

Section IV. CHW AIM Facilitator’s Guide

This guide explains the steps necessary to prepare for and implement a CHW program functionality assessment, use the assessment tools, guide action planning, and provide follow-up support.

At a Glance

Overview of CHW AIM	IV-1
Step 1. Adapt Tools to Program Context	IV-4
Step 2. Plan for the Assessment Workshop	IV-5
Step 3. Conduct the Assessment Workshop	IV-10
Step 4. Follow Up	IV-16
Presentation: Training Facilitators to Use the CHW AIM Toolkit.....	IV-17

Section IV. CHW AIM Facilitator's Guide

Overview of CHW AIM

The Role of the Facilitator: This document is designed to help the Community Health Worker Assessment and Improvement Matrix (CHW AIM) facilitator plan, manage, and guide the assessment to ensure objectives are met effectively with clear thinking, active participation, and support from all involved. Facilitators can be either external to the organization or members of the organization. The major tasks of the facilitator are to ensure all steps are completed, discussions are open and helpful, agreement is reached, and time is monitored. It is equally his/her task to help the participants understand that the objective of the exercise is to measure CHW program functionality, i.e., the ability of the program to meet its intended purpose.

CHW AIM Purpose: The CHW AIM tool assists national or regional planners to identify current CHW service coverage and to assess the functionality of CHW programs, thus enabling them to strategically increase the number of CHWs where there are geographic or service gaps. The tool also assists NGOs, umbrella organizations, government program managers, CHWs, and supervisors to assess their CHW programs against best practices that define highly functional programs and to develop an improvement plan to address weaknesses in program performance or support. The assessment can be used repeatedly to measure change and to guide continuous improvement.

Tools: CHW AIM is designed around two main tools, the CHW Program Functionality Matrix and the Intervention Matrices for maternal, newborn and child health (MNCH); HIV and AIDS; and Tuberculosis (TB) programs. The first tool assists program managers, CHWs, community workers, stakeholders, NGOs, donors, and ministry staff to rate the CHW program in the 15 elements essential to program functionality. The Intervention Matrices help the group assess whether CHW tasks comply with national health guidelines. Templates, questionnaires, score sheets, and resource guides are included in the appendices of the CHW AIM toolkit to support the assessment.

Preparation: The facilitator should familiarize him/herself with the tools, resources, and timeline of the CHW AIM process. Training can also be provided to facilitators through the use of the Curriculum for Training of Facilitators to use the CHW AIM Toolkit. This document is available separately.

Preparation Checklist

Plan the Assessment	✓
1. Assemble and review CHW AIM workshop packet including tools and appendices.	
2. Meet with participating stakeholders, districts or programs, (which could be your own NGO) and lay out a timeline for assessment.	
3. Organize venue, budget, and refreshments.	
4. Send the invitation letter with Participant Selection Form (Appendix A1).	
5. Set up a meeting with the district health office to review the CHW Program Functionality Matrix (Section II) and the Intervention Matrices (Section III).	
Organize pre-workshop visits	
1. Use the Validation Questionnaire (Appendix A2) at 2-3 field sites and interview up to 6 CHWs in all. This can be done in preparation for the assessment or after the assessment as a means of verification.	
2. Work with program managers to assess Intervention Matrices.	
Prepare for the Workshop	
1. Identify and train group leaders using the presentation “Training Facilitators to Use the CHW AIM Toolkit”.	
2. Arrange for and test the LCD projector at the venue (note that while an LCD projector is desirable, the process can be done simply with flip charts).	
3. Set up meeting room in a circle or U-shaped pattern.	
4. Compile additional material according to the session guidance. One per participant of each of the following: <ul style="list-style-type: none"> • Program Functionality Matrix • Intervention Matrix (completed) • Score and Score Documentation Worksheet 	
5. Download tools needed for scoring and action planning from the CHW Central website (see http://www.chwcentral.org/community-health-worker-assessment-and-improvement-matrix-chw-aim-toolkit-improving-chw-programs-and) onto a laptop: <ul style="list-style-type: none"> • Appendix A4: Functionality Score Sheet • Appendix A5: Action Planning Framework 	

The Four CHW AIM Steps

Steps: The facilitator is responsible for managing the four steps in the assessment and for guiding the process so it is carried out in a comprehensive, participatory, and effective manner.

Step	Objective	Estimated Time	Tools
1. Adapt Adapt tools to program context	Align Intervention Matrices with program and country guidance	Preparation: up to one month	Intervention Matrices (Section III)
2. Plan Plan for the assessment workshop	Organize assessment workshop		Participant Selection Form (Appendix A1) Validation Questionnaire (Appendix A2) (<i>This tool can instead be used after the assessment to validate findings.</i>)
3. Assess Conduct the assessment workshop	Conduct assessment and action planning	One to two days	CHW AIM Program Functionality Matrix (Section II) Score and Score Rationale Documentation Worksheet (Appendix A3) Functionality Score Sheet (Appendix A4) Action Planning Framework (Appendix A5)
4. Follow Up	Provide support for action plan achievement and re-assessments	Periodic	Validation Questionnaire (Appendix A2) (<i>if not completed prior to the assessment workshop</i>) Online Resources and Field Examples (Appendix A6)

Step 1. Adapt Tools to Program Context

Share the two main assessment tools with the program and key stakeholders, such as implementing partners and district representative, prior to the workshop. The Program Functionality Matrix (Section II) is based on international best practices, but discussing it can raise awareness about its contents and usefulness for assessing and strengthening CHW programs in particular country contexts. The Implementation Matrices for MNCH, HIV, and TB (Section III) should be reviewed against program and national guidelines, and appropriate adaptations made to ensure CHWs are providing services in line with the protocols.

The facilitator is responsible for organizing a meeting with the organization(s), stakeholders or districts to be assessed to align the Intervention Matrices (Section III) with program guidelines to be sure the final tool includes only the interventions CHWs are required to provide. It is assumed those interventions are also in line with country criteria.

Suggested Timing: Preparation activities should begin approximately one month before the actual workshop.

Meeting to Align Intervention Matrices

- Organize a meeting with all stakeholders to align the tools; identify and invite program leaders, field managers, district managers, CHWs and others familiar with the implementation details of the program.
- Use the meeting to review the relevant Intervention Matrices (Section III) to determine that the services performed by CHWs match program and national guidelines. Eliminate or mark as 'not applicable' those activities or tasks CHWs are not required or permitted to implement.
- Determine if there is a need for a written translation or if translators will be sufficient; use the most prevalent local language.

Orientation Meeting for Other Stakeholders

- Introduce the purpose of the assessment and its benefits and limitations to the district health staff and to other partners or supporters of the NGO or program.
- Review the tools, process, and products for the assessment; focus on the action plan for which their support will be helpful.
- Tell participants that they will receive an invitation to the assessment workshop.

Step 2. Plan for the Assessment Workshop

The facilitator needs to prepare technically and logistically for the assessment. This requires him/her to become familiar with the program's record keeping system and the role of community health workers. Depending on the number of stakeholders or the scope of the programs taking part, there may be a need for several workshops.

Suggested Timing: Preparation should begin one month before the actual assessment workshop

Plan the Assessment Workshop

- Work with local partners to determine how many programs (by districts or regions, multiple organizations, or multi-country) are to be assessed and how many workshops will be required. Several districts can be assessed at the same time if they have criteria in common, e.g., structure, CHW roles, and the manner in which supervision and training are provided. If districts function differently, it is better to conduct separate assessments.
- Identify the number and venues of workshops: between 15 and 25 people for a single workshop is a reasonable number. Ask partners to identify a venue such as a hotel or meeting hall that could host 15–25 people and provide or arrange for refreshments.
- Identify and invite participants. Explain to program managers who would be appropriate representatives such as MOH/district health staff, program managers, supervisors, and CHWs. The goal is to get a well-balanced team. Ask the organization to use the Participant Selection Form (Appendix A1) to identify and list participants for the workshop.

Sample Participant List

For a workshop with 25 participants, consider 6–7 CHWs, 4–6 supervisors, 4–5 regional/district managers, 5–6 stakeholders or NGO partners and, if desired, representatives from donors and other key partners such as USAID or other implementing partners.

- Send out the invitations and if a visit is not arranged prior to the workshop, ask that key documents such as supervisors' logs, CHW notebooks, and other relevant material be brought to the workshop to prepare stakeholders for their roles in the assessment.

- Documents include the following: supervisors’ logs, job descriptions, recruitment procedures and number of CHWs, program indicators, targets and monitoring data, CHW notebooks, supply documentation, training records, and other documents illustrating field activities and what CHWs are responsible for delivering. If a visit is not possible before the workshop, ask the program manager to bring the documents to the event.

Conduct Visits to the Program Site(s)

- If possible arrange visits to up to three field sites to use the Validation Questionnaire (Appendix A2) to gather key information from up to six CHWs. This aids the assessment upfront. If this is not possible, validation can take place during the post-assessment visit to verify the discussions and scoring and to strengthen action planning.

Prepare the Budget for the Workshop

- Determine the quantity and type of supplies required:
 - Markers, flip chart paper, one copy per person of the CHW AIM Matrices, one copy of the Score and Score Rationale Documentation Worksheet (Appendix A3), one copy of the Action Planning Framework (Appendix A5), and one pen and notebook per participant.

Sample Workshop Budget

Budget Items:

- Venue for one day
- Meals and drinks for participants
- Transport costs for stakeholders and CHWS
- Supplies (pens, notebooks, documents)
- Lodging, if needed

Sample Workshop Costs in Zambia:

- One-day workshop for 13-21 participants ranged from \$375 to \$910
- Average workshop cost was \$560

- Prepare the budget including supplies, refreshments, and cost of venue, transport, and lodging.

Identify Small-Group Leaders

- Identify and orient people in advance to be group leaders during the assessment workshop (see the presentation “Training Facilitators to Use the CHW AIM Toolkit” at the end of this section for more

guidance). Assist them to use the matrices and action planning tools appropriately. Criteria for small-group leaders include an ability to facilitate, to encourage discussion, to resolve issues, and to keep the process moving.

Review the Intervention Matrices Prior to the Workshop

- Facilitators and program managers should review the Intervention Matrices (Section III) in advance; they are designed to help program managers, supervisors, and CHWs define which tasks they implement and whether they can receive a functional score because they implement all the tasks in at least one activity, e.g., HIV counseling and testing. If according to policy guidelines CHWs are not permitted to provide the service; the service should be noted as “Not Appropriate” and will not affect the functionality assessment. Programs rate themselves only on the matrix relevant to the services they provide. For example, if they provide only HIV and AIDS services, only the HIV and AIDS matrix would be used. This exercise enables programs to assess the types of services they offer but does not evaluate the quality of service.
- In the following example, all activities under HIV and AIDS Education and Health Promotion Campaign are accessible to clients either through direct service provision, referrals, or information on where the service can be accessed or are ‘not applicable’ because they are not part of the CHW’s role; thus this would be a functional activity. Counseling and testing would not be functional, as some activities are ‘not done’. Based on the analysis of the matrices, managers should identify technical issues/interventions that they may want to address or implement and add them to the action plan and share this with all workshop participants for agreement and verification.

To be functional, an activity must be complete, meaning all tasks must be marked “counsel,” “provide,” “refer,” or “not applicable”; none may be marked “not done.”

Sample Intervention Matrix

HIV and AIDS INTERVENTIONS							Intervention Complete
To be considered a functional CHW who provides HIV and AIDS services, the CHW’s tasks must include at least one complete HIV and AIDS activity listed below							
	Counsel	Provide	Refer	Not applicable	Not done	COMMENTS	
I.	HIV Prevention						
a.	Education and health promotion campaign						✓
	Educational and mass HIV and AIDS awareness events	✓					
	Community mobilization activities and campaigns	✓					

HIV and AIDS INTERVENTIONS							Intervention Complete
To be considered a functional CHW who provides HIV and AIDS services, the CHW's tasks must include at least one complete HIV and AIDS activity listed below							
	Counsel	Provide	Refer	Not applicable	Not done	COMMENTS	
	Condom promotion and counseling	NA	✓				
b.	Counseling and Testing						
	Pre-test and post-test counseling	NA	✓				
	Couple counseling including counseling for discordant couples	NA	✓				
	Rapid testing with same-day results interpretation			✓			
	Risk-reduction counseling	NA				✓	
	Prevention with positives counseling	NA				✓	
	Stigma and discrimination counseling	NA		✓			
	Counseling on gender-related issues	NA				✓	
	Counseling on intravenous drug use (IDU) and harm-reduction issues specifically related to most at-risk populations (MARPs) (where MARPs are included as a target population)	NA				✓	
	Condom-use counseling	NA				✓	
	Condom provision					✓	
Counseling for other services as required	NA				✓		

Sample Workshop Preparation and Implementation Schedule

<p>Day 1: Preparation</p> <ul style="list-style-type: none">• Meet with program managers.• Review and complete Intervention Matrix.• Review documents.• Conduct field visits (this can be done following the workshop if desired).• Reconfirm venue, meals, room set-up, and equipment for Day 2.	<p>Day 2: Intervention</p> <ul style="list-style-type: none">• Conduct CHW AIM Program Functionality Workshop<ul style="list-style-type: none">- Score Program Functionality Matrix Components.- Review completed Intervention Matrix and verify.- Develop action plans.
--	---

Step 3. Conduct the Assessment Workshop

The facilitator takes responsibility for managing and guiding the workshop, managing time, and explaining the assessment, its purpose, and the agenda. S/he should make all participants feel comfortable and free to discuss the actions, ratings, and interventions. S/he should remind them that the workshop is not an evaluation of CHW performance or service quality but rather an effort to assess program functionality and guide improvement in programs using CHWs to deliver services to communities.

Suggested Timing: This activity will take one to two days.

Introduce the Process

- Welcome participants and let them introduce themselves. State the objectives of the workshop.

Assessment & Improvement Workshop Objectives:

- To assess functionality and guide improvements in CHW programs;
- To create action plans to work toward high functionality.

- Explain the CHW AIM process. Tell participants:
 - *“We are all here to jointly assess your current CHW program by rating it against 15 established best practices. This will help to collectively identify strengths, challenges, and actions to improve your program. During the assessment, each participant will have a chance to score the 15 components using a scoring guide and to suggest improvements. When scores differ, we will come to an agreement as a group. We will do the first component in plenary so everyone can see how the process works and will then break into small groups to do the other 14.”*
- Pass out the CHW Program Functionality Matrix (Section II).
- Read the definition of recruitment and ask the participants to describe the process they use. They should score themselves from 1–4 based on how their program matches the criteria under each level of functionality. Note that there are no “half scores” such as 2.5. They must score a whole number and they should meet all the criteria to fit a particular score. Give them time to make their assessments and then ask how many scored 1, 2, 3 or 4; write the numbers on a flip chart.
- Ask those whose scores differ from those of the majority to justify their responses.

- Encourage discussion for up to 10 minutes until consensus is reached on a final score.
- After the exercise, ask if there are any questions, clarify them and provide feedback. State that they will use the Score and Score Rationale Documentation Worksheet (Appendix A3) to document and justify their scores. Explain that the 14 remaining sections will be done in small groups of seven or eight people.

Sample Workshop Agenda

8:30–9:00	Introduction and Workshop Overview
9:00–9:45	Challenges of Supporting CHWs
9:45–10:45	Adapt the Tools
10:45–11:00	Tea Break
11:00–12:00	Prepare for the Assessment
12:00–1:00	Conduct the Assessment
1:00–1:45	Lunch
1:45–3:10	Conduct the Assessment, continued
3:10- 4:00	Provide Follow-up Support
4:00–4:20	Wrap-up
4:20–4:35	Tea Break

Break Into Small Groups

- Breaking into small groups makes the process go faster, fosters more in depth discussion, facilitates communication, and improves CHW participation.
- Make sure that any required documents are available to the appropriate groups. For example, supervision report examples should be provided to the group scoring supervision. A list of suggested documents is provided above each of the 15 elements listed in the CHW Program Functionality Matrix after the heading “Resources:”.
- If CHW validation interviews were conducted prior to the workshop (as opposed to following the workshop), ensure that a summary of findings is provided to each group so these can be used to inform discussions and scoring.
- To ensure that all types of participants are adequately represented in each small group, have each category (program managers, key stakeholders, supervisors, and CHWs) meet as a group and count off separately, then have all the number ones from one group and the number twos form another group and so on. Keep the groups manageable: seven to eight is a reasonable number for an active discussion,

especially if translation is necessary. Each group should be led by a trained group leader; the facilitator should circulate among them to aid with discussions.

- Each group will look at half the components, i.e., seven or fewer if there are more than two small groups. Ask each group to nominate a secretary to document the Score and Score Rationale Documentation Worksheet (Appendix A3) and present the results in plenary. The tool should be used to note the score, the rationale for the score, and potential actions. The comment section should be used to add pertinent information.
- Each small group will come to agreement on a score for each component. Where resource documents are listed, they should be reviewed by the group before scoring is done.

Sample Score and Score Rationale Documentation Worksheet

Component	Workshop Score	Rationale	Action Items	Comments
Recruitment	4	Organization recruits according to best practices: no exceptions found.		May consider documentation of process.
Individual Performance Evaluation	2	No established process or form for individual performance evaluation.	Develop form and guidance for performance evaluation.	
		No rewards for individuals performing well.	Develop system to reward individuals performing well.	

Conduct Scoring

- Participants score the components based on their discussion. The group then reviews the outlying scores by sharing and defending their rationale until consensus on a final score is reached. The rationale should be validated by evidence from the documents reviewed prior to the workshop.
- Once all groups have finished, return to plenary for presentations and consensus.
 - In this session, consensus among the groups is reached.
 - The facilitator or small group leader should place two columns on the flip chart: one for the 15 areas and the second to record the score.

Sample Flip Chart: Consensus Scoring

	Element	Score
1	Recruitment	4
2	CHW Role	4
3	Initial Training	4
4	Continuing Training	3
5	Equipment and Supplies	2
6	Supervision	2
7	Individual Performance Evaluation	1
8	Incentives	1
9	Community Involvement	3
10	Referral System	2
11	Opportunity for Advancement	1
12	Documentation and Information Management	3
13	Links to Health System	2
14	Program Performance Evaluation	1
15	Country Ownership	2

- Using the notes taken on the Score and Score Rationale Documentation Worksheet (Appendix A3), the secretary from each group should state the score, rationale, and action for each area. After each component (e.g., CHW Role), participants from other small groups should be encouraged to ask questions and, if desired, to challenge the score. If there is disagreement, a larger discussion occurs until agreement is reached. When consensus is reached, the presenter moves to the next area.
- If validation field visits are to be done after the workshop, then any scores that are revised based on the findings in the field need to be shared with workshop participants either through email or some other means.

Review the Intervention Matrix

- Following scoring, review the Intervention Matrices (Section III) to ensure agreement on the findings and to identify any actions that should be added to the action plan. If this was not done in advance, this exercise should take place at the workshop.

Determine Functionality

- The facilitator should complete the Functionality Score Sheet (Appendix A4). If an LCD projector is available, this can be done in plenary with the workshop group. A score of three in each component is necessary for a program to be deemed functional. The second part of functionality is provided through the intervention matrix. Check off any activity, which was deemed functional. Functional means that all tasks, applicable to the role of the CHW are conducted and none are noted as “Not Done”. If a program is functional, all CHWs in the program can be counted as functional.

Start Action Planning

- Divide participants into the same small groups so they can develop actions for the areas they scored previously.
- Keep action plans reasonable and realistic. If action plans are too long, they become intimidating and difficult to manage. The workshop group should focus on developing actions for non-functional areas, those scoring less than three, first.
- Groups should mark high priority issues and actions – those that must be addressed or the program may be significantly compromised.
- Try to keep the total number of actions under 30 if possible. If there are a lot of actions, focus on those that need to be addressed in the next 6 months and then review the action plan at the end of the period and draft a new action plan if necessary.
- When each group has completed the Action Planning Framework (Appendix A5) for the areas assigned to them, the groups should exchange their plans and review what the other groups have developed. Once the action plan has been reviewed and discussed, each group should have an opportunity to ask questions, make clarifications, and agree on changes.
- The action plan is used to document issues identified, areas where a functional score was not achieved, and the interventions necessary to improve the current status. The following example demonstrates what needs to go into the plan. An assessment code is used when more than one NGO or district is assessed.

Sample CHW Program Action Planning Framework

Name: New Beginnings

District/NGO:

Date: 8 March 2013

Program Component	Issue	Improvement Activity	Person Responsible	Resources Needed	High Priority	Timeline	Indicator
Recruitment	Clinics not involved in recruitment of care givers	Involve clinic nurses in interviewing care giver candidates or in reviewing and agreeing on final selections	Supervisor	Stationery HQ TA to help define nurses' role in recruitment		April 2013	# of caregivers recruited with some approval/ involvement of clinic staff
CHW Role	Extra demands from community which CHW cannot meet	Hold sensitization meeting with communities on the role and expectations of the CHW	Supervisor	Stationery		May 2013	# of sensitization meetings held
Initial training	Lack of certificates for training	Advocate for certification policy after training at the district level	Program Manager	Venue Stationery		June 2013	Changed certification policy Certificates developed and issued Orientation workshop held
		Provide training certificates to all CHWs trained	Program Manager	Stationery		October 2013	# of trained caregivers who receive a certificate for training

Wrap-up

- At the end of the workshop, small group leaders should prepare the Score and Score Rationale Documentation Worksheet (Appendix A3), the Intervention Matrices (Section III), the Action Planning Framework (Appendix A5) and the Functionality Score Sheet (Appendix A4) so they can be provided to the program for its records and for additional review and modification as required on the following day. If possible print out a hard copy of the documents.

Step 4. Follow Up

This step is important to validate the results of the workshop, review and revise the action plan as necessary, develop a process for monitoring achievement of the actions in the plan, and to plan a re-assessment as desired.

- If not done before the workshop, conduct field visits at three different sites and use the Validation Questionnaire (Appendix A2) to interview up to 6 CHWs who did not participate in the assessment workshop. After verifying the information, review and update the action plan and scores if necessary. If any scores have changed, assessment leaders should notify all workshop participants and give them a chance to discuss and agree.
- Hold a follow-up action plan meeting with program managers and participants from the assessment workshop, including CHWs, to review and discuss how to complete the action plan and how to identify someone to take responsibility to ensure actions are implemented and monitored.
- Share the final action plan with all stakeholders for their knowledge and assistance.
- Discuss how the plan will be monitored. If more than one location or program has been involved, consider a meeting of representatives from all sites to periodically share effective actions and discuss challenges.
- Set a date for checking on progress.
- Determine if a second assessment is desirable to maintain improvements and then plan for it.

Presentation: Training Facilitators to Use the CHW AIM Toolkit

Training Facilitators to Use the Community Health Worker Assessment and Improvement Matrix (CHW AIM) Toolkit

Model Slides for Adaptation by Implementers

Workshop Goal and Objectives

Goal: To prepare facilitators to plan, conduct assessments, guide action planning and follow up on progress

Key Objectives: By the end of this training, participants will be able to:

- Demonstrate the role of the facilitator
- Define best practices
- Plan an assessment
- Use CHW AIM Tools to assess functionality
- Lead action planning to address gaps in meeting best practices
- Document assessment for organization
- Provide post workshop support for interventions/improvement

Slide 1.1

Best Practice Definitions

- A technique or methodology that, based upon experience and research, has proven to reliably lead to a desired result.
(www.pemcocorp.com/library/glossary.htm)
- A system in which information is collected, analyzed and used to reformulate recommendations for all those involved in efforts to resolve a problem. It involves the gathering and application of knowledge about what is working in different situations and context through feedback, learning and reflection. (UNAIDS Best Practices 2001)

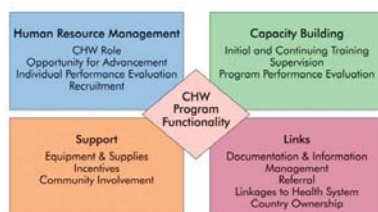
Slide 1.2

CHW AIM STEPS

- **Step One:** Adapting Tools to Program Context
- **Step Two:** Planning for the Assessment
- **Step Three:** Conducting the Assessment
- **Step Four:** Providing Follow-Up Support

Slide 1.3

Functionality Model



Slide 2.1

Sample Workshop Preparation & Implementation Schedule

Preparation

- Meet with program managers
- Review and complete the Intervention Matrix
- Review documents
- Conduct field visits for CHW interviews (this can be done following the workshop instead)

Implementation

- Conduct CHW AIM Workshop
- Score CHW-AIM Program Functional Matrix
- Review Completed CHW AIM Intervention Matrix and verify
- Develop CHW AIM Action Plans

Slide 4.1

Sample Participant List

- For a meeting of 25 participants, consider:
 - 6-8 CHWs
 - 3-5 Supervisors
 - 4-6 Regional/District Managers
 - 2-3 Partners or Implementing Representatives
 - 2-3 Representatives from donors and other key partners, such as USAID, MOH or coordinating partners

Slide 4.2

Sample Workshop Schedule

- 8:30-9:00: Welcome, introductions, agenda and objectives
- 9:00-9:30: Overview of the CHW AIM Process
- 9:30-10:45: Program Functionality Matrix review & scoring
- 10:45-11:00: TEA BREAK
- 11:00-12:00: Group work review & scoring
- 12:00-1:00: Plenary: Group Reports on Scores and Score Consensus
- 1:00-2:00: LUNCH
- 2:00-2:30: Review of CHW AIM Intervention Matrix and Technical Action Items
- 2:30-3:30: Group work: Action Planning
- 3:30-4:15: Action plan exchange, discussion and finalization
- 4:15-4:30: Wrap Up
- 4:30-4:45: TEA BREAK

Slide 5.1



USAID
FROM THE AMERICAN PEOPLE

HEALTH CARE
IMPROVEMENT
PROJECT

This presentation was developed by Donna Bjerregaard of Initiatives Inc. in March 2011 for the USAID Health Care Improvement Project, to serve as a resource for facilitators who intend to apply the CHW AIM Toolkit.

For more information on applying the CHW AIM Toolkit, please visit CHW Central at www.chwcentral.org or contact chwcentral@initiativesinc.com or healthworkforce@urc-chs.com.

The USAID Health Care Improvement Projects made possible by the generous support of the American people through USAID and its Bureau for Global Health, Office of Health, Infectious Diseases and Nutrition. The views expressed in this document do not necessarily reflect the views of the United States Agency for International Development or the United States Government.