentoring, and as a term is mentioned, check off or add additional terms to prepared flipchart.
 - Question: Is there a Kyrgyz or Russian term that means 'mentoring'?
4. Show prepared flipchart with the definition of mentoring.
5. Lead a discussion comparing and contrasting the definition of mentoring with definition of 'traditional supervision.'
6. Summarize the activity.

Key Content

Mentoring¹: An ongoing and *collaborative* effort between the mentor (mentor-supervisor) and health worker (HW) to help the HW improve his/her performance and confidence. *Together*, the HW and mentor-supervisor define objectives. The mentor-supervisor observes the health worker's interactions with mothers/caregivers and provides *constructive feedback*. The mentor-supervisor and HW *work together*,

¹ 'Mentoring-supervision' is sometimes called 'supportive supervision,' although 'supportive supervision' does not always include 'mentoring.'

discussing and problem-solving in order to identify areas of strength and address any areas of difficulty. The health worker should feel *motivated* by the process and be encouraged to continue improving his/her skills, resulting in more skilled judgment and increased independence and self-confidence.

Mentoring is an ongoing *process* (not a one-time event) that can be applied to helping a HW improve the quality of his/her performance of different tasks (e.g., counselling around IYCF or women's and adolescent nutrition and anemia; support group facilitation; and growth monitoring and promotion). It is task-focused, as opposed to the supervision that occurs when a supervisor visits and assesses an entire facility and its workforce. Ideally, the mentor (mentor-supervisor) and health worker develop a personal relationship of mutual trust.

This is sometimes called 'coach and players' or 'hen and chicks' approach.

Traditional Supervision: Traditional supervision tends to occur at a facility-level rather than individual level. It also often involves aspects of inspection and control, with a focus on ensuring that the facility and its health workers adhere to policies and procedures.

This is sometimes called the 'cat and rat' or 'Tom and Jerry' approach.

Activity Objective 2: Describe Components Related to Mentoring

Methodology: Matching game

Suggested Time: 25 minutes

Instructions:

1. Request that seven participants (one from each small group) come to the front of the room. Give each person a card with one of the following words: WHO, WHY, WHEN, WHERE, WHAT, HOW, WHAT FOR (Appendix 1: Components Related to Mentoring).
2. Distribute one card that describes a component of mentoring to each small group.
3. Explain the matching task. Ask each small group, *one-by-one*, to match their card with the component that the card's content describes (WHO, WHY, WHEN, WHERE, WHAT, HOW, WHAT FOR). Describe why they have matched that content to the specific component.
 - WHO can provide mentoring?
 - WHY conduct it (why should mentoring be done: the short-term aims)
 - WHEN to conduct it (time)
 - WHERE to conduct it (place)
 - WHAT to look for when conducting it (what to pay attention to during a mentoring visit)
 - HOW to conduct it (what is necessary for a mentoring system to be put into place)
 - WHAT FOR (the ultimate purpose of mentoring; what will be achieved)
4. Ask other groups if they agree or disagree with the first group's match. If another group feels that they have the correct match for the term, they must justify their decision. If the other groups agree, the second group can 'bump' the first group from the term.
5. Proceed until all groups have matched their terms.
6. Discuss and summarize.

Key Content

Components Related to Mentoring

WHO

- Trainers and mentors (mentor-supervisors) of health workers who have completed training in a particular task (in this training, IYCF counselling), and in mentoring (mentoring-supervision) and related monitoring
- A peer, for mutual support
- Self-assessment by health workers to track their own progress in practicing use of knowledge and mastering skills (expected competencies)

WHY

- Motivate and support HWs to build their knowledge and skills
- Facilitate improved *quality* of counseling by:
 - Defining and setting expectations: competencies (expected knowledge and skills)
 - Identifying and resolving challenges experienced by individual HW
 - Addressing systemic problems experienced by many workers
 - Working toward high *quality* counselling by HWs over time
- Monitor changes in programs/services/health workers (by tracking *activities, coverage, quality of programs, health services and HW performance*)

WHEN

- Training follow-up (first follow-up/mentoring visit within 1-3 months following the training)
- Regularly scheduled on-the-job observation, mentoring and modelling from supervisor-mentor
- As needed: refresher training for entire group of health workers

WHERE

- At health provider's work site counselling sessions in various service or contact points:
 - antenatal care (ANC)
 - postnatal care (PNC)
 - immunization
 - community clinics
 - other
- During home visits
- At convenient locations for group meetings

WHAT

- Competencies in the following skills:
 - *Listening and Learning*
 - *Building Confidence and Giving Support*
 - *3-Step Counselling: Assess, Analyze, Act*
- Competencies in the following knowledge areas:
 - Recommended feeding practices

- Attachment and positioning: how to help a mother/caregiver
- Breastmilk expression: how to help a mother
- Common breastfeeding difficulties, including 'not enough' breastmilk: identifying and resolving them
- Complementary feeding: when to start; developmental readiness for complementary feeding
- Recommendations for complementary feeding/foods: frequency, amount, thickness/texture, variety and how to prepare
- Feeding the sick child: infants <6 months, children >6 months
- Responsive feeding: infants <6 months, children >6 months
- Hygiene related to food safety, preparation, and feeding

HOW

- *A supervision structure that:*
 - Defines supervision relationships – for example, a named mentor (mentor-supervisor) assigned to named health workers
 - Sets expectations (defines expected knowledge and skills)
 - Sets a regular schedule and creates an agreed upon process for mentoring (mentoring-supervision) observation visits
 - Monitors key elements of the process
 - Defines reporting schedule; including information on *activities, coverage and quality* of program activities and worker performance
 - Creates regular and scheduled opportunities (group meetings of health workers and mentors) to review and discuss monitoring data; identify and resolve problems experienced by individual workers as well as systemic problems experienced by many workers; and track progress toward high performance of health workers over time
 - Includes resources for mentoring (mentoring-supervision) and monitoring activities
- Use tools:
 - *Job aids* for workers
 - *Observation checklists* for mentors (mentor-supervisors)
 - *Self-assessment progress forms* for workers to track their progress in mastering competencies

WHAT FOR

- Work toward high performance of all workers over time
- Contribute to strengthened programs and systems: improved planning, implementation of *activities, coverage* of target population, *quality* of services/programs and HW performance (contributing to improved IYCF practices and nutritional status in target population), problem identification and solutions

Matching Game: Content Cards

- Trainers and mentors of health workers who have completed training in both IYCF Counselling and mentoring
- A peer, for mutual support
- Self-assessment by HW, to track own progress

- Motivate and support health workers to build their knowledge, skills and confidence
- Facilitate improved *quality* of IYCF support activities

- Training follow-up
- Regularly scheduled on-the-job observation and mentoring
- Refresher training

- At HW's worksite counselling sessions:
 - antenatal care (ANC)
 - postnatal care (PNC)
 - expanded program on immunization (EPI)
 - Integrated management of childhood illness (IMCI) nutrition corner
 - community clinic
 - other
- During home visits
- At convenient locations for group meetings

- Competencies in the following skills:
 - *Listening and Learning*
 - *Building Confidence and Giving Support*
 - *3-Step Counselling: Assess, Analyze, Act*

- Competencies in the following knowledge areas:
 - Recommended feeding practices
 - Attachment & positioning: how to help a mother
 - Breastmilk expression: how to help a mother
 - Identifying and resolving common breastfeeding difficulties
 - When to start complementary feeding (developmental readiness)
 - Recommendations for complementary feeding/foods: frequency, amount, thickness/texture, variety
 - Active or responsive feeding
 - Hygiene related to food safety and feeding
 - Feeding the sick child
 - Feeding the low birth weight child
 - Signs that require referral

- Define mentoring relationships
- Set expectations (define competencies: knowledge and skills)
- Set regular schedule for mentoring visits
- Monitor key elements of process
- Define reporting schedule and requirements
- Hold regularly scheduled group meetings of health workers and mentors (mentor-supervisors) to review data, identify and resolve problems
- Resource mentoring activities
- Use tools such as:
 - Job aids for workers
 - Observation checklists for mentors (mentor-supervisors)
 - Self-assessment progress forms

- Work toward high performance of all health workers over time
- Contribute to strengthened programs and systems: improved implementation of activities, coverage of target population, quality of services, programs and health worker performance (contributing to improved IYCF practices and nutritional status in target population)

Session 3: Identify What is Needed to Create an Effective Mentoring System

Time: 60 minutes

Objectives

After completing this session, participants will be able to:

1. Describe a model of mentoring that uses a combination of approaches
2. Describe what is needed to strengthen the mentoring system

Preparation

- **Flipchart** with a drawing of the model of mentoring using combination of approaches
- **Flipchart:** Blank, with title 'Brainstorm: What is needed to strengthen the system?' (of mentoring)
- **Flipchart** with list: What is Needed to Strengthen the System of Mentoring?

Activity Objective 1: Describe a Model of Mentoring that Uses a Combination of Approaches

Methodology: Interactive presentation

Suggested Time: 30 minutes

Instructions:

Ask:

1. In your facility, do HWs receive mentoring to improve their IYCF counselling? Please describe the approach to mentoring used in your facility. Is it formal or informal? Is it provided on a regular basis, or ad hoc? Is mentoring always provided by the same person, or do different people serve as mentors?
2. In addition to mentoring, what are the different ways in which a HW's performance could be improved?
3. Present a **flipchart** with drawing: Model of mentoring using combination of approaches.

Activity Objective 2: Identify What is Needed to Provide Mentoring Using a Combination of Approaches

Methodology: Buzz groups

Suggested Time: 30 minutes

Instructions:

1. Form buzz groups of three (with neighbors) and ask them to discuss in five minutes what would be needed to provide effective mentoring to improve IYCF counselling in their system/facilities.
2. As buzz groups share their ideas, write responses on flipchart. Spend just a few minutes on this activity.
3. Uncover **a flipchart** with the following list: 'What is needed to strengthen the system of mentoring?' Compare ideas and fill in any gaps with discussion of additional items on the flipchart list, such as:
 - inclusion of mentoring in the supervision policy
 - training/capacity-strengthening
 - mentoring structure
 - mentoring schedule
 - funded & reliable transport (if mentor of HWs is external to the facility at which HW work)
 - systematic process that describes all activities during a mentoring visit
 - mentor's observation checklist for IYCF Counselling (and any other IYCF Support activity)
 - agreed upon mechanism for reporting to higher levels
 - authority to mobilize support to address problems
4. Discuss and summarize what currently exists to support IYCF mentoring, and what needs strengthened.
5. Remind participants that during Session 12 (Day 3), they will present their Action Plans: Activities Needed to Implement Mentoring in IYCF Counselling to Health Workers to the group.

Key Content

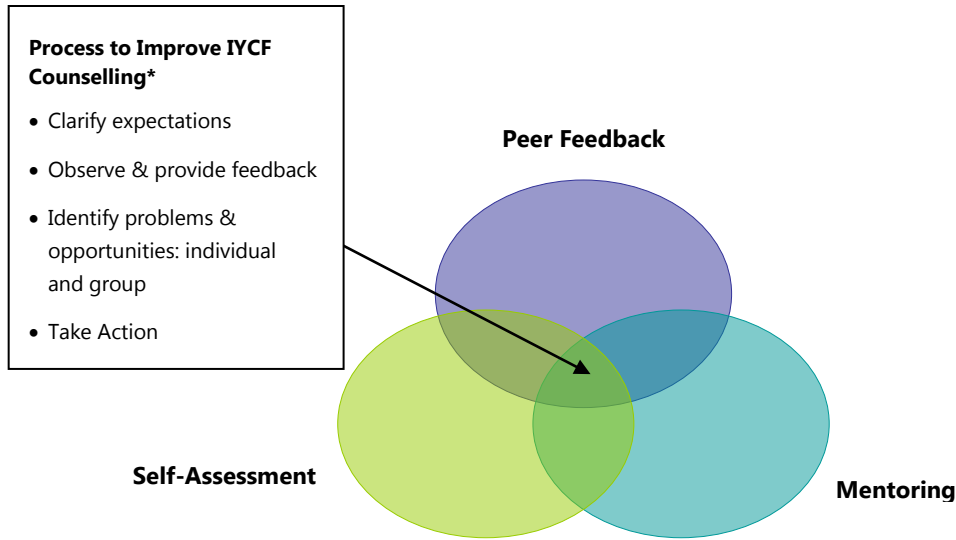
Different Approaches to Mentoring

The expectations for 'mentoring' (or 'mentoring-supervision') and a 'supervision system' vary with the reality of what is possible in different settings. Examples of some of the differences in approaches:

1. A Generalist Supervisor may:
 - Be an 'external' resource
 - Be assigned to cover multiple facilities, and all of their health providers and programs
 - Have multiple responsibilities, including: record and supplies inspection; observation multiple services and service delivery; full observation of a HW performing a particular task (e.g., IYCF counselling) is likely only if a HW happens to be engaged in that task when the mentor happens to be present
 - Be trained in IYCF counselling knowledge and skills
 - Rarely be able to provide consistent feedback to the same worker over time and on the same task
 - Schedule supervision visits in advance
 - Find that providing regular mentoring to individual HWs is difficult

2. A Mentor (Mentor-Supervisor) may:
 - Be a practitioner in the facility, as well as a mentor, with fewer 'cases' or responsibilities of his/her own
 - Function in a single facility to which s/he is assigned, or divide his/her time on a regular but rotating basis (e.g. spending one day a week in each of five facilities/health posts/communities, for example)
 - Be located close to the facilities for whose workers s/he is a 'resource'
 - Be assigned to mentor 'individual' staff or workers on an on-going basis
 - Function as a 'master craftsperson' with greater experience than those whom s/he mentors
 - Be trained in both IYCF knowledge and skills, and in supervision
 - Create a collaborative learning model with the individuals for which s/he is a resource
 - Serve as a team leader or coach, as well as mentor for individuals (for example, facilitating case studies where workers present a 'difficult' or 'interesting' case)
 - Encourage building of experience among peers
 - Maintain a regular schedule of mentoring/visiting, but also respond to referrals and requests for assistance
 - Have the flexibility to direct own schedule (e.g., can respond when a health worker needs additional assistance because they are newly trained, experiencing difficulty with a particular client or task)
 - Be the point person for dissemination and implementation of new policies and practices
 - Be responsible for refresher training where systemic weaknesses are identified and multiple health providers need retraining
 - Serve in a monitoring role – but monitoring is not their primary responsibility
 - Function as liaison to central/higher level
3. A combination of mentoring approaches might also be possible, including a mix of worker self-assessment, mutual peer observation and feedback, mentoring (mentoring-supervision) from a supervisor; and periodic (regular, scheduled and planned) mentor or mentor-supervisor-led group meetings (with the group of health workers the mentor-supervisor mentors) to discuss progress, mutual challenges, difficult cases, and refresher training as needed.

Model of Mentoring Using a Combination of Approaches



*This model and process may be used to improve health worker performance in other IYCF support, nutrition or health activities.

Strengthening the System: What is Necessary to Create an Effective System of Mentoring (Mentoring-Supervision)?

The following elements contribute to an effective system of mentoring:

- A written supervision that spells out requirements, roles and responsibilities, and authority of the mentor-supervisor
- A training program for mentor-supervisors in:
 - supervision skills
 - specific program content (knowledge and skills) for which s/he provides mentoring
 - monitoring and use of data to improve worker performance and IYCF programming
- A supervision structure that identifies (by position) the designated mentor (mentor-supervisor) for each identified worker who will receive individual mentoring
- A mentoring schedule that specifies regular and scheduled visits.
 - This schedule may provide recommendations for the frequency of mentoring visits, e.g. monthly visits until a worker achieves a set standard of performance. If the HW maintains the standard for two months, mentoring may be reduced to every other month. If the HW

maintains the standard for two consecutive 'every other month' visits, mentoring on that particular task may be reduced to once every four months or twice yearly, and the HW may shift effort to improving performance in another area.

- Resources, including funded and reliable transport
- A systematic process that describes all activities in a mentoring visit (e.g., review of records, observation of provider-client interactions, feedback, negotiating and agreeing 'small, do-able actions' the HW will carry out before the next mentoring visit, etc.)
- A checklist of essential elements, including an observation checklist for each IYCF support or other activity
- An agreed-upon mechanism for reporting to higher levels, and a set process for discussion and reflection
- The authority to mobilize support to address problems

Session 4: Review Job Aids for Health Workers and Corresponding Tools for Mentor-Supervisors

Time: 40 minutes

Objectives

After completing this session, Participants will be able to:

1. Utilize IYCF counselling tools:
 - Health Worker Job Aid: IYCF Assessment
 - Supervisor Job Aid: Observation Checklist for IYCF Counselling
2. Understand the types of decisions that can be made from use of checklists

Preparation

- **Handout: Health Worker Job Aid:** IYCF Assessment
- **Handout: Mentor-Supervisor Job Aid:** Observation Checklist for IYCF Counselling

Activity Objective 1: Introduce and Review Updated Tools for Health Providers and Supervisors

Methodology: Interactive presentation, brainstorming

Suggested Time: 20 minutes

Instructions:

1. On a flipchart, list the different kinds of 3-Step nutrition counselling for which you have been trained: IYCF counselling, and counselling for adolescent and women's nutrition. Explain that a counsellor has a job aid for each type of assessment.
2. Distribute and review the **Health Worker Job Aid:** IYCF Assessment.
3. Distribute and review the **Mentor-Supervisor Job Aid:** Observation Checklist for IYCF Counselling.
4. Discuss and summarize.

Activity Objective 2: Describe Characteristics of Observation Checklists and How They are Completed

Methodology: Interactive presentation, brainstorming

Suggested Time: 20 minutes

Instructions:

1. Ask participants:
 - What is an observation checklist?
 - What are the characteristics of a checklist?

- What results or decisions can be made from use of checklists?
2. Introduce function of checklist: a 'memory aid' that clearly lays out what the mentor-supervisor should assess when observing a HW providing IYCF counselling to a mother
 3. Distribute and review together:
 - **Mentor-Supervisor Job Aid:** Observation Checklist for IYCF Counselling
 4. Give example of when a mentor-supervisor would mark a line 'N/A': not applicable, for example:
 - In addition to other information, mother says:
 - The infant is 2 months old.
 - The child is breastfeeding exclusively – no other liquids, not even water.
 - Counsellor asks: 'Anything else? Any foods?' Mother says 'No', so Counsellor marks line # 12 of the Supervisor's Observation Checklist with a '1' (meaning that the counsellor did ask about 'food' intake).
 5. Ask: How should lines 13-16 be marked? Should the counsellor ask about frequency, amount, thickness and variety?
 - Wait until someone responds 'No' and then explain: Because the Counsellor was correct in NOT asking those questions, don't tick 'N.' Ticking 'N' would indicate that the counsellor forgot to ask these questions.
 - Instead, enter 'N/A', meaning that the question was 'not applicable' or 'not appropriate' in this instance.
 - In the 'Notes' column, the Counsellor may make a note to clarify: 'no other liquids given.'
 - The Counsellor handled the situation appropriately!
 6. Discuss and summarize.

Key Content

Observation Checklists

- a. An **observation checklist** is a tool that can be used to encourage, monitor and improve the quality of work carried out by workers at any level. Checklists are linked to rapid improvements in the quality of work on key tasks when they are intentionally used to promote improvement rather than simply monitor activities. The supervision observation checklists in this session are based on the job aids used by health workers as they learn to carry out IYCF counselling.
- b. **Characteristics of checklists:**
 - Simple and easy to use
 - Give clear objectives
 - Help mentor-supervisors understand what and how they are supposed to do
 - Can also be used by health workers as self-assessment instruments

c. What decisions can be made from use of checklists?

- Identify items areas where training has worked well and knowledge and skills are well understood
- Call attention to areas of weakness where work is needed with an individual health worker
- Identify areas of widespread weakness among several workers, which may indicate the need for refresher training for the group (or repeating the initial training approach, or discussion and clarification of procedures and policies)

Note: As an individual (and/or group) achieves 'competency,' move on to assess other competencies. Once a health worker (and/or group) is deemed 'competent' in all areas, use checklists on an annual or semi-annual basis to ensure that competencies and high performance are maintained. If health workers (and/or groups) who consistently fail to achieve acceptable behavior (after X number of months), consider retraining or replacing them.

Health Worker Job Aid: IYCF Counselling Assessment

Circle or fill-in appropriate response

	Name of mother/ caregiver	Name of child	Age of child (completed months)	Is [child's name] your 1st child?	
			____ completed months		
Observation of mother/caregiver					
Child illness		Child ill	Child not ill	Child recovering	
Haemo globin Level		Prophylactic (Y/N)	Treatment of anaemia (Y/N)	Deworming (Y/N)	
Growth Curve Increasing		Yes	No	Levelling off/Static	
Breastfeeding: Tell me about Breastfeeding	Currently breastfeeding	If yes: frequency: times/day & night	If no: when did BF stop?	How is breastfeeding going? (Record any difficulties.)	
Any liquids yesterday?	Is your child getting anything else to drink?	What	Frequency: times/day	Amount: how much (Ref. 250 ml)	Bottle use? Yes/No
	Other milks				
	Other liquids, including water				

Complementary foods yesterday?	Frequency	Amount	Variety							Thickness/texture
	M = meal S = snack	# of large spoonfuls OR part of a 250 ml cup: 1/4, 1/2, 3/4, full	Staples breads, grains (rice, corn) potatoes	Legumes (beans, nuts, seeds)	Vitamin A-rich fruit-Vege.	Other fruit-veg	Animal flesh foods	Milk, dairy	Eggs	
Other challenges (note underlying REASONS for challenges)										
Mother/caregiver assists child	Who assists the child when eating?					Own plate?				
Hygiene	Washes hands BEFORE FOOD (eating/feeding/food prep); AFTER FAECES (self/infant/animal)									
	YES					NO				

Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counseling

Name of Health Worker: _____

Facility: _____

Name of Mentor-Supervisor: _____

Date of Observation: _____

Instructions: Based on your observation, check 'Yes' if the action was done adequately, and 'No' if the action was not done or not done adequately. Under Observations/Notes, write N/A if the activity was not assessed or not applicable, and explain. Add other comments and notes to help you recall your thoughts for later discussion with the health worker.

SKILL SET 1: Background Information		Y	N	NA	Observations/Notes
Did the Counsellor:					
1.	Obtain child's correct age Valid DOB, & confirm correct calculation of age in months				Child's age: _____ completed months
2.	Ask if this is the first child				
3.	Ask about recent illness				
4.	Ask about child's iron status and related interventions (hemoglobin level, iron supplements and deworming)				
5.	Check child's growth card Note if worker explained child's growth trend to mother/caregiver				
6.	Ask if mother has concerns about child				
7.	Ask about mother's own situation If pregnant: <ul style="list-style-type: none"> - check if woman is eating 1 additional meal per day - check if women is taking IFA/other supplements according to protocol If lactating: <ul style="list-style-type: none"> - check if woman is eating two extra meals per day - check if woman is taking IFA during first 3 months post-partum - Ask if mother has any concerns (health or other) 				
SKILL SET 2		Y	N	NA	Observations/Notes
COUNSELLING Step 1: ASSESS					

8.	Assess the current breastfeeding status				
9.	Check for any breastfeeding difficulties				
10.	Observe a breastfeeding session (if necessary)				
11.	Ask about 'other liquids'				
12.	Ask about 'complementary food'				
13.	Assess frequency				
14.	Assess amount				
15.	Assess thickness				
16.	Assess variety				
17.	Assess responsive feeding <ul style="list-style-type: none"> • Sat with child • Helped/encouraged child during feeding/let child feed self • Modeled eating • Re-focused child's attention, as necessary • Offered more/another food 				
18.	Assess hygiene: Wash hands with soap/ash and water <ul style="list-style-type: none"> • BEFORE preparing foods/feeding child/self • AFTER using toilet (mother and child) and after cleaning baby; any contact with human/animal feces 				
19.	Complete assessment before going on to Step 2: Analyze, and Step 3: Act				
SKILL SET 3: COUNSELLING Step 2: ANALYZE		Y	N	NA	Observations/Notes
20.	Consider deviation from age-appropriate recommended practices				
21.	Consider issues reported by mother				
22.	Correctly prioritize the most important issues for action				
SKILL SET 4: COUNSELLING Step 3: ACT		Y	N	NA	Observations/Notes
23.	Praise the mother/father/caregiver for positive practices				

24.	If a difficulty is identified, address the reasons				
25.	Discuss limited and relevant information				
26.	Help mother/caregiver problem-solve, as appropriate				
27.	Encourage mother/caregiver to try new/recommended practice				
28.	Agree upon actions				

SKILL SET 5: APPROPRIATE USE OF MATERIALS		Y	N	NA	Observations/Notes
29.	Use counseling cards (CCs) to reinforce good breastfeeding practices				
30.	Point out characteristics of Complementary Feeding using appropriate CCs for age group				
31.	Use CCs to reinforce good hygiene practices				
SKILL SET 6: COMMUNICATION SKILLS		Y	N	NA	Observations/Notes
32.	Use good non-verbal communication <ul style="list-style-type: none"> • Keep head level • Pay attention (eye contact) • Remove barriers (tables & notes) • Take your time • Appropriate touch (use responses/gestures that shows interest) 				
33.	Ask questions that allow for detailed information				
34.	Accept what mother/father/caregiver thinks and feels Avoid using judging words				
35.	Give practical advice				

Total number of lines scored 'Yes': _____

Total number of lines with "Yes" + "No" response: _____

SCORE for today's mentoring (Total 'Yes' / Total 'Yes' + 'No'): _____ %

Comments & recommendations:

Session 5: Help Mentor-Supervisors Develop the Necessary Skills to Provide Mentoring

Time: 75 minutes

Objectives

After completing this session, participants will be able to:

1. Describe how to conduct a mentoring (also known as a 'mentoring-supervision') visit
2. Demonstrate mentoring-supervision during 3-Step Counselling (Assess, Analyze, Act), using **Handout: Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling**
3. Discuss how to give effective feedback

Preparation

- **Flipchart:** 3-Step Counselling (Assess, Analyze, Act)
- **Flipchart:** Listening and Learning skills
- **Flipchart:** Building Confidence and Giving Support skills
- **Handout:** How to Conduct a Mentoring-Supervision Visit
- **Handout: Mentor-Supervisor Job Aid:** Observation Checklist for IYCF Counselling (in Session 4)

Activity Objective 1: Describe How to Conduct a Mentoring-Supervision Visit

Methodology: Brainstorm

Suggested Time: 20 minutes

Instructions:

1. Brainstorm the process of making a mentoring visit
2. List the steps on flipchart
3. Compare list with **Handout:** How to Conduct a Mentoring (Mentoring-Supervision) Visit

Activity Objective 2: Demonstrate Mentoring (Mentoring-Supervision)

Methodology: Demonstration

Suggested Time: 55 minutes

Instructions:

NOTE: Three Facilitators must prepare this demonstration in advance (facilitator-'mother', facilitator-'counsellor' and facilitator-'mentor-supervisor') to model mentoring using a checklist and providing feedback. Ask participants to follow along and complete **Mentor-Supervisor Job Aid** Observation Checklist for IYCF Counselling.

1. Ask participants:

What is the purpose of this demonstration? [To observe the process of mentoring provided by a mentor (mentor-supervisor) who is observing a counselling session between a mother and an IYCF counsellor.]

Remind participants that:

- The counsellor will be using 3-Step Counselling (Assess, Analyze and Act), and the *Listening and Learning*, and *Building Confidence* and *Giving Support* skills
- The mentor (mentor-supervisor) will observe the counselling interaction between the mother and counsellor, and listen for the decisions that the counsellor makes.

Participants should take note of the mentor's (mentor-supervisor's) activities as s/he conducts the observation visit and mentors the counsellor.

2. Ask participants to follow along during the demonstration and complete the **Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling**.
3. Mentor models observation of 3-Step Counselling between a mother [Dinara] with 9-month son [Inskendar] and counsellor

Mentor: Before the demonstration, review information on your role from the **Handout: How to Conduct a Mentoring-Supervision Visit**

- Remind HW to introduce you to the mother and explain briefly why you are there.
- Ask the mother's permission to observe. Explain that you will not record her name, and that all her information will remain confidential.
- During the counselling session, make notes on the **Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling** for use during the feedback to the counsellor (and discussion with the participants watching the demonstration).

Counsellor: Before the demonstration, review information on your role from the **Handout: How to Conduct a Mentoring-Supervision Visit**.

- Before the demonstration, consider any difficulties or success stories you want to share with your mentor.
- Have ready the records you want to show to your mentor.

Information for **Mother:**

- Baby Inskendar is 9 months old.
- You are bringing baby for a well-baby check-up.
- Inskendar's growth chart shows slowing growth (growth line is leveling-off).
- You are breastfeeding five to six times per day.
- You are also giving the child three meals and two snacks a day.
- Food consists of the following:
 - breakfast: thin semolina porridge
 - lunch: broth of the family's meat soup, with small bits of potato and carrots
 - dinner: noodle soup with peas
 - snacks: banana or apple
- You are concerned that Inskendar is not yet ready to chew food and the food needs to be kept 'thin.'

4. Counsellor conducts 3-Step IYCF Counselling using **Health Worker Job Aid: IYCF Assessment**
5. Mentor-supervisor models discussion of her/his observations of the counselling session, using **Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling** and modeling 'providing feedback' to the counsellor.
6. Following the demonstration, the session facilitator first asks the mentor-supervisor to comment on his/her performance: "How did it go?"
7. Following the mentor-supervisor's input, the facilitator discusses the supportive supervision/mentoring process and checklist results with participants, asking them: "Are there differences between the way you (the participants) and the mentor-supervisor marked the observation checklists?" Go through each of the steps in 'How to Conduct a Mentoring-Supervision Visit' and discuss the reasons for any differences in how the observation checklists were marked.
8. Then ask: "Were there any differences in the priorities that you (the participants) and the counsellor identified for discussion with the mother?" Discuss these. Be certain to discuss both the feeding behaviors and the mother's beliefs.
9. Discuss providing feedback. Make the point that the objective is to be constructive and supportive; praise the counsellor for what they did correctly. Use the expression 'how about' with constructive comments. For any suggestions on improvement, make certain that the counsellor understands why the correction is needed and how to accomplish it.
10. Facilitator recognizes all inputs and/or fills-in gaps.
11. Discuss and summarize.

Activity Objective 3: Describe How to Give Effective Feedback

Methodology: Brainstorm

Suggested Time: 20 minutes

Instructions:

4. Brainstorm what makes feedback effective.
5. List participant contributions on a flipchart paper.
6. Compare list with **Handout: Providing Effective Feedback**
 - a) Give feedback in private.
 - b) Clarify the ultimate goal (for example, provide good quality IYCF counselling).
 - c) Together with the HW, set actions to achieve that goal. The role of the mentor is to provide feedback to assist the HW in mastering those actions and working to achieve the goal.
 - d) Make your feedback timely. In general, the sooner feedback is given, the better – but it is not appropriate to provide feedback in the middle of a counselling session.

Aim to provide feedback immediately after a counselling session has ended and the mother has left. Knowing ahead of time when the mentor will be observing a counselling session allows the HW to better control his/her schedule to allow time for feedback.
 - e) Ask the HW to comment on his/her performance before giving your comments.

- f) Praise what went well. Mention those areas where the HW is doing well – and help him/her understand why his/her performance of those tasks was good.
- g) Where you (the mentor) observe weaknesses, prioritize those areas where the worker needs to improve, and comment on just a few weaknesses. Avoid overloading the worker with too much information.

Remember: Just as a mother cannot remember great amounts of information, a HW will have difficulty remembering what the mentor says if s/he comments on too many needed improvements.

Handout: How to Conduct a Mentoring (Mentoring-Supervision) Visit

Schedule a time for your visit to the health worker (HW) in advance

On the Day of your Visit:

1. Remind the HW that you are there to support (not test) him/her.
2. Review the HW's records and activities since your last mentoring visit.
3. Ask how the HW feels about his/her work.
4. What is going well?
5. Is s/he experiencing any difficulties?
6. How did the HW do with any changes s/he has worked on since the last mentoring visit (the 'small, do-able changes' the HW has agreed to try)? Praise what is going well.
7. Remind the HW to introduce you to the mother/caregiver who s/he will counsel and explain your presence.

During the Counselling Session:

1. Sit so that you can observe the health worker and mother, but not distract either.
2. As the HW talks with the mother, make notes on the **Mentor-Supervisor Job Aid: Observation Checklist** for IYCF Counselling so that you can provide feedback to the HW once the session has ended and the mother has left. You will not have to complete the checklist nor submit it to anyone; it is for your guidance in observing and mentoring the HW.
3. There will not be an opportunity for the counsellor to use all of the skills listed in the checklist in a single counselling session. Therefore, make brief notes to help you remember which skills were and were not used in this session. Transfer your notes to **Mentor-Supervisor Tool: Record for Tracking Individual Health Worker Progress**. You should have one monitoring tool for each health worker you mentor.
4. To help you locate the appropriate information, the **Mentor-Supervisor Job Aid: Observation Checklist** for IYCF Counselling is divided into six different sets of skills: i) Background Information; ii) Counselling Step 1: Assess; iii) Counselling Step 2: Analyze; iv) Counselling Step 3: Act; v) Appropriate Use of Materials; vi) Communication Skills.
5. At the end of the session, if a counsellor has passed along misinformation or failed to correct misinformation during the session, find a way to present the correct information to the mother/caregivers without having the Counsellor lose credibility in her/his role

Following the Counselling Session:

1. At the end of the session (and after the mother has left), ask the Counsellor how s/he felt about the counselling sessions, and discuss your observations with the HW. Remember to concentrate on giving positive feedback.*
2. Decide on a change together [a small, do-able action] that the HW can work to improve before the next mentoring visit.
3. Gather monitoring data.

* Stress during training: Most people believe that pointing out mistakes will reduce failures and improve performance. However, studies have shown that the opposite is true – especially when it comes to learning new tasks. Pointing out the things that people do well helps them learn new skills and improves their performance in mastering new tasks.

Handout: Providing Effective Feedback

1. Give feedback in private.
2. Clarify the ultimate goal (for example, provide good quality IYCF counselling).
3. Together with the HW, set actions to achieve that goal. The role of the mentor is to provide feedback to assist the HW in mastering those actions and working to achieve the goal.
4. Make your feedback timely. In general, the sooner feedback is given, the better. However, it is not appropriate to provide feedback in the middle of a counselling session.
 - a. Aim to provide feedback immediately after a counselling session has ended and the mother has left. Knowing when the mentor will visit to observe a counselling session will allow the HW to better control his/her schedule to permit time for feedback.
5. Ask the HW to comment on his/her performance before giving your comments.
6. Praise the HW's strengths, mentioning specific areas where the HW performed well.
7. Where you (the mentor) observe weaknesses, prioritize those areas where the worker needs to improve, and comment on just a few weaknesses. Avoid overloading the worker with too much information.

Remember: Just as a mother cannot remember great amounts of information, a HW will have difficulty remembering what the mentor says if s/he comments on many needed improvements. Furthermore, it will not be possible for a HW to practice a great number of competencies at one time (for example, before the next mentor visit).

8. Make certain the HW understands *why* a particular change is needed – why it is *important*.
9. *Be specific:* The HW needs to understand *how* their performance of a particular task was good or poor. Comments such as 'good job' or 'you did that incorrectly' are not effective feedback.

Helpful feedback is 'actionable.' Help the HW find solutions to problems, where possible. Offer several examples to explain the correct way to perform a task. Make suggestions using phrases such as 'How about doing the task this way?' or 'What if you tried this?'. Use simple language, and when possible, show or 'model' the way a task should be performed.

Ask the HW to 'show back' how to perform the task, and comment on what s/he is now doing correctly (or give a further description of what still needs improvement).

10. With the HW, identify opportunities for the worker to practice, in order to improve his/her performance as soon as possible (for example, by counselling another mother experiencing the same issue).
11. At the end of the feedback, ask the HW to summarize the things s/he will practice before the next mentoring session. Suggest that a peer HW observe and provide feedback to help the HW practice these tasks.
12. Before ending the mentoring visit, ask the worker to summarize the things upon which s/he has already improved, and help the HW track his/her incremental progress toward the goal (good quality IYCF counselling). Praise the worker for the progress already made!
13. Make a note of what the worker has agreed to do and remember to check on the worker's progress at the beginning of your next mentoring visit.

Session 6: Match Tools to Steps in the Mentoring (Mentoring-Supervision) Process

Time: 60 minutes

Objectives

After completing this session, participants will be able to:

1. Complete the Mentor-Supervisor's Self-Assessment Tool and explain how to use the Health Worker's Self-Assessment Tool
2. Explain which tools can be used during the different steps in the process to improve IYCF counselling

Preparation

- **Handout:** Health Worker's Self-Assessment in IYCF Counselling
- **Handout:** Mentor-Supervisor's Self-Assessment Tool
- **Flipchart:** Model of Mentoring using a Combination of Approaches
- **Flipchart:** Drawing of Table 'Match Tools to Steps in the Improvement Process'

Activity Objective 1: Introduce Self-Assessment Tools and Discuss their Purpose

Methodology: Interactive presentation, complete forms

Suggested Time: 30 minutes

Instructions:

1. Review **Handout:** Health Worker's Self-Assessment in IYCF Counselling
2. Explain its intended use
3. Orient participants to **Handout:** Mentor-Supervisor's Self-Assessment Tool, noting the sections for:
 - competencies (knowledge and skills) obtained during IYCF training
 - competencies they will obtain during the training on mentoring (supportive supervision/mentoring and related monitoring)

Inform participants that this is a tool intended to help them assess their own experience in mastering the knowledge and skills that they will need to draw upon as they mentor other workers. It is a tool for their own use.

4. Ask participants to complete the self-assessment tool and to record 'where they are' right now with respect to i) existing opportunities to practice the competencies; ii) their comfort level with observing and providing feedback to health workers/IYCF counsellors; or iii) their knowledge of the elements of supportive supervision/mentoring and monitoring.
5. Discuss participants' observations and comments about the tool. What decisions might a mentor-supervisor make based on completing this tool? In your opinion, could it be useful?

Note: Improvement is a continuous process from which *everyone* can benefit.

Activity Objective 2: Match Tools to the Steps in the Process to Improve IYCF Counselling

Methodology: Interactive presentation

Suggested Time: 20 minutes

Instructions:

1. Have posted from Session 3: **Flipchart** of Model of Mentoring (Mentoring-Supervision) using a Combination of Approaches. Refer to the box showing "Four Steps in the Process to Improve IYCF Counselling."
2. Ask participants: Can you suggest which tools (self-assessment tools, health worker job aids, observation checklists) could be used for any of these steps?
3. After a few responses, point out that we have already used the Health Worker's Job Aid: IYCF Assessment and the Mentor-Supervisor Observation Checklists to counsel and to observe with feedback. Keep this flipchart posted during the remainder of the training; as we use additional tools, we will point out where they are being used in the process

Key Content

Model of Mentoring Using a Combination of Approaches

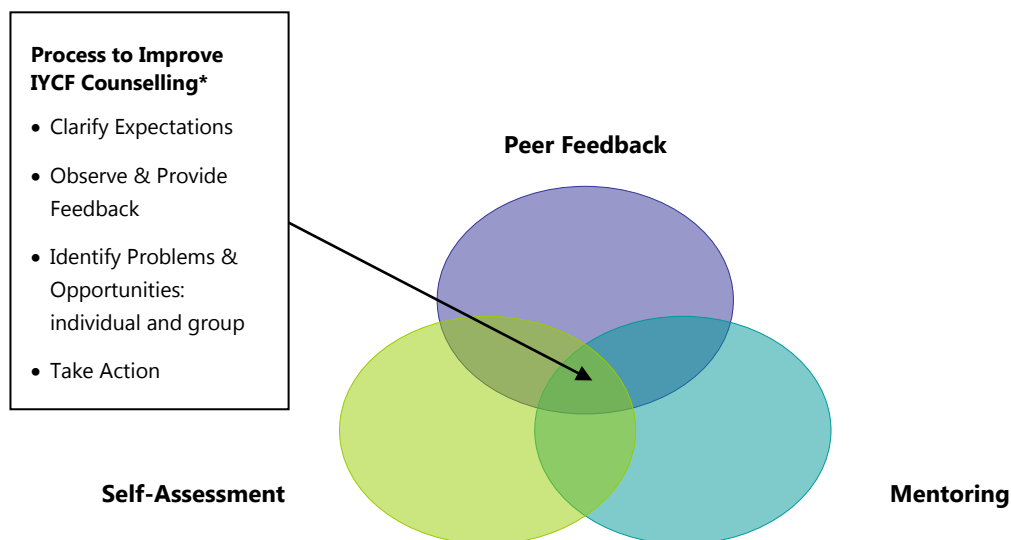


TABLE: Match Tools to Steps in the On-Going Process to Improve IYCF Counseling

Steps	Tools
1. Clarify expectations (the knowledge and skills every health worker and every supervisor should have)	<ul style="list-style-type: none"> • Self-Assessment for Supervisors • Self-Assessment for Health Workers
2. Observe and provide feedback (from Peer health worker; from Mentor-Supervisor)	<ul style="list-style-type: none"> • Health Worker Job Aid: IYCF Assessment • Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counseling
3. Monitor and assess HW performance: individual HWs and groups of HWs	<ul style="list-style-type: none"> • Tabulation Form • Action: Review Tabulation Forms; identify individual and group weaknesses
4. Take action	<ul style="list-style-type: none"> • For <u>individual</u> HW: on-the-job mentoring by mentor-supervisor to address issues • For <u>groups</u> of HWs: refresher training to address systemic issues

- Competencies
 - Spell out what knowledge and skills a health provider is expected to have mastered to provide good quality IYCF counselling.
- Peer feedback:
 - Classroom practice: Peers and other participants provide feedback using the Observation Checklist
 - Field practice: Peers conduct observation and offer feedback using the Observation Checklist
 - On-the-job: Coworkers and partners conduct observation and provide feedback using the Observation Checklist
- Job aids help HWs accomplish tasks in the following ways:
 - They structure the process and help the health worker obtain a complete information during the assessment step of 3-Step IYCF Counselling.
 - They structure the observation and feedback from mentors (mentor-supervisors) using an Observation Checklist while observing a health worker providing IYCF counseling.
- Tabulation forms are used to:
 - Organize data to track the progress of individual workers
 - Distinguish difficulties experienced by individual workers and those shared among many workers (systemic weaknesses)
 - Help determine whether to address weaknesses for an individual worker (on-the-job assistance/modeling by a supervisor) or to implement a refresher training for an entire group of workers

Health Worker's Self-Assessment in IYCF Counselling

Competency Practice & Progress Tracking Form

Instructions:

- Track your practice by putting a ✓ in the first box (column) for each skill you have practiced.
- In the second box (column), enter a ✓ for competency where a peer has observed you and provided feedback.
- In the third box (column), enter a ✓ for competency observed by a mentor-supervisor who provided feedback.

Competencies	Practiced	Peer observed & feedback	Mentor- Supervisor observed & feedback
1. Determine a child's age using 'completed months'			
2. Interpret a child's growth card			
3. Use Listening and Learning skills (list of six skills)			
4. Use <i>Building Confidence</i> and <i>Giving Support</i> skills (list of six skills)			
5. Assess a breastfeed (using Breastfeeding Observation Job Aid)			
6. Position a baby at the breast <ul style="list-style-type: none"> • Four signs of good positioning • Demonstrate different positions: <ul style="list-style-type: none"> - Cradle - Cross-cradle - Side-lying - Underarm - Cross-position for twins 			
7. Help a mother to attach her baby at the breast <ul style="list-style-type: none"> • Four signs of good attachment • How to hold breast • Signs of effective suckling 			
8. Explain how the breast makes milk			
9. Explain to a mother the optimal pattern of breastfeeding <ul style="list-style-type: none"> • Unrestricted or demand feeding • Day and night • Let baby finish first breast; offer the second 			
10. Help a mother to express her milk by hand			
11. Help a mother to cup-feed her baby			
12. Take a breastfeeding history for infants 0-5 months old			

Competencies	Practiced	Peer observed & feedback	Mentor-Supervisor observed & feedback
13. Inform women about optimal infant feeding (early skin-to-skin contact, early initiation of breastfeeding, exclusive breastfeeding up to 6 months, and continued breastfeeding up to 2 years)			
14. Counsel a pregnant woman about breastfeeding (importance and management)			
15. Help a woman to initiate breastfeeding within an hour after delivery			
16. Support exclusive breastfeeding for the first 6 months of life			
17. Help a mother to continue breastfeeding up to 2 years of age or beyond			
18. Help a mother with 'not enough milk'			
19. Help a mother with a baby who cries frequently			
20. Help a mother whose baby is refusing to breastfeed			
21. Help a mother who has flat or inverted nipples			
22. Help a mother with engorged breasts			
23. Help a mother with sore or cracked nipples			
24. Help a mother with mastitis			
25. Help a mother to increase her breast milk or to start breastfeeding again (relactate)			
26. Help a mother to breastfeed <ul style="list-style-type: none"> • a sick baby under 6 months 			
27. Explain the importance of continued breastfeeding up to 24 months and beyond			
28. Help mothers who are employed to continue to breastfeed			
29. Explain why there is an optimal age for children to start complementary feeding			
30. Explain to a mother the recommended complementary feeding practices			
31. Describe age-appropriate frequency, amount, thickness, and variety for an infant 6 – 8 months			
32. Describe age-appropriate frequency, amount, thickness, and variety for an infant 9 – 11 months			
33. Describe age-appropriate frequency, amount, thickness, and			

Competencies	Practiced	Peer observed & feedback	Mentor-Supervisor observed & feedback
variety for an infant 12 – 23 months			
34. List local foods rich in iron			
35. List local foods rich in vitamin A			
36. Explain the importance of animal-source foods			
37. Describe the importance of responsive feeding			
38. Describe recommended hygiene practices for mother/caregiver/baby			
39. Describe appropriate feeding during illness and recovery for a child 6-23 months			
40. Use Health Worker Job Aid: IYCF Assessment			
41. Conduct a food demonstration to help a mother/caregiver to feed her child aged 6-23 months			

Mentor-Supervisor's Self-Assessment Tool

Practice and Confidence in Mentoring

Instructions: For each competency in the table, rate whether you have practiced this competency (column 1) and rate your ability to mentor others to carry out the task (column 2).

For the column on IYCF Competencies 'Practice': Enter Y or N (yes or no) to indicate whether you have had an opportunity to practice this skill outside of training.

For the IYCF Counselling 'mentoring' column: rate your level of confidence in being able to observe a worker using this competency, identify the needed changes, and coach a worker to make those changes. How confident are you?

- 0 = no confidence
- 1 = limited confidence
- 2 = moderate confidence
- 3 = complete confidence

Competency	Practice outside classroom? (Y / N)	Mentoring: How confident are you? (0, 1, 2, 3)
MIYCN/IYCF Counselling-related Competencies		
1. Determine child's age and record using 'completed months' (Validate Date-of-Birth using growth card, EPI card, or birth certificate. Confirmation correct calculation of 'completed age in months')		
2. Explain to mother the recommended breastfeeding practices and why they are important Support a mother to practice the recommended breastfeeding practices		
3. Explain to a mother the optimal pattern of breastfeeding <ul style="list-style-type: none"> • Unrestricted or demand feeding • Day and night • Let baby finish first breast; offer the 2nd 		

Competency	Practice outside classroom? (Y / N)	Mentoring: How confident are you? (0, 1, 2, 3)
4. Help a mother position a baby at the breast <ul style="list-style-type: none"> • Explain why knowing different positions is important • Explain four key points of good positioning • Describe how mother should support breast for feeding • Help a mother practice main positions <ul style="list-style-type: none"> - Sitting: cradle, cross-cradle - Lying - Underarm - Cross-position for twins 		
5. Help a mother to attach her baby at the breast <ul style="list-style-type: none"> • Four signs of good attachment • Signs of effective suckling 		
6. Support a mother to overcome common breastfeeding difficulties: <ul style="list-style-type: none"> • Engorgement • Cracked and sore nipples • Perception of insufficient milk • Mastitis • Flat and inverted nipples 		
7. Help a mother to express her milk by hand		
8. Help a mother to cup-feed her baby		

<p>9. Explain to a mother/caregiver the recommended complementary feeding practices, including: Age at which complementary feeding should start (nutritional needs and developmental readiness) Characteristics:</p> <ul style="list-style-type: none"> • Frequency • Amount • Texture (consistency, thickness) • Variety • Responsive feeding • Hygiene <p>Importance of iron-rich foods; vitamin A; ways to fill the gaps; importance of animal-source foods</p> <p>Importance of continued breastfeeding</p>		
<p>10. Describe the importance of responsive feeding</p>		
<p>11. Describe appropriate handwashing for mother/caregiver/baby</p>		
<p>12. Explain importance of eating during child illness</p> <ul style="list-style-type: none"> • Describe appropriate feeding during illness and recovery: for child under 6 months, for child over 6 months 		
<p>13. Help parent/caregiver prepare complementary foods for children over 6 months (by age: starting at 6 months, 6-9 months; 9-12 months; 12-24 months)</p>		
<p>14. Describe how to add multiple micronutrient powders (MNPs) to food.</p>		
<p>15. Conduct a feeding demonstration with a mother/caregiver to help feed her 6-23-month-old child</p>		

<p>16. Counsel a woman (including pregnant and lactating mothers, and adolescent girls) about their own nutrition</p> <ul style="list-style-type: none"> • Explain Life Cycle approach to malnutrition (under- and over-nutrition) and consequences • Describe national micronutrient supplementation schedules (including IFA and Vitamin-A supplementation) for adolescents, and pregnant and lactating women • Help mothers correctly use available micronutrient supplements • Help adolescent/pregnant or lactating woman determine how to: <ul style="list-style-type: none"> - increase her food intake (local, available, feasible, affordable) - enhance food variety - enhance iron absorption/reduce inhibitors of iron absorption • Describe the recommended deworming schedule for pregnant women and children <24 months • Describe recommendations for physical activity and rest for pregnant women. 		
<p>17. Interpret and explain growth data from growth chart (normal/adequate growth; stagnant growth; indication of poor growth/problem) to mother/caregiver</p>		
<p>18. Use <i>Listening and Learning</i> skills to counsel (list of six skills)</p>		
<p>19. Use <i>Building Confidence and Giving Support</i> skills to counsel (list of six skills)</p>		
<p>20. Use Job Aid: IYCF Assessment</p>		
<p>21. Use Job Aid: Adolescent and Woman's Nutrition Assessment</p>		
<p>22. Use 3-Step Counselling</p> <ul style="list-style-type: none"> • Assess situation completely before providing any information • Prioritize any difficulties • Discuss a limited amount of information • Negotiate • Ask mother/caregiver to repeat 'agreed-upon-action' • Set next appointment 		
<p>23. Use Counselling Card(s) during counseling</p>		

Competencies related to Supportive Supervision/Mentoring and Monitoring		
24. Define Supportive Supervision/Mentoring		
25. Orient workers to the supportive supervision process		
26. Explain how to conduct a mentoring visit		
27. Use an observation checklist to observe, assess and analyze the performance of a health worker providing IYCF Counselling		
28. Use Tabulation Forms to identify weaknesses in performance among individual workers and in groups of workers		
29. Following counselling, provide feedback to health worker/IYCF Counsellor based on the results of observation		

Session 7: Practice Mentoring (Mentoring-Supervision) Using Observation Checklists and Providing Feedback

Time: 2 hours

Objectives

After completing this session, participants will be able to:

1. Apply the skills of mentoring (mentoring-supervision)
2. Use the Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling

Preparation

- Have ready for each participant: a photocopy of Health Worker Job Aid: IYCF Assessment, and Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling (in Session 4)
- Counselling Cards
- Case studies
- Use prepared flipcharts of summarized *Listening and Learning*, and *Building Confidence and Giving Support* skills

Activity Objective 1: Practice Providing Mentoring (Mentoring-Supervision) s

Methodology: Classroom practice

Suggested Time: 2 hours

Instructions:

1. Divide participants into groups of three: mother, IYCF counsellor, and mentor-supervisor. (Suggestion: Use three lines to form groups of three.)
2. Distribute copies of the **Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling** the **Health Worker Job Aid: IYCF Assessment** to each participant
3. Distribute a set of counselling cards to each group of three.
4. Practice Case Study 1: Ask the 'mother' of the working groups to gather together.
5. Read the case study to the 'mothers' ONLY, and ask them to return to their working groups. Note: The 'mothers/caregivers' need to be sure that they give all the information included in their 'case study'.
6. *Emphasize* to participants (mother) the need to stick to the (minimal) information in the case studies and not embellish.
7. The IYCF Counsellor of each working group (of three) asks the 'mother' about their situation, and practices the 'Assess, Analyze and Act' steps, using *Listening and Learning* skills and *Building Confidence and Giving Support* skills.
8. In each working group, the mentor-supervisor's task is to record the skills the counsellor used on **Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling**.

9. Facilitators: While each group is practicing the case study, observe the groups to make certain that the Mentor-Supervisor and the counsellor are using the appropriate job aids. Note also: how are the counselling cards being used.
10. When counselling session is completed, mentor-supervisor should share his/her checklist and give feedback to counsellor. Mother/caregiver and IYCF counselor will then give feedback to mentor-supervisor.
11. Facilitator recognizes all of the inputs, and/or fills-in gaps for Case Study 1.
12. Participants in working groups switch roles. Repeat steps four through ten, using Case Studies 2 and 3.

Key Content

Communication Between the Mentor-Supervisor and the Counsellor

- At the end of the session (after the mother has left), ask HW/counsellor to summarize what s/he is doing well, and what s/he can do to improve further.
- The mentor-supervisor should go over the relevant points in the checklist with the HW/counsellor, focusing on encouraging strengths and identifying areas that need improvement.
- Make the point that small changes in frequently repeated tasks can lead to large changes in impact.
- Set appointment for next visit.

Case Study Material

Case Study #1

You visit a new mother, Jamila, with a newborn son who is 10 days old. Jamila is only breastfeeding, but her mother-in-law insists that she give water to the baby because the weather is very hot. The grandmother thinks that the baby is thirsty and cries due to hot weather.

Case Study #2

You visit Galina, whose baby is 6½ months old. Galina tells you that her baby is too young for foods because the baby's stomach is too small. She will just continue to breastfeed him until he is older. Galina's baby has been very healthy and growing well. Her husband and mother-in-law agree with her; they think that since the baby is healthy and growing well, he doesn't need other foods at this time.

Case Study #3

Savita's daughter is now 12 months old. The baby is healthy and active. Savita is breastfeeding her daughter, and also feeds her bites of adult foods at meal times. Savita tells you that she cannot buy other foods for her daughter. She is preparing to work outside the home and wants to know how to stop breastfeeding.

CASE STUDIES

Case Study #1

You visit a new mother, Jamila, who has a 10-day-old son. Jamila is only breastfeeding, but her mother-in-law insists that she give water to the baby because the weather is very hot. The grandmother thinks that the baby is thirsty and cries due to hot weather.

Case Study #2

You visit Galina, whose baby is 6½ months old. Galina tells you that her baby is too young for foods because the baby's stomach is too small. She will just continue to breastfeed him until he is older. Galina's baby has been very healthy and growing well. Her husband and mother-in-law agree with her; they think that since the baby is healthy and growing well, he doesn't need other foods at this time.

Case Study #3

Savita's daughter is now 12 months old. The baby is healthy and active. Savita is breastfeeding her daughter, and also feeds her bites of adult foods at meal times. Savita tells you that she cannot buy other foods for her daughter. She is preparing to work outside the home and wants to know how to stop breastfeeding.

Session 8: Monitoring

Time: 60 minutes

Objectives

After completing this session, participants will be able to:

1. Define terms related to program monitoring and mentoring (mentoring-supervision).
2. Describe how mentoring (mentoring-supervision) can contribute to monitoring and improved programs and services.

Preparation:

- Prepare five sets of the matching game with 10 terms and their definitions.

Activity Objective 1: Define Terms Related to Program/Services Monitoring and Mentoring (Mentoring-Supervision)

Methodology: Group work—matching game

Suggested Time: 30 minutes

Instructions:

Divide participants into five groups and distribute to each group the 'Program Monitoring Matching Game': a set of cards with ten terms and their definitions (key content).

1. Ask each group to spread out the terms on definition on their table, and match the definitions to the terms.
2. When finished, each group walks around and compares results.
3. Discuss and summarize.

Key Content

What is Monitoring?

- Monitoring is the regular systematic collection, review and use of data to provide information on progress in program implementation, coverage and quality.

Why Monitor?

To gather information to:

- Determine whether essential activities and services are being implemented (provided to whom, when, how often, in what context)
- Identify areas of strength and weakness in those activities and services
- Determine what changes are necessary to strengthen or improve those activities and services
- Use ongoing monitoring to determine whether those changes are having the desired effect
- Remind and motivate workers to work toward achieving a defined standard of program quality

Is Monitoring the Same as Supervision?

- we monitor the intervention
- we mentor (or supervise) an individual

What is an Indicator?

An indicator is a variable that:

- measures one aspect of a program
- has the following characteristics: SMART (specific, measurable, achievable, relevant, time-bound)

An appropriate set of indicators will include at least one for each significant element of the program.

Target

The statement of an objective that is:

- time-limited
- can be measured by an indicator

A target can be thought of as a 'bullseye' (a standard to be achieved). Targets are set at baseline and movement toward achievement of a target is measured periodically over the life of a program. Incremental progress toward achieving targets can be monitored by measuring movement toward achieving full activities implementation, coverage and quality standards.

Activity Objective 2: Identify the Relationship Between Mentoring and Monitoring; and Identify Reasons for Monitoring

Methodology: Brainstorming

Suggested Time: 30 minutes

Instructions:

1. Ask participants: What is the link between mentoring and monitoring? After hearing responses, show graphic below to summarize.
2. Ask the same groups to discuss the following questions (written on flipchart):
 - What to monitor?
 - What for?
 - How to monitor?
3. In plenary: discuss and summarize.

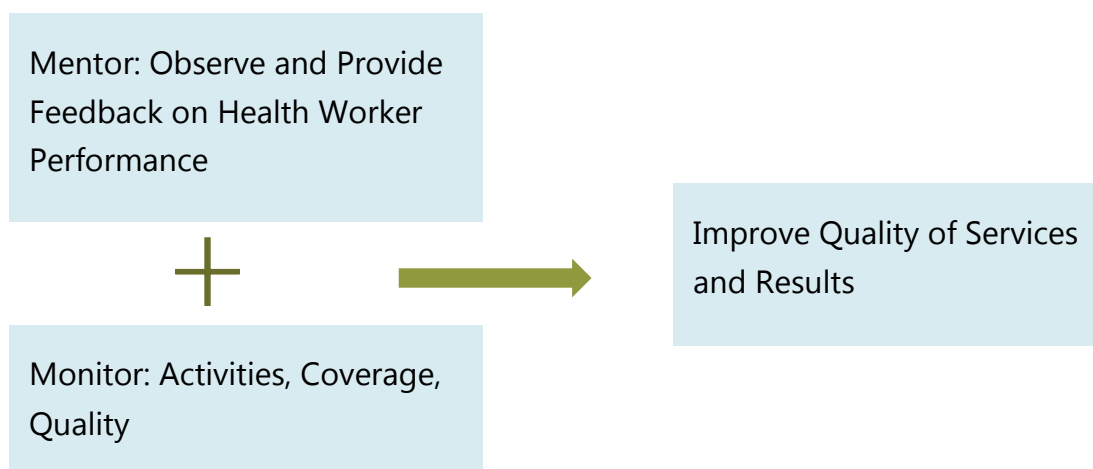
Key Content

What is the Link between Mentoring and Monitoring?

In some systems, data recorded by health workers about IYCF support activities may be obtained and compiled by mentors (mentor-supervisors) during mentoring visits and submitted periodically as part of routine monitoring and reporting. Such data can help management personnel determine whether defined targets for IYCF counselling and other IYCF support activities were met during a reporting period. These data can also help

track progress in achieving geographic and population coverage, as well as help monitor the progress of individual health workers in improving the quality of their work. Thus, *mentor-supervisors can function as a key link between mentoring and monitoring activities*, helping to keep the IYCF program focused on the essential activities to achieve desired results.

Link Between Mentoring and Monitoring to Improve Quality of Services and Outcomes/Results



Further Discussion Related to Monitoring

What to Monitor?

Essential activities to provide data for assessing the progress of implementing IYCF-related program activities (including training or capacity-strengthening, implementation of IYCF counselling and other IYCF support activities at key service and community contact points; and provision of supportive supervision/mentoring to health workers), as well as the achievement of coverage and quality of services delivered.

What For?

- improve program planning and adjust program strategies
- improve program performance
- improve program management
- track progress in achieving outcomes

How to Monitor?

- data collection
- tabulation
- data analysis
- interpretation and application to program management

Training Aid: Matching Game: Definitions Related to Program Monitoring and Supportive Supervision/Mentoring

1. Monitoring	Systematic and regular collection, review and use of data to provide information on progress in program implementation, coverage and quality
2. Mentoring	A collaborative and ongoing effort between a trained mentor-supervisor or peer and a health worker to motivate and support health workers to build the knowledge and skills to improve their performance (of IYCF counselling) and increase their confidence
3. Indicator	A variable that measures one aspect of a program
4. Target	A goal which is achieved over time
5. Observation Checklist	Tool to help supervisors/mentors understand what to do and how to do it
6. Data	Raw, unorganized facts that need to be processed in order to be useful.
7. Information	Data that have been processed, organized, structured or presented in a given context.
8. Mentor (Mentor-Supervisor)	An individual with more experience and training than those s/he mentors Trained in both content area (IYCF counselling) and in mentoring-supervision A 'resource' for those mentored
9. Counselling	Guidance offered by trained personnel (health & social workers, doctors, etc.) to help a person resolve problems (for example, social, emotional, personal, nutritional/health problems)
10. Competencies	State what health workers who provide IYCF support need to <i>know</i> and <i>do</i> in order to deliver high quality services

Session 9: Using Observation Checklist Data: Tabulation, Analysis and Taking Action

Time: 60 minutes

Objectives

After completing this session, participants will be able to:

1. Demonstrate how to score and analyze data gathered by a mentor-supervisor observing a counsellor
2. Evaluate the performance of an individual worker over time, and discuss how to determine which worker(s) to prioritize for immediate attention/on-the-job training
3. Examine the data from multiple workers and determine what decisions can be made from that analysis

Preparation

Give each participant one copy of the following documents:

- Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling (completed for Aibek, August 2016)
- Worksheet 1: Mentor-Supervisor Job Aid -- Tabulation Form: Individual. Tracking Sheet – Individual Worker Progress (partially completed for Aibek; to enter August 2016 data)
- Worksheet 2: Mentor-Supervisor Job Aid -- Tabulation Form: Group. Monthly/Quarterly/Periodic Summary Sheet (missing Aibek's August 2016 data).
- Worksheet 3: Mentor-Supervisor Job Aid -- Tabulation Form: Group. Monthly/Quarterly/Periodic Summary Sheet (partially completed summary tabulations for August 2016).
 - **Note:** In addition to the participants' Worksheets 1, 2 and 3, see the two facilitators' Worksheets (with completed answers).
- Flipchart or projector for prepared Excel sheet to illustrate line chart comparing progress over time of multiple workers
- Calculators (option)
- Flipchart paper and markers

Activity Objective 1: Transfer Data from Completed Mentor-Supervisor Observation Checklist to Tabulation Forms

Methodology: Small group work

Suggested Time: 20 minutes

Instructions:

1. Explain that this activity explores how to use the observation data the obtained by the mentor-supervisor.

2. Divide participants into groups of three. Each participant is to complete his/her own worksheets, but participants can work together.
3. Transfer data from the Mentor-Supervisor Job Aid: Observation Checklist for Aibek to Worksheet 1: Tabulation Form - Individual
4. Transfer the same data (from the Mentor-Supervisor Job Aid: Observation Checklist for Aibek) to the Tabulation Form - Group.
5. Following the instructions, use Worksheet 3 to enter the missing data and calculate all missing column and row percentages.
6. Compare and discuss numerical results within your group.
7. Facilitator should compare, summarize and discuss.

Activity Objective 2: Examine the Data by Individual Worker

Methodology: Small group work discussions

Time: 40 minutes

Instructions:

Individual worker performance

1. Examine the form for tracking an individual worker's progress over time, and discuss the following:
 - Is this worker experiencing consistent problems with a particular competency? How can you tell?
 - What solutions might you propose?
2. Is this worker's overall performance improving over time?
3. How could you compare this worker's progress over time (trend line) with that of other workers? (Show prepared **flipchart** or project Excel graphic comparing progress over time of multiple workers.)
4. How might looking at this comparison help you mentor your entire team?

Supervisor's [Monthly/Periodic] Tabulation Form for all workers

1. Examine the Monthly Tabulation Form in which the supervisor enters the monthly observation data from all of his/her observation
2. Are there problems shared by many workers (i.e., system-wide problems)? What are they and how did you detect them?
 - Review data by competency (row-by-row) to see where weaknesses are shared amongst workers.
 - What solutions could you propose?
 - How do these results compare with those from last quarter/the last two months? Do you see improvement? Consistent weaknesses/challenges?
 - What solutions could you propose?

3. Facilitator: Summarize and discuss in plenary.

Key Content

Analysis of supervisor observation data can be helpful in making decisions to improve health worker performance, both for individual workers as well as an entire group.

Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counseling

Name of Health Provider: _____ Aibek _____

Facility: _____

Name of Supervisor: _____ Jibek _____

Date of Observation: _____ 24 Aug 2016 _____

Instructions: Based on your observation, check 'Yes' if the action was done adequately, and 'No' if the action was not done or not done adequately. Check N/A if the activity was not assessed or not applicable, and explain. Add other comments and notes to help you recall your thoughts for later discussion with the worker.

SKILL SET 1: Background Information		Y	N	NA	Comments/Notes
1.	Obtain child's correct age Valid DOB, & confirm correct calculation of age in months	√			Child's age: _____ completed months
2.	Ask if this is the first child		√		
3.	Ask about recent illness	√			
4.	Ask about child's iron status and related interventions (hemoglobin level, iron supplements and deworming)			√	
5.	Check child's growth card Note if worker explained child's growth trend to mother/caregiver		√		
6.	Ask if mother has concerns about child	√			
7.	Ask about mother's own situation If pregnant: ask about additional food, IFA/other supplements If lactating: ask about additional food two times, IFA/other supplements (if infant < 3 mos) Ask if mother has any concerns (health or other)		√		
SKILL SET 2 COUNSELLING Step 1: ASSESS		Y	N	NA	Observations/Notes
8.	Assess the current breastfeeding status	√			
9.	Check if any breastfeeding difficulties	√			
10.	Observe a breastfeed (if necessary)			√	
11.	Ask about 'other liquids'	√			

12.	Ask about 'complementary food'	√			
13.	Assess Frequency	√			
14.	Assess Amount	√			
15.	Assess Thickness	√			
16.	Assess Variety		√		
17.	Assess Responsive Feeding Sat with child Helped/encouraged child during feeding/let child feed self Modeled eating Re-focused child's attention, as necessary Offered more/another food		√		
18.	Assess Hygiene: wash hands with soap/ash and water ... BEFORE preparing foods/feeding child/self AFTER using toilet (mother and child) and after cleaning baby; any contact with human/animal feces	√			
19.	Complete Assessment before going on to Step 2: Analyze and Step 3: Act		√		
SKILL SET 3: COUNSELLING Step 2: ANALYZE		Y	N	NA	Observations/Notes
20.	Consider deviation from age-appropriate recommended practices	√			
21.	Consider issues reported by Mother		√		
22.	Correctly prioritized the most important issues for action		√		
SKILL SET 4: COUNSELLING Step 3: ACT		Y	N	NA	Observations/Notes
23.	Praise the mother/father /caregiver for positive practices	√			
24.	If difficulty identified, address the reasons		√		
25.	Discuss limited and relevant information		√		
26.	Help mother/caregiver problem-solve, as appropriate		√		

27.	Encourage mother/caregiver to try new/recommended practice Address any concerns mother/caregiver expresses	√			
28.	Agree upon actions Ask mother/caregiver to repeat back		√		

SKILL SET 5: APPROPRIATE USE OF MATERIALS		Y	N	NA	Observations/Notes
29.	Use CCs to reinforce good breastfeeding practices		√		
30.	Point out characteristics of Complementary Feeding using appropriate CC for age group		√		
31.	Use CCs to reinforce good hygiene practices		√		
SKILL SET 6: COMMUNICATION SKILLS		Y	N	NA	Observations/Notes
32.	Use good non-verbal communication Keep head level Pay attention (eye contact) Remove barriers (tables & notes) Take time Appropriate touch (use responses/gestures that show interest)	√			
33.	Ask questions that allow for detailed information		√		
34.	Accept what mother/father/caregiver thinks and feels Avoid using judging words		√		
35.	Give practical help		√		

Total number of lines scored 'Yes': _____

Total number of lines with "Yes" + "No" response: _____

Score for today's mentoring (Total 'Yes' / Total 'Yes' + 'No'): _____ %

Comments & recommendations:

Worksheet 1
Mentor-Supervisor Job Aid
Tabulation Form_Individual
[Monthly/Quarterly/Periodic] Tracking Sheet_Individual Worker Progress

Supervisor: __Jibek

Health worker: __Aibek__

Facility: _____

Instructions: Enter date of observation and scores (1, 0, N/A) from Supervisor Job Aid: Observation Checklist for IYCF Counseling Supervision Checklist for observation of Aibekbon 24. Aug 2016

1 = Yes: done; performance adequate

0 = No: not done, or inadequate performance

N/A = Not Applicable; supervisor judges the task to be 'not applicable'

Question No.	Quarter 1: 2016	Quarter 2: 2016	Quarter 3: 2016	Quarter 4: 2016	Quarter 1: 2017	Quarter 2: 2017	Row Total (total 1 / total 1 + 0)
Record Date of Observation	10 Feb 2016	4 May 2016	24 Aug 2016				
1	0	0					
2	0	0					
3	1	0					
4	N/A	N/A					
5	1	0					
6	0	1					
7	0	0					
8	1	1					
9	0	1					
10	N/A	0					
11	1	1					
12	1	1					
13	1	N/A					
14	0	N/A					
15	1	N/A					
16	0	N/A					
17	0	N/A					
18	1	1					
19	0	0					
20	0	1					
21	0	0					

22	0	0					
23	0	1					
24	0	1					
25	0	0					
26	0	0					
27	0	1					
28	0	0					
29	0	0					
30	0	N/A					
31	0	0					
32	0	1					
33	0	0					
34	0	1					
35	0	0					
Column Total '1'	8	12					
Column Total '1' + '0'	33	28					
Percentage '1s'	24%	43%					

Worksheet 2

Mentor-Supervisor Job Aid Tabulation Form_Group

[Monthly/Quarterly/Periodic] Summary Sheet

Supervisor Name: Jibek

Month: August

Year: 2016

Instructions: enter Scores from Supervisor Observation Checklist for

1 = Yes; adequate performance

0 = No; inadequate performance

N/A = Not applicable; supervisor judges the task to be 'not applicable'

Question No.	HW 1: Name	HW 2: Name	HW 3: Name	HW 4: Name	HW 5: Name	HW 6: Name	HW 7: Aibek	Row Total (% yes) (total 1/total 0 + 1)
1	0	0	0	1	0	0		
2	1	1	0	1	0	1		
3	1	1	1	0	1	1		
4	N/A	N/A	N/A	N/A	N/A	N/A		
5	1	N/A	1	1	0	1		
6	1	0	1	1	1	0		
7	1	1	0	0	0	1		

8	1	1	1	0	1	1		
9	1	0	1	1	0	0		
10	N/A	N/A	0	1	1	1		
11	1	1	1	1	1	1		
12	1	1	0	N/A	1	1		
13	1	1	1	N/A	0	1		
14	1	1	1	N/A	1	1		
15	0	1	0	N/A	0	1		
16	1	1	0	N/A	1	1		
17	1	1	1	1	0	1		
18	1	1	0	1	1	1		
19	0	0	1	0	1	1		

20	1	1	1	1	0	0		
21	1	1	0	1	1	1		
22	0	1	1	1	0	1		

23	0	1	1	1	1	1		
24	1	1	1	N/A	1	1		
25	0	0	0	1	0	0		
26	0	1	0	1	1	1		
27	1	1	0	1	1	1		
28	1	1	0	1	1	0		

29	1	0	1	1	1	0		
30	1	0	0	N/A	1	1		
31	1	0	0	1	0	1		

32	1	0	1	1	1	1		
33	1	1	0	1	0	0		
34	1	0	1	1	1	0		
35	1	1	0	1	0	1		
Column Total 'Yes'								
Column Total 'Yes' + 'No'								
Percentage 'Yes'								

Worksheet 3

Mentor-Supervisor Job Aid Tabulation Form_Group

[Monthly/Quarterly/Periodic] Summary Sheet

Supervisor Name: ___Jibek_____

Month: ___August_____

Year: ___2016_____

Instructions: enter Scores from Supervisor Observation Checklist for

1 = Yes; adequate performance

0 = No; inadequate performance

N/A = Not Applicable; supervisor judges the task to be 'not applicable'

Question No.	HW 1: Name	HW 2: Name	HW 3: Name	HW 4: Name	HW 5: Name	HW 6: Name	HW 7: Aibek	Row Total (% yes) (total 1/total 0 + 1)
1	0	0	0	1	0	0		
2	1	1	0	1	0	1		
3	1	1	1	0	1	1		
4	N/A	N/A	N/A	N/A	N/A	N/A		
5	1	N/A	1	1	0	1		
6	1	0	1	1	1	0		
7	1	1	0	0	0	1		

8	1	1	1	0	1	1	1	__86__ %
9	1	0	1	1	0	0	1	__57__ %
10	N/A	N/A	0	1	1	1	N/A	__75__ %
11	1	1	1	1	1	1	1	__100__ %
12	1	1	0	N/A	1	1	1	__83__ %
13	1	1	1	N/A	0	1	1	__83__ %
14	1	1	1	N/A	1	1	1	__100__ %
15	0	1	0	N/A	0	1	1	__50__ %
16	1	1	0	N/A	1	1	0	__67__ %
17	1	1	1	1	0	1	0	__71__ %
18	1	1	0	1	1	1	1	__86__ %
19	0	0	1	0	1	1	0	__43__ %

20	1	1	1	1	0	0	1	<u>71</u> %
21	1	1	0	1	1	1	0	<u>71</u> %
22	0	1	1	1	0	1	0	<u>57</u> %

23	0	1	1	1	1	1	1	<u>86</u> %
24	1	1	1	N/A	1	1	0	<u>80</u> %
25	0	0	0	1	0	0	0	<u>29</u> %
26	0	1	0	1	1	1	0	<u>57</u> %
27	1	1	0	1	1	1	1	<u>86</u> %
28	1	1	0	1	1	0	0	<u>57</u> %

29	1	0	1	1	1	0	0	
30	1	0	0	N/A	1	1	0	
31	1	0	0	1	0	1	0	

32	1	0	1	1	1	1	1	<u>86</u> %
33	1	1	0	1	0	0	0	<u>43</u> %
34	1	0	1	1	1	0	0	<u>57</u> %
35	1	1	0	1	0	1	0	<u>57</u> %
Column Total 'Yes'	26	22	17	24	20			
Column Total 'Yes' + 'No'	33	32	34	27	34			
Percentage 'Yes'	79%	68%	50%	89%	59%			

Mentor-Supervisor Job Aid (Facilitator Worksheet)
Tabulation Form_Individual
[Monthly/Quarterly/Periodic] Tracking Sheet_Individual Worker Progress

Supervisor: __Jibek

Health worker: __Aibek__

Facility: _____

Instructions: Enter date of observation and scores (1, 0, N/A) from Supervisor Job Aid: Observation Checklist for IYCF Counseling Supervision Checklist for observation of Aibekbon 24. Aug 2016

1 = Yes: Done, performance adequate

0 = No: Not done, or inadequate performance

N/A = Not applicable: Supervisor judges the task to be 'not applicable'

Question No.	Quarter 1: 2016	Quarter 2: 2016	Quarter 3: 2016	Quarter 4: 2016	Quarter 1: 2017	Quarter 2: 2017	Row Total (total 1 / total 1 + 0)
Record Date of Observation	10 Feb 2016	4 May 2016	24 Aug 2016				
1	0	0	1				
2	0	0	0				
3	1	0	1				
4	N/A	N/A	N/A				
5	1	0	0				
6	0	1	1				
7	0	0	0				
8	1	1	1				
9	0	1	1				
10	N/A	0	N/A				
11	1	1	1				
12	1	1	1				
13	1	N/A	1				
14	0	N/A	1				
15	1	N/A	1				
16	0	N/A	0				
17	0	N/A	0				
18	1	1	1				
19	0	0	0				
20	0	1	1				
21	0	0	0				
22	0	0	0				

23	0	1	1				
24	0	1	0				
25	0	0	0				
26	0	0	0				
27	0	1	1				
28	0	0	0				
29	0	0	0				
30	0	N/A	0				
31	0	0	0				
32	0	1	1				
33	0	0	0				
34	0	1	0				
35	0	0	0				
Column Total '1'	8	12	15				
Column Total '1' + '0'	33	28	33				
Percentage '1s'	24%	43%	45%				

Mentor-Supervisor Job Aid (Facilitator Worksheet)
Tabulation Form - Group
Scored [Monthly/Periodic] Summary Sheet

Supervisor Name: Jibek

Month/Quarter: 3

Year: 2016

Instructions: Enter Scores from Supervisor Observation Checklist for

1 = Yes: Adequate performance

0 = No: Inadequate performance

N/A = Not applicable: Mentor-supervisor judges the task to be 'not applicable'

Question No.	HW 1: Name	HW 2: Name	HW 3: Name	HW 4: Name	HW 5: Name	HW 6: Name	HCP 7: Aibek	Row Total (% yes) (total 1/total 0 + 1)
1	0	0	0	1	0	0	1	<u> 29 </u> %
2	1	1	0	1	0	1	0	<u> 57 </u> %
3	1	1	1	0	1	1	1	<u> 86 </u> %
4	N/A	N/A	N/A	N/A	N/A	N/A	N/A	<u> 0% </u>
5	1	N/A	1	1	0	1	0	<u> 67 </u> %
6	1	0	1	1	1	0	1	<u> 71 </u> %
7	1	1	0	0	0	1	0	<u> 43 </u> %

8	1	1	1	0	1	1	1	<u> 86 </u> %
9	1	0	1	1	0	0	1	<u> 57 </u> %
10	N/A	N/A	0	1	1	1	N/A	<u> 75 </u> %
11	1	1	1	1	1	1	1	<u> 100 </u> %
12	1	1	0	N/A	1	1	1	<u> 83 </u> %
13	1	1	1	N/A	0	1	1	<u> 83 </u> %
14	1	1	1	N/A	1	1	1	<u> 100 </u> %
15	0	1	0	N/A	0	1	1	<u> 50 </u> %
16	1	1	0	N/A	1	1	0	<u> 67 </u> %
17	1	1	1	1	0	1	0	<u> 71 </u> %
18	1	1	0	1	1	1	1	<u> 86 </u> %
19	0	0	1	0	1	1	0	<u> 43 </u> %

20	1	1	1	1	0	0	1	<u> 71 </u> %
21	1	1	0	1	1	1	0	<u> 71 </u> %
22	0	1	1	1	0	1	0	<u> 57 </u> %

23	0	1	1	1	1	1	1	<u>86</u> %
24	1	1	1	N/A	1	1	0	<u>80</u> %
25	0	0	0	1	0	0	0	<u>29</u> %
26	0	1	0	1	1	1	0	<u>57</u> %
27	1	1	0	1	1	1	1	<u>86</u> %
28	1	1	0	1	1	0	0	<u>57</u> %

29	1	0	1	1	1	0	0	<u>57</u> %
30	1	0	0	N/A	1	1	0	<u>50</u> %
31	1	0	0	1	0	1	0	<u>43</u> %

32	1	0	1	1	1	1	1	<u>86</u> %
33	1	1	0	1	0	0	0	<u>43</u> %
34	1	0	1	1	1	0	0	<u>57</u> %
35	1	1	0	1	0	1	0	<u>57</u> %
Column Total 'Yes'	26	22	17	24	20	25	15	
Column Total 'Yes' + 'No'	33	32	34	27	34	34	33	
Percentage 'Yes'	79%	68%	50%	89%	59%	71%	45%	

Individual Worker Problems

- Do you see individual workers who are experiencing problems? How can you tell?
- What solutions could you propose?

Systemic Problems

- Are there system-wide problems (problems shared by many workers)? How can you detect these? [Review results activity-by-activity (looking at individual questions) to see where weaknesses are shared among workers.]
- How do these results compare with the results from last quarter/the last two quarters? Do you see improvements? Consistent weaknesses/challenges?
- What solutions could you propose?

Mentor-Supervisor's Record for Tracking Individual Health Worker Progress

Health Worker: _____ Position: _____

Mentor-Supervisor: _____ Facility: _____

Year: _____

ACTIVITIES		Record Date of Visit	Y/N	Comments/Agreed upon recommendations
1.	HW Records: reviewed	Q1	Yes ___ No ___	
		Q2	Yes ___ No ___	
		Q3	Yes ___ No ___	
		Q4	Yes ___ No ___	
2.	Follow-up: issues identified during last mentoring-supervision session	Q1	Yes ___ No ___	
		Q2	Yes ___ No ___	
		Q3	Yes ___ No ___	
		Q4	Yes ___ No ___	

SKILLS Observed INDIVIDUAL COUNSELLING		Record Score	Positive aspects	Mentor identified: areas for improvement
3.	Background Information	Q1		
		Q2		
		Q3		
		Q4		
4.	Step 1: Assess	Q1		
		Q2		

		Q3		
		Q4		
5.	Step 2: Analyze	Q1		
		Q2		
		Q3		
		Q4		
6.	Step 3: Act	Q1		
		Q2		
		Q3		
		Q4		
7.	Appropriate use of materials	Q1		
		Q2		
		Q3		
		Q4		
8.	Communication skills	Q1		
		Q2		
		Q3		
		Q4		
	Activities	Prioritized actions Mutually agreed upon recommendations		
9.	Prioritized action before next mentoring visit	Q1:		
		Q2:		
		Q3:		
		Q4:		
	Activities	Date of next SS Visit	Concrete steps before next visit	
10.	Next mentoring visit	Q1		
		Q2		
		Q3		
		Q4		

Session 10: Action Plan Development: Part I

Time: 60 minutes

Objectives:

After completing this session, participants will be able to:

1. State what issues need to be addressed at national, *oblast*, and *rayon* levels in order to implement mentoring in IYCF counselling to health workers
2. Consider and include the needs of both health workers and their front-line mentors when developing an Action Plan to implement mentoring to IYCF counsellors (health workers)

Preparation:

- **Facilitator preparation:** Review Session 3: What is needed to create an effective mentoring system
- **Handout: Action Plan Template** from Session 12: Actions Needed to Implement Mentoring (in IYCF Counselling) to Health Workers

Activity Objective 1: Discuss Action Needed at Different Levels (National, *Oblast*, and *Rayon*) to Implement Mentoring in IYCF Counselling of Health Workers

Methodology: Facilitated Discussion

Suggested Time: 20 minutes

Instructions:

1. Facilitator reminds participants that on Day 3 they will present their Action Plans for what needs to be accomplished to implement mentoring in IYCF counselling to health workers.
2. In addition to considering the actions needed to implement mentoring of individual workers on an ongoing basis, participants should consider the broader needs for institutionalizing the activity and strengthening the supervision system. Some of the elements found to make mentoring feasible in other settings were reviewed in Session 3, such as:
 - Take an approach that includes a mix of worker self-assessment, mutual peer observation and feedback, and mentoring from a designated mentor (mentor-supervisor)
 - Include mentoring (and related monitoring) responsibilities in the mentor's job description
 - Establish a supervision structure that identifies a designated mentor for each HW who will receive mentoring
 - Create approved schedule that specifies regular and scheduled mentoring visits
 - Conduct appropriate training
 - Use tools such observation checklists and reporting tools

NOTE to Facilitator: please review Session 3 prior to this discussion)

Activity Objective 2: Discuss what preparation Health Workers will need to understand the process of mentoring, and what assistance Mentors may need to prepare the Health Workers

Methodology: Facilitated discussion

Suggested Time: 10 minutes

Instructions:

Health workers will not receive training in mentoring. Therefore, they will need orientation to be introduced to this new activity.

1. Decide who will orient the HWs:
 - One possibility is that each mentor's group of HWs being be oriented together (as a group). They will need to understand the objectives of mentoring and the associated activities, such as the process of mentoring, frequency of mentor visits, what will happen during a mentoring visit (including the observation of a counselling session), and the expectations for the HW between visits (e.g., the HW will work on the 'small doable actions' agreed with the mentor, track his/her practice of competencies, provide peer observation and feedback to his/her partner HW). The HWs will also require orientation to any new tools they will use.
2. Ideally, the orientation would be carried out by the mentor him/herself. This could be a helpful first step in beginning to build a 'team' culture. Questions to consider include the following:
 - Would mentors need assistance in preparing such an orientation, and who would assist them?
 - Would newly-trained Mentors also benefit from follow-up similar to the follow-up and mentoring provided to newly-trained counsellors? Would it be useful for mentors to come together periodically in a group meeting to share ideas, discuss what they are seeing, and problem-solve around mutual challenges? Who might facilitate such meetings?
3. Request that participants consider these issues as they develop their Action Plans.

Activity Objective 3: Work on Action Plans in Small Groups

Methodology: Small group work

Suggested Time: 30 minutes

Session 11: Clinical Field Practice

Suggested Time: 4 hours (including travel)

Objectives

After completing this session, participants will be able to:

1. Observe and provide feedback (mentor) a health worker (IYCF Counsellor) who is counselling a mother with a child younger than 24 months
2. Reflect on strengths and weakness of the mentoring

Preparation

1. Advance preparation
 - Make arrangements at one or more health facilities that will have a sufficient number of mothers/caregivers and young children (less than 24 months old) available on the day of the clinical practice session.
 - Make transportation arrangements.
 - Ensure that materials are available for each participant: photocopies of Health Worker Job Aid: IYCF Assessment; Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling (both found in Session 4); a set of Counselling Cards for each pair of participants.
 - Prepare questions for post-clinical practice reflection and discussion on flipchart paper (see Activity Objective 2).
2. Day before clinical practice: prepare groups, give instructions
 - Explain the process, including the time for the clinical practice, arrangements for transportation, and the materials participants will carry.
 - Divide participants into pairs: One will counsel, problem-solve, and reach an agreement with the mother of a young child, while the other follow the discussion with the Supervisor Observation Checklist in order to give feedback later. Pairs will then switch roles.
 - Use prepared flipcharts to review:
 - *Listening and Learning skills*
 - *Building Confidence and Giving Support skills*
 - *How to Conduct a Mentoring Visit*

Activity Objective 1: Provide Mentoring to a Health Worker (Participant) who is Counselling a Mother/Caregiver with a Young Child

Methodology: Practice

Suggested Time: 3 hours (including travel)

Instructions:

Upon arrival at facility, introduce facilitator-trainers and participants to the person in charge.

1. Pairs take turns counselling a mother/caregiver and observing and providing feedback (mentoring). The counsellor will use Health Worker Job Aid: IYCF Counselling, and the mentor follow and complete Supervisor Job Aid: Observation Checklist for IYCF Counselling.
2. When the counselling session is finished and the mother/caregiver has left, the mentor provides feedback to the counsellor
3. Pairs switch roles: The second participant counsels, while the participant who previously counselled now follows the discussion with the observation checklist in order to provide feedback later.
4. Ask participants to identify areas that need more practice and observation. These should include issues related to the content of the IYCF counselling as well as the process of mentoring.

Activity Objective 2: Reflect on the Strengths and Weaknesses of Mentoring and Counselling During Clinical Practice

Methodology: Reflection, feedback and exchange

Suggested Time: 1 hour

Instructions:

1. After completion of the practical session, all return to the classroom and discuss participants' learning. Ask participants the following questions:

When you were the mentor:

- How do you think the mentoring (observation and feedback) went?
- What did you do well?
- What difficulties did you have?
- What would you do differently in the future?
- Where there any special difficulties or situations that helped you to learn?
- What was the most interesting thing that you learned from being the mentor (observer) to a counsellor?

When you were the Counsellor:

- How do you think the counselling with the mother/caregiver went?
- What did you do well?
- What difficulties did you have?
- What would you do differently in the future?
- What experiences or situations during the session helped you to learn?
- What was the most interesting thing that you learned from being a counsellor who is being observed and receiving feedback from a mentor?

Are there any gaps in your knowledge or your skills that you have identified? What could you do about that?

2. Participants receive and give feedback
3. Facilitators and participants identify issues that need more practice
4. Ask each participant to write on sentence describing their experience on a sticky note. When finished, they can post this note on the wall. The facilitator will organize the notes into categories and read them back to the participants. Open the discussion to the entire group and ask them what they learned from the experience of being both counsellor and mentor-supervisor (observer providing feedback). How will they apply this learning in their work?
5. Discuss and summarize.

Session 12: Action Plan Development: Part II

Present Action Plans to Implement Mentoring in IYCF Counselling to Health Workers

Time: Two hours

Objectives

After completing this session, participants will be able to:

1. Prepare and present an action plan for discuss what needs to be done at their level (national, *oblast*, or *rayon*) to implement mentoring in IYCF counselling to Health Workers

Preparation

- **Handout:** Action Plan Template: Actions Needed to Implement Mentoring (in IYCF Counselling) to Health Workers

Activity Objective 1: Prepare and Present Mentoring (Mentoring-Supervision) Action Plans

Methodology: Group work

Suggested Time: 2 hours

Instructions:

Briefly review the task, summarizing the instructions participants were given on Day 1 and discussion from Day 2:

1. On the first day of the training, explain to participants that during the course of the training, they will work on Action Plans for **Actions Needed to Implement Mentoring (in IYCF Counseling) to Health Workers: by Level**. On Day 3 they will present their action plans to the fellow Participants.
2. To develop the Action Plans, assign participants to a group according to the level at which they work (national, *oblast*, or *rayon*) and by facility or work sites within each of those levels, if relevant. Ask each group to discuss what activities would be needed *at their level* in order to move forward with a plan to provide mentoring in IYCF counselling to health workers. See Key Content below.
3. Distribute *Handout: Action Plan Template*.
4. Ask participants to find time to meet together in their groups during the next two days.
5. During Session 12 on Day 3, groups will present their Action Plans by level (national, *oblast*, *rayon*).
6. Ask other participants for input and feedback.
7. Collect copies of the Action Plans.
8. Share Action Plans with the Ministry of Health and other partners/stakeholders.

Key Content

Aim: To integrate mentoring (and related monitoring) into the existing supervision/management system (rather than introduce it as an isolated or parallel system)

Questions for discussion:

1. What is the current supervision structure?
2. Within that structure, is there provision for mentoring health workers in order to improve their IYCF counselling skills?
3. If there is no systematic mentoring for health workers who provide IYCF counselling, what would need to be put into place at your level to make this possible?
4. As you develop your Action Plan, consider whether any of the following are necessary activities at your level, and who should be responsible for their planning and implementation:
 - Developing policies, regulations, or orders
 - Including mentoring responsibilities in the job descriptions and/or work plans of staff at various levels
 - Acquiring resources/materials: budgets, including resources for transport, educational materials
 - Formally assigning mentors (mentor-supervisors) to health workers
 - Developing agreed targets for number of regularly scheduled mentoring visits and/or group/peer sessions per time period
 - Developing monitoring and reporting forms
 - Facilitating scheduled group sessions to review monitoring data, discuss and reflect on the process and progress of IYCF-related interventions/program implementation/service delivery
 - Compiling regular reports to summarize the performance and progress of implementing IYCF support: monitoring program activities, coverage of the population, quality of IYCF counselling and other IYCF-related support activities
 - Arranging/conducting refresher training
5. For participants working at the facility level: What adjustments would be needed to integrate mentoring into your facility?
6. What additional issues would need to be addressed? What could make this a realistic possibility? What can SPRING do to help make this a reality?

Handout: Action Plan Template: Actions Needed to Implement Mentoring (in IYCF Counseling) to Health Workers

NOTE: Action Plans will be developed by level (national, *oblast*, *rayon*)

LEVEL	OBJECTIVE	ACTIVITY	WHO will implement	WHEN (frequency)	WHERE	RESOURCES/Materials REQUIRED	RESPONSIBLE	EXPECTED OUTCOME

Session 13: Feedback and Closing

Time: 20 minutes

Objectives

Completing this session, Participants will be able to:

1. Obtain feedback on the training and the training materials

Preparation

- **Handout:** End-of-Training Feedback

Activity Objective 1: Obtain Feedback on Training and Materials

Methodology: Written feedback

Suggested Time: 20 minutes

Instructions:

1. Explain that participants' suggestions will be used to refine and adapt materials to their context and improve future trainings.
2. Distribute End-of-Training Feedback sheet to participants and ask them to fill in their comments.
3. Participants should not include their name on the feedback sheet.

For Translation and Preparation: Flipcharts and Handouts (by Session)

COMPLETE PREPARATION: FLIPCHARTS, HANDOUTS and MATERIALS – by SESSION

Note: As changes are made to any session, the list below will need to be revised.

Session 1

Flipchart Title: Introductions

- name
- where you work
- favorite food
- one expectation
- [Have each pair explain their Counselling Card – or other option]

Flipchart: Expectations

Flipchart: Objectives of the Training

- Define supportive supervision/mentoring
- Discuss a model of supportive supervision/mentoring that might work in your setting
- Introduce job aids to facilitate supportive supervision/mentoring
- Help mentor-supervisors develop the necessary skills to provide supportive supervision/mentoring
- Describe how supportive supervision/mentoring can contribute to monitoring and improved programs, services and worker performance
- Practice tabulation and analysis of data from supervisors' observation checklists
- Develop action plans to provide supportive supervision/mentoring in your setting

Handouts

- **Handout:** Training Schedule
- **Handout** (for Session 12): Action Plan Template: Actions Needed to Implement Mentoring for Health Workers

Session 2

Translation

Flipchart: Definition of Mentoring

Mentoring: An on-going and collaborative effort between the mentor-supervisor and health worker to help the health worker improve his/her performance and confidence. Together the health worker and mentor-supervisor define objectives. The mentor-supervisor observes the health worker's interactions with mothers/caregivers, and provides constructive feedback. The mentor-supervisor and health worker together discuss and problem-solve to identify areas of strength and address any difficulties the health worker experiences. The health worker should feel motivated by the process and encouraged to continue improving his/her skills.

Flipchart: Terms Associated with Mentoring

Seven name cards: WHO, WHY, WHEN, WHERE, WHAT, HOW, WHAT FOR (written in large print)

Matching game: Seven content cards written in large print

Session 3

Flipchart: with drawing of Model of Mentoring using a Combination of Approaches

Flipchart: Brainstorm: What is Needed to Strengthen the System to Provide Mentoring (Mentoring-Supervision) *title only

Flipchart: What is Needed to Strengthen the System of Mentoring

- supervision policy
- mentor-supervisor training in:
 - mentoring (mentoring-supervision) skills
 - IYCF counselling (specific program knowledge & skills)
- supervision structure
- funded and reliable transport (if needed)
- systematic process that describes all activities during a supervision visit
- Supervisor's Observation Checklist (including observation checklist)
- agreed mechanism for reporting to higher levels
- authority to mobilize support to address problems

Session 4

- **Handout: Health Worker Job Aid:** Adolescent and Women's Nutrition Assessment Form
- **Handout: Mentor-Supervisor Job Aid:** Observation Checklist for IYCF Counselling

Session 5

- **Flipchart:** The 3-steps of IYCF Counselling
 - assess
 - analyze
 - act
- **Flipchart:** Listening and Learning skills
- **Flipchart:** Building Confidence and Giving Support skills
- **Handout:** How to Conduct a Mentoring Visit

- **Handout: Supervisor Job Aid:** Observation Checklist for IYCF Counselling

Session 6

- **Handout:** Health Worker's Self-Assessment in IYCF Counselling
- **Handout:** Supervisor's Self-Assessment Tool
- **Flipchart:** Drawing of 'Model' of Mentoring and small Box showing 'Process to Improve IYCF Counselling'
- **Flipchart:** Drawing of table 'Match Tools to Steps in the Improvement Process'

Session 7

- **Handout:** HW Job Aid: IYCF Assessment (1 copy per participant)
- **Handout:** Supervisor's Job Aid: Observation Checklist for IYCF Counselling (2 copies per participant)
- **Print** case studies for facilitators
- **For review before Case Study work:**
 - **Flipchart:** Listening and Learning skills
 - **Flipchart:** Building Confidence and Giving Support skills

Session 8

- **Matching game:** Five sets

Session 9

- **Handout: Mentor-Supervisor Job Aid:** Observation Checklist (completed for Aibek, August 2016)
- **Handout: Worksheet 1. Mentor-Supervisor Job Aid.** Tabulation Form: Individual. Tracking Sheet- Individual Worker Progress (partially completed for Aibek; to enter August 2016 data)
- **Handout: Worksheet 2. Mentor-Supervisor Job Aid:** Tabulation Form: Group. Monthly/Quarterly/Periodic Summary Sheet (missing Aibek's data for 24 August 2016)
- **Handout: Worksheet 3. Mentor-Supervisor Job Aid.** Tabulation Form: Group. Monthly/Quarterly/Periodic Summary Sheet (partially completed summary tabulations for August 2016)
- **Flipchart or Excel Sheet:** Line Chart comparing progress over time of multiple workers

Session 10

- **Facilitator preparation:** Review Session 3
- **Handout: Action Plan Template** from Session 12: Actions Needed to Implement Mentoring to Health Workers

Session 11

For Review before leaving for Clinical Field Practice

- **Flipchart:** *Listening and Learning* skills
- **Flipchart:** *Building Confidence and Giving Support* skills

Take to Clinical Practice (Facilitators: please carry a few additional forms in case participants need them)

- Health Worker Job Aid: IYCF Assessment (1-2 per participant)
- Mentor-Supervisor Job Aid: Observation Checklist for IYCF Counselling (1-2 per participant)
- Counselling Cards: one set per pair of participants

Session 12

- **Handout** (provided on Day 1): Action Plan Template: Actions Needed to Implement Mentoring of Health Workers

Session 13

- **Handout:** End-of-Training Feedback Form

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