

Maternal, Infant, and Young Child Nutrition in Malawi

Community Nutrition Workers

SUPERVISION GUIDELINES

DECEMBER 2011





This document was produced through support provided by the United States Agency for International Development, under the terms of Cooperative Agreement No. GPO-A-00-06-00008-00. The opinions herein are those of the author(s) and do not necessarily reflect the views of the United States Agency for International Development.

Malawi Supervision Guide

Introduction

Objective of the supervision visit

During the five-day course on infant and young child feeding, participants were introduced to a large number of new concepts, scientific information, key messages, and guidance on how to provide better counseling. Upon completing the course, participants should have a sound theoretical knowledge of how to address infant and young child feeding issues in various contexts. However, the ability to effectively implement that theory and knowledge to improve requires continuous practice. Through providing supportive supervision, you will give community nutrition workers the support and feedback they need to become experts at applying material learned during the course to their normal working situations. The objectives of the post-training follow-up supervision are to:

- Reinforce the theoretical knowledge learned in the course.
- Reinforce the counseling and practical skills learned in the course.
- Help participants address challenges in applying concepts from the course to their work situations.
- Update them on new guidelines (e.g., World Health Organization guidelines).

Definition of supportive supervision

Supervision entails observing provider performance and comparing it to standards that are outlined in supervision checklists and other tools. It can be a one-way process whereby the supervisor extracts information that is put into a database or reported to authorities.

Supportive supervision, on the other hand, requires the participation of both the supervisor and the community nutrition worker. It is a collaborative effort that involves discussion and joint problem-solving. By providing constructive feedback based on the community nutrition worker's experiences and difficulties, the trainer gives the community nutrition worker the opportunity to improve his/her performance and confidence. The process should result in a better work experience for the community nutrition worker and better outcomes for women and children.

How to know whether supervision is successful

Supportive supervision should result in action for continuous quality improvement. Therefore, proper recording of supervision findings and recommendations, and monitoring of follow-up actions, is extremely important. At each follow-up visit, the supervisor should assess previously identified problems and look for improvement in the score attained by the community nutrition worker on the supervision checklist. Another aspect of successful supervision is that the observed community nutrition worker feels motivated by the process and encouraged to continue improving his/her skills.

The follow-up visit

Schedule of follow-up visits

Each participant should receive at least three follow-up visits. The first visit should take place no more than two months after completion of the training course. The next two visits should take place within the following six months. Each visit is designed to take one full day at the participant's work place. To increase efficiency, up to four participants can be assessed in the same day by one assessor. While it is preferable to assess community nutrition workers at their normal places of work, it is possible to have several community nutrition workers from distant places gather at one health center.

Preparation for follow-up visits

Before arriving for a follow-up visit, review the MIYCN course pre- and post-training assessments of the community nutrition worker you will be supervising. If possible, bring a copy of the participant's tests with you to facilitate discussion. If this is a second or third follow-up visit, review the action plan that was developed at the first supervision visit as well as the supervision checklists completed during any previous follow-up visits. This preparation will help you target specific areas of weakness and make your follow-up visit more productive.

In addition, you should review the supervision checklists so that you are familiar with the information to be assessed. If there are particular topics with which you are less comfortable, review those sections of the training guide. Pay particular attention to topics on the checklist that may not have been covered thoroughly in the training course and be sure that you are able to comfortably provide accurate information on those topics.

When you call a health center to arrange a date for supervision, it is important to emphasize that this is not an exam. Rather, it is a way for trainers to assess the training course, to reinforce skills learned during the course, and to help with situations that participants have found difficult to manage since being trained. Suggest that the community nutrition worker complete the counseling log and written exercises before your appointment, if he/she has not done so already. Explain the activities you plan to conduct during the follow-up visit and agree on the best way to complete the supervision with minimal disruption to client services.

In addition to contacting the community nutrition worker targeted for follow-up, you should also contact the nutrition focal point at the health center as soon as possible. The focal point can help ensure that the community nutrition worker completes the counseling log and written exercises and that the supervision does not disrupt client services.

Components of the supervision visit

As the visiting trainer, you should meet briefly with the facility staff to explain the purpose of the visit and the activities that will take place during the day. Introduce yourself to the nutrition focal point and encourage him/her to participate in your activities if possible. Identify the people you are going to assess. It may be helpful to ask the staff if they have observed any differences in the way those who were trained on the course are managing mothers and their children since training. Establish a friendly atmosphere for the visit.

A supervision visit consists of several activities, including:

- Reviewing and discussing the counseling log kept by the community nutrition worker.
- Reviewing and discussing the written exercises completed by the community nutrition worker.
- Observing group health talks and providing feedback.
- Observing individual counseling sessions for at least three children and one pregnant woman and providing feedback.
- Practicing skills with the community nutrition worker through role plays.
- Developing an action plan for the community nutrition worker to continue improving his/her skills.

The order in which these activities are completed may vary, depending on the schedule of services provided at each clinic. Details on how to carry out each of these activities are provided below.

Review and discuss counseling log and written exercises

If the community nutrition worker has not kept a counseling log, take time to discuss the kinds of cases the worker has seen and how he/she has responded. Ask about any cases that were particularly challenging or any skills that he/she is unsure of and would like to discuss. It may be helpful to conduct a role play to better understand the challenge and more effectively help the community nutrition worker feel more confident and better manage difficult situations in the future. Encourage the participant to continue keeping a counseling log in preparation for the next follow-up visit.

The written exercises provide an opportunity to verify that the community nutrition worker has retained and understood the key messages and technical information provided during the course. If the written exercises have not been completed, give the participant time to complete them. Alternatively, you may go over the exercises orally.

Be sure to have the training materials with you on the visit so that they can be referred to as needed to review technical content, role of the community nutrition worker, or counseling skills.

Observe individual counseling sessions and complete observation checklist

Each follow-up visit should include assessment of at least three individual counseling sessions. The supervisor should identify the women/children who will receive counseling based on the skills you would most like to observe. Before choosing the clients, ask the community nutrition worker if there are any particular skills that they want to practice. The clients should include at least one mother with a child younger than 6 months and one with a child who is older than 6 months. If possible, also include one client who is HIV positive. Before beginning the counseling sessions, explain to the clients why you are there and ask their permission to observe. Assure the clients that you will not record their names and that any personal information will remain confidential.

A separate observation checklist should be completed for each client. The checklist is used to assess the content of the issues discussed, the interpersonal skills used, and the success with helping the client set goals and make positive changes. It is important that you rate each component of the checklist. Each component can be assigned one of four ratings:

- Yes: sufficient (2)—by assigning this score you indicate that the skill has been effectively used most or all of the time. This score also indicates that the information provided was clear and accurate as well as given with an appropriate amount of detail.
- Yes: limited (1)—by assigning this score you indicate that the skill has been used only some of the time or that it was not used as effectively as possible. This score may also be given if information was conveyed less clearly or accurately than it should have been or with an inappropriate amount of detail.
- No/not at all (0)—by assigning this score you indicate that the skill was not used at all. This score may also be given if certain information was not provided even though it would have been appropriate, given the client's circumstances.
- N/A for this visit—by checking the "not applicable" box you indicate that the skill was not used or that information was not given because it was not necessary or appropriate, given the particular context.

In addition to scoring each component of the checklist, it is important to include as many comments and observations as possible. This will help you review the community nutrition worker's strengths and weaknesses following the observation as well as better guide the supervisor who will conduct the next follow-up visit.

Take steps to put the community nutrition worker at ease, and encourage him/her to work with the clients as he/she normally would in the absence of a supervisor. Remind the community nutrition worker that this is not a test but an opportunity for you to help him/her build confidence and skills to make a difficult job a little bit easier.

It is important not to interrupt the community nutrition worker too frequently during the observation, as this disrupts the flow of counseling and reminds both the community nutrition worker and the client that they are being watched. However, you should courteously interrupt if the community nutrition worker is providing incorrect information that may be harmful for the child. At the end of the counseling session, you may choose to ask the client about her experience to determine whether she was satisfied with the service she received.

There are several weaknesses frequently identified during individual counseling sessions that the supervisor can help address. You are likely to find that the community nutrition worker needs help with at least some of the following:

- Effectively using counseling cards to convey information.
- Engaging in a discussion with a caregiver rather than giving a lecture.
- Taking a feeding history to better understand the current infant and young child feeding practices and challenges faced by the caregiver and child.
- Choosing one or two key messages rather than giving a lot of information.

- Choosing messages that are appropriate for the age of the child and difficulties faced by the mother.
- Using information contained on the child health card to help provide appropriate counseling.
- Giving praise for what a caregiver has done well.
- Using good interpersonal skills to make the caregiver feel comfortable.
- Negotiating with the caregiver for her to make a change in infant and young child feeding practices that the caregiver feels is practical and feasible.
- Giving proper referrals for other care or community support.

Immediately after each counseling session you should review the session with the community nutrition worker. You may begin by asking the community nutrition worker's opinion of what went well and what was difficult. You should not review every individual item on the checklist with the community nutrition worker. Rather, you should choose no more than three challenges or problems to discuss. These should be the biggest problems that are most likely to reduce the impact of counseling on improving infant and young child feeding practices. Discuss how the community nutrition worker may improve these weaknesses during the next counseling session. In addition, be sure to mention positive findings. During the discussion you may add additional comments to the observation form. If possible, leave a copy of each completed checklist with the community nutrition worker.

If the community nutrition worker has significantly struggled with particular skills, it is important that you give him/her additional opportunities to practice while you are there. You may choose to recruit additional clients with whom she can practice these skills. Alternatively, you can engage in role plays with the community nutrition worker. If the focal point or another community nutrition worker is available, one of them may play the role of the client while you continue to observe. This has the advantage of engaging more people in discussion and activities related to infant and young child feeding.

Summarize supervision visit and develop action plan

After you have finished reviewing the counseling log and written exercises, observing group health talks and individual counseling sessions, providing feedback to the community nutrition worker, and giving him/her extra opportunities to practice weak skills, you will be ready to summarize your supervision visit and develop an action plan for improvement. The form for this is "Follow-up and Supervision Summary."

Begin by recording the scores for each of the counseling observations. Explain to the participants that this score provides a baseline so that it is possible to measure improvements during the next supervision visit. Remember that if you marked "not applicable" for any component of the observation checklist, that item should not be included in the total recorded for "points possible."

Also take this final opportunity to ask if the participant has any additional questions or concerns. You should then work together with the participant to develop concrete actions to improve areas of weakness over the next six months. While you should aim to find three action steps, it is acceptable to identify fewer steps if three doable actions cannot be identified. Just as a counselor negotiates with a client to make a change in behavior, you should negotiate with the participant to identify actions that the participant feels motivated and empowered to complete. These actions should not be dependent on others making more resources available. For example, an action should not be to "begin cooking demonstrations" if the clinic does not already own cooking utensils. Some potential action steps include:

- Reviewing specific sections of the MIYCN Participant Manual section of the MIYCN Training Package.
- Finding a colleague with whom to practice using counseling cards.
- Observing a health talk or counseling sessions at a nearby health clinic.
- Beginning to use counseling cards or other job aids where not previously used.
- Beginning to use specific job aids, such as the feeding history form, provided in the MIYCN participant manual.

For each action item chosen, agree upon a date by which the action will be initiated and/or completed. Get the support of the focal point for the action plan and timeframe and discuss ways that he/she can support the participant in following through with the action plan. If possible, fix a date for the next supervision visit and encourage the participant and focal point to call before that date if any questions or new challenges should arise.

Summary: Key actions for successful supervision

- Go prepared—review previous tests, observation checklists, and action plans before arriving at a supervision sites.
- Put community nutrition workers at ease by reminding them they are not being tested, praising what they do well, and problem solving together through respectful discussion.
- Choose no more than three weaknesses to discuss following an observation.
- Write detailed comments about your observations.
- Identify realistic action items that will help the community nutrition worker improve his/her skills.

Observation Checklist

Name of Counsellor:							
Designation:Name of Location			Di	strict:			
Name of Supervisor:	Date of Follow-up:						
Date of Training:	[Status of four up (tick in)		First	Second	Third	
INDICATOR	Yes: Sufficient (2)	Yes: Limited (1)	No/No at all (0)		COMME	ENTS/OBSERVATIONS	
A1: Assessment –Antenatal Care Option: (ask the antenatal m mother is postpartum and go to A2)	other how sh	e would feed l	ner baby	(Omit if the	2		
1.Did the counsellor review the antenatal card of a pregnant woman							
2. Did the counsellor discuss the adequacy of pregnant woman's weight?							
3. Did the counsellor discuss the pregnant woman's diet and/or provide suggestions on food she should consume?							
4. Did the community nutrition worker discuss nutritional supplements? (e.g. iron-folate tablets)							
5. Did the counsellor ask the mother about her infant feeding plans?							
Maximum Score for section (10)							

The comments section provides an opportunity to provide a little more detail on the specifics of the counseling while justifying the assigned scores

INDICATOR	Yes: Sufficient (2)	Yes: Limited (1)	No/Not at all (0)	N/A	COMMENTS/OBSERVATIONS
A2: IYCF Assessment – Postpartum (0-6 months) (NOTE: Plea	se write the	infant/young	child's age l	nere:	Months).
1.Did the counsellor review the under five card?					
2. Did the counsellor discuss the adequacy of child's weight with the caregiver?					
3. Did the counsellor discuss current feeding practices with caregiver?					
4. Did the counsellor discuss previous feeding practices (what the child was fed yesterday, last week or since the last contact)					
5. Was there any general mention or specific advice given on exclusivity (breastfeeding or replacement feeding)?					
6. Did counsellor ask about any health problem the infant and/or mother experienced in the past two weeks?					
Maximum score for section (12)					
A3. Feeding for young children (6-23 months)					
1.Did the counsellor review the under five card of the child					
2. Did the counselor discuss complementary feeding with the caregiver?					
3. Did the counsellor discuss the number of times the child should be fed per day?					
4. Did the counsellor discuss feeding the appropriate amount of food?					
5. Did the counsellor discuss feeding the appropriate variety of foods?					
6. Did the counsellor discuss the appropriate density of food?					
Maximum Score for section (12)					
B: Decision making and Goal Setting					
1. Did the counsellor suggest any new or different infant feeding practices that the mother or caregiver should consider? (where applicable)					
2. Did they (mother or caregiver and counsellor agree on some new practices that the mother should try?					
3. Were the suggestions and next steps documented?					
Maximum Score for section (6)					

C: Plan and Follow-Up			
1. Did the counsellor and the mother or caregiver discuss ways to			
accomplish the decisions and goals?			
2. Were there any plans developed?			
3. Did the counsellor and pregnant woman or caregiver discuss			
the challenges and how to overcome those challenges they			
might face in implementing the plan or achieving her infant			
feeding goals?			
4. Were referrals for treatment or other appropriate services			
discussed and documented?			
5. Did they fix and discuss the next appointment?			
Maximum Score for section (10)			
D: Counsellor Conduct and Counselling Environment			
1. Did the counsellor warmly greet the client?			
2. Did the counsellor treat the pregnant woman or caregiver with			
respect?			
3. Did the counsellor speak in a language in which the pregnant			
woman or caregiver was comfortable?			
4. Did the counsellor give the pregnant woman or caregiver the			
opportunity to talk, repeat and ask questions?			
5. Did the counsellor respond respectfully to the pregnant			
woman or caregiver's questions?			
6. Did the counsellor use non judgmental tone or words?			
7. Did the counsellor look at the pregnant woman or caregiver			
when speaking with her (maintain eye contact)?			
8. Did the counselor acknowledge what the pregnant woman or			
caregiver is doing well?			
9. Did the counsellor use Job Aids or counselling cards during the			
counselling session?			
10 .Was the counselling session held in a comfortable space?			
Maximum Score for section (20)			
E: Other Support (This may not be applicable to all caregivers)			
1. Did the counsellor discuss helping the mother with poor			
positioning and attachment, breast problems, or other			
breastfeeding difficulties?			

2 If the child is sick or has recently been sick, did the counsellor			
provide any advice on feeding practices during and after illness?			
3. Did the counsellor discuss any community resources the			
woman could access, e.g. support groups, community health			
workers, socioeconomic support, etc.			
4. Did the counsellor discuss other issues that may affect the			
mother's ability to change practices or implement suggestions?			
Maximum Score for section (8)			
F: Information and Education			
1. Did the counsellor provide information and guidance to the			
caregiver on issues that arose from the counselling session that			
1. Did the counsellor provide information and guidance to the			
caregiver on issues that arose from the counselling session that			
are :			
-accurate?			
-unbiased?			
-relevant/appropriate?			
-clearly explained?			
Maximum Score for section (8)			
TOTAL SESSION SCORE			

*******The total maximum score will be 86.

PLEASE USE THE SPACE BELOW TO SUMMARIZE YOUR OVERALL IMPRESSIONS OF THIS COUNSELLING SESSION AND COUNSELLOR

Follow-up and Supervision Summary

Name of counselor	Designation	
Counselor's ID number	Date of training	
Health facility		
Visit #	Date	

Counseling observation

Indicator

- A1. Antenatal care assessment
- A2. Postpartum assessment
- A3. Feeding for young children (6 to 23 months)
- B. Information and education
- C. Decision-making and goal-setting
- D. Plan and follow-up
- E. Counselor conduct and environment
- F. Other support

TOTAL (add A1-F) score or N/A

Points possible

Exercises reviewed? Yes ____ No ____ Counseling log reviewed? Yes ____ No ____

Comments:

Positive aspects:

Areas for improvement (list concrete steps below for addressing one of these areas):

Three concrete steps to take in the next 6 months:

1.

2.

3.

Supervisor counselor in charge/FPP