MODULE 5

COMMUNITY-BASED SURVEILLANCE TRAINING MODULE



U.S. Centers for Disease Control and Prevention

MODULE 5.1

COMMUNITY-BASED SURVEILLANCE TRAINING MODULE



FACILITATOR GUIDE

U.S. Centers for Disease Control and Prevention

TABLE OF CONTENTS

Acronyms	004
Glossary of Terms	005
Overview	008
Purpose	008
Audience	008
General Objectives	009
Specific Learning Objectives	009
Facilitator Guide	010
Community-Based Surveillance Facilitators	010
Agenda	011
Materials	011
Preparation	011
Logistics and Supplies	012
Training Location and Space Setup	012
Assistance to the Principal Facilitator	012
Supplies for Participants	012
Supplies for Principal Facilitator	012
Community Health Volunteers Training (1/2 day)	013
Agenda for Community Health Volunteer Training	013
S1. Welcome and Introductions	015
S2. Training Overview, Agenda and Knowledge Check	019
S3. Community-Based Surveillance Overview	024
S4. Signals for Community-Based Surveillance	034
S5. Flow of Information: What happens when you report?	048

TABLE OF CONTENTS

S6. Key Informant Engagement: How to engage your communities?	056
S7. Community Health Volunteer Training Review, Knowledge Check, and Close	062
Local-Level Supervisors Training (1/2 day)	066
Agenda for Local-Level Supervisor Training	066
Energizer Activity	068
S8. Triage: Why it is important, what it is, and how to do it	070
S9. Verification: Why it is important, what it is, and how to do it	077
S10. Data Recording	083
S12. Supportive Supervision	090
S13. Continuous Community Engagement	094
S14. Local-Level Supervisor Training Review, Knowledge Check, and Close	099
Appendices	102
Appendix A: Training Knowledge Check Part 1	103
Appendix B: Training Knowledge Check Part 2	104
Appendix C: Training Knowledge Check Part 1 & 2 Answers	105
Appendix D: Example of Community Health Volunteer Notebook	107
Appendix E: Verification Tool	108
Appendix F: Signal Game	110
Appendix G: Signal Game Answers	111
Appendix H: Example of Signal Register for Community-Based Surveillance	114
Appendix I: Flipcharts	117

► ACRONYMS

Africa CDC	Africa Centers for Disease Control and Prevention
US CDC	U.S. Centers for Disease Control and Prevention
CBS	Community-Based Surveillance
СНУ	Community Health Volunteers
EBS	Event-Based Surveillance
EWAR	Early Warning and Response
IBS	Indicator-Based Surveillance
IHR	International Health Regulations
IDSR	Integrated Disease Surveillance and Response
SMS	Short Message Service
WHO	World Health Organization

GLOSSARY OF TERMS

Community-based surveillance (CBS):	CBS is the systematic detection and reporting of events of public health significance within a community, by community members. Community Health Volunteers (CHV), the public, religious leaders, civil society members, teachers, and similar groups are engaged and trained to detect and immediately report events or health risks occurring in their communities. CBS may also be known as community health surveillance, or community event-based surveillance.
Community health volunteers (CHV):	According to a WHO study group, CHVs may be members of the communities where they work, should be selected by the communities, are answerable to the communities for their activities, and should be supported by the health system but not necessarily a part of its organization. They may also be known as community health workers, among other terms.
Epidemic intelligence:	The systematic collection, analysis and communication of any information to detect, verify, assess and investigate events and health risks with an early warning objective.
Event:	The International Health Regulations (IHR) define an event as "[] a manifestation of disease or an occurrence that creates a potential for disease; []". This includes events that are infectious, zoonotic, food safety, chemical, radiological or nuclear in origin and whether transmitted by persons, vectors, animals, goods/food, or through the environment.
Event-based surveillance (EBS):	Defined by the World Health Organization (WHO) as the organized collection, monitoring, assessment and interpretation of mainly unstructured ad hoc information regarding health events or risks, which may represent an acute risk to health. Such information can come from diverse sectors and may include animal, environment and other sectors.
Indicator-based surveillance (IBS):	Defined by the WHO as the systematic (regular) collection, monitoring, analysis, and interpretation of structured data, i.e., of indicators produced by a number of well-identified, mostly health-based, formal sources.

Integrated Disease Surveillance and Response (IDSR):	Adopted by the WHO Regional Office for Africa (AFRO), IDSR is an approach to improve public health surveillance and response in the African region by linking community, health facility, district, and national levels.
Intermediate administrative level:	Intermediate administrative levels may be defined differently in different countries. For the purpose of this document, an intermediate level is the public health administrative level below the national-level that is responsible for conducting preliminary investigations and implementing responses to reported public health events or suspected outbreaks in a given jurisdiction. The intermediate level may otherwise be referred to as districts or counties, among others.
International Health Regulations (IHR) (2005):	An international agreement that is legally binding for 194 countries (States Parties), including all WHO Member States. The IHR define their purpose and scope as: "to prevent, protect against, control and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, and which avoid unnecessary interference with international traffic and trade".
Local administrative level:	Local administrative levels may be defined differently in different countries. For the purpose of this document, a local administrative level is the lowest administrative division within a country, directly above the community-level.
Local-level supervisors:	Healthcare workers or other public health staff who have received formal training on surveillance, and who operate at the local administrative level, in healthcare facilities, Ministry of Health offices, or other designated locations. Local-level supervisors are responsible for the triage and verification of signals reported to them from communities, as well as for the supervision of CBS activities and CHV in their catchment area.
Monitoring:	Refers to the routine and continuous tracking of the imple- mentation of planned surveillance activities (monitoring the implementation of the plan of action) and of the overall per- formance of surveillance and response systems.
Outbreak:	A disease outbreak is the occurrence of cases of disease in excess of what would normally be expected in a defined community, geographical area or season. An outbreak may occur in a restricted geographical area or may extend over several countries. It may last for a few days or weeks, or for several years.

	A single case of a communicable disease long absent from a population, or caused by an agent (e.g. bacterium or virus) not previously recognized in that community or area, or the emergence of a previously unknown disease, may also constitute an outbreak and should be reported and investigated.
Public health surveillance:	The continuous, systematic collection, analysis and interpretation of health-related data needed for the planning, implementation, and evaluation of public health practice.
Reporting:	The process by which health events and health risks are brought to the knowledge of the health authorities.
Response:	Any public health action triggered by the detection of a public health risk (e.g. monitoring of the event, information of the public, triggering field investigation and/or implementation of any control or mitigation measures). The nature of the response will have to be adapted according to the nature of the public health risk.
Signals:	Patterns of disease or other information considered by the Early Warning and Response system as representing potential acute risk to human health, such as an outbreak. All signals may not become events and as such need to be triaged and verified before a response is initiated. Signals may consist of reports of cases or deaths (individual or aggregated), potential exposure of human beings to biological, chemical or radiological and nuclear hazards, or occurrence of natural or man-made disasters.
Triage:	The process of screening out the data and information that are relevant for early detection purposes (i.e. the screening out of mild/irrelevant events from potential acute public health events, and the cleaning to eliminate duplicates and correct obvious mistakes).
Verification:	In the context of the IHR (article 1): "[] the provision of information by a State Party to WHO confirming the status of an event within the territory or territories of that State Party". Under the IHR, all State Parties are required to provide verification upon request by WHO within a limited time period. In the current document, verification is also the pro-active cross-checking of the validity (veracity) of the signals collected by EWAR, by contacting the original source, additional sources, or by performing field investigation. Verification requires that hoaxes, false rumors, and artefacts are eliminated from further consideration.





Purpose

The CBS Training Module will provide CHVs and local-level supervisors with the knowledge, skills, and tools necessary to effectively implement EBS at the community-level, also known as CBS.

This module is divided into two parts. The first part focuses on training CHVs on the following:

- What is surveillance and why is surveillance important in communities, and
- When and how CHVs, supported by key informants, can effectively conduct CBS activities including detecting, recording, and reporting of signals to local-level supervisors.

The second part of this module addresses the local-level supervisor's role and responsibilities in the CBS process. It discusses:

- How the process of triage and verification of reported signals works,
- Why triage and verification are important,
- When and how triaging and verification of signals are conducted,
- What information should be recorded and reported to higher-level health authorities,
- How to create and maintain a key informant network,
- How to effectively provide supportive supervision to CHVs, and
- What strategies can be used to ensure continuous community engagement in CBS implementation.



The audience that should receive training using this module includes CHVs and local-level supervisors who will be actively involved in the surveillance of events at the community level, and who may have been previously trained to carry out community health activities.



General Objectives

The Community-Based Surveillance Training Module has two general objectives:

- ► To build and strengthen the capacity of communities to conduct effective surveillance activities in line with the routine surveillance strategy, and
- To improve the flow of surveillance information between the community and the existing public health surveillance system.



Specific Learning Objectives

By the end of this training module, CHVs will have the skills, knowledge, and resources to:

- Detect signals emerging in the community,
- Report signals to their local-level supervisors, and
- Engage community members (key informants) to participate in CBS.

By the end of this training, local-level supervisors will have the skills, knowledge, and resources to:

- Detect signals emerging in the community,
- Describe the signal triage and verification processes,
- Determine the outcome of signal verification,
- Register and report all events to the intermediate level,
- Demonstrate the use of recommended resources for local-level supervisors for the implementation of CBS, and
- Explain strategies to engage community members (key informants and CHVs) in CBS.

To achieve the maximum benefit from using this module, it is important to consider and acknowledge the role of communities as sources of formal and informal public health surveillance information, and to provide community members not targeted with this training regular basic surveillance and awareness sensitizations.



Facilitator Guide

The Community-Based Surveillance Training Module is comprised of a Participant Guide, and a Facilitator Guide. This component, the Facilitator Guide, is to be used by facilitators to provide effective training on CBS to CHVs and local-level supervisors. This guide contains the following sections:

- CHV Training This section provides facilitators with step-by-step instructions on facilitating the training, and teaching, relevant CBS activities (signal detection, data recording, and reporting) to CHVs, while also sensitizing local-level supervisors to these activities.
- Local-Level Supervisor Training This section provides facilitators with step-by-step instructions on facilitating the training- and teaching-relevant CBS activities (signal triage, signal verification, data recording, reporting, and supportive supervision) to local-level supervisors.
- **Appendices** Basic templates for CBS resources, guidelines for exercises, and participant evaluations.

This detailed Community-Based Surveillance Training Module Facilitator Guide is for facilitators to use to conduct training at the community level using adult learning theories and principles. The guide includes the session overview, learning objectives, content overview, teaching methodology, materials, and suggested timeframe for each session and activity. The guide also includes step-by-step instructions, facilitator tips, and key messages to guide facilitators to effectively deliver the module.



Community-Based Facilitators

Training for CBS stakeholders, including CHVs and local-level supervisors, should be conducted by persons (at least two) with deep knowledge of surveillance. Facilitators should have experience with IBS in their countries, as well as knowledge of any existing community health structures, EBS, and CBS. In addition, they should have knowledge and expertise on group facilitation using adult learning theories and principles and should familiarize themselves with the training materials in advance.

Effective Facilitation and Communication Tips

When facilitating small group exercises and discussions and delivering lectures, it is essential that facilitators are mindful of adult learning principles and aware of their facilitation and communication style. Effective facilitation and communication skills for these delivery methods include:

- Preparing yourself for the facilitator role by familiarizing yourself with the training materials and facilitation techniques,
- Arranging the training space for group discussions and reading and writing activities,
- Ensuring the learning outcomes are clear by reviewing them with the group at the start of the session,
- Using lay language and everyday words during lectures and group discussions,
- Managing participation by reinforcing the importance of active participation, active listening, and role allocation to participants,

- Providing enough time for participants to achieve the exercise's learning objectives,
- Observing the mood of the room and knowing when to adjust your facilitation style and communication (e.g., when to conduct a quick energizer exercise or ask check-in questions),
- Recognizing and reinforcing supportive behaviors and responses by highlighting the participants' experiences and encouraging peer-to-peer learning, and
- Supporting the small group's success by summarizing key points, asking questions, and thanking them for their participation.



The suggested agenda for this CBS training is a one-day training split into two workshops; a morning workshop for both CHVs and local-level supervisors, and an afternoon workshop for local-level supervisors only. The proposed agenda may be revised as needed based on EBS implementation and country context.



Materials

Each participant should receive a copy of the Community-Based Surveillance Training Module Participant Guide at the beginning of the workshop, which contains materials for their use during and after training. This Facilitator Guide also provides guidance on how best to facilitate activities if materials such as flipchart paper and markers are not available.



Preparation

All facilitators for CBS training should review the materials needed to carry out each session, found in each section of this guide. Once facilitators are familiar with the content, they should take the time to develop the materials that are required in the sessions. In particular the following materials should be prepared in advance:

- Appendix A: Training Knowledge Check Part 1 (copied for CHV + local-level supervisors x 2)
- Appendix B: Training Knowledge Check Part 2 (copied for local-level supervisors x 2)
- Appendix F: Signal Game
- Appendix I: Flipcharts

LOGISTICS AND SUPPLIES

Training Location and Space Setup

Training locations may vary, and can include community health facility compounds, health centers, hospitals, church premises, and other locations. Five to six tables with a seating capacity of six participants per table is recommended. This will facilitate group work and discussions in the plenary sessions. The facilitator(s) will also be able to move around the tables more easily to engage in discussions and answer any questions from trainees.

Assistance to the Principal Facilitator

As previously stated in Section F above, it is strongly recommended that this training be facilitated by at least two persons; a primary facilitator and a secondary facilitator who can assist with small group activities and discussions and can record and take notes during the session.

If the primary facilitator is alone, he/she should identify at least four participants who are literate and can volunteer to play the role of team (or small group) leads. Each volunteer will be responsible for reading the content and instructions for the small group exercises, role-plays, and case studies as well as reporting back to the larger group on their group's discussions and answers. Designating participants as 'team leads' builds leadership and facilitation skills among CHVs and local-level supervisors and helps mitigate any literacy concerns that participants might have.

Supplies for Participants

- Name tags and holders
- Writing pens and journals
- Copies of Community-Based Surveillance Training Module Participant Guide

Supplies for Principal Facilitator

- Flipchart, markers, tape
- Bowls or containers x 2
- Community-Based Surveillance Training Module Facilitator Guide
- Community-Based Surveillance Training Module Participant Guide

COMMUNITY HEALTH VOLUNTEERS TRAINING (1/2 DAY)

AGENDA FOR COMMUNITY HEALTH VOLUNTEER TRAINING

SESSION	ACTIVITIES	ТІМЕ
1. Welcome and Introductions Activity	Small group formation Introductions	30 minutes
2. Training Overview, Agenda, and Pre-Training Knowledge Check	Group discussion Written or verbal pre-training questionnaire	25 minutes
 3. CBS Overview What is surveillance? Why is surveillance important in our communities? 	Matching exercise Small group discussions & presentation Lecture	30 minutes
 4. Signals for CBS What are signals? How are signals detected? What are the signals for CBS? How do you record signals? 	Group discussion Lecture Role-play Case study	60 minutes

Morning Break (15 minutes)

Opportunity to interact with colleagues and mentors

SESSION	ACTIVITIES	ТІМЕ
 5. Flow of Information: What happens when you report? What do you report? Who do you report to? When do you report? How do you report signals? 	Group discussion Lecture Q&A discussion Role-play	45 minutes
 6. Key Informant Engagement: How to engage your communities? Who are key informants and what is their role? How do you maintain a network of key informants? 	Q&A discussion Small group discussions & presentations Lecture	30 minutes
7. Community Health Volunteer Training Review, Post-training Knowledge Check, and Close	Group discussion Written or verbal post-training questionnaire Summary and participant feedback	25 minutes

CHV Training

Total 4 hours

SESSION 1

WELCOME AND INTRODUCTIONS

C Purpose

- Help participants get to know each other and share their expectations of the CBS training,
- Bet participants to interact with each other and the facilitators in a fun and non-threatening way, and
- Warm up the conversation to the topic of the training.

di Materials

Facilitator

- Colorful postcards/index cards cut into four even pieces (depending on the number of participants required in each group)
- Flipchart paper for each group
- Markers for each group

Participants

Participant Guide: Introduction Questions (p. 07)



ACTIVITY 1.1

GETTING TO KNOW EACH OTHER



Step 1: Introduce yourself

Start the workshop by introducing yourself and providing some background on your experience working in surveillance and interest in facilitating the training. This should provide a non-threatening start to the workshop and help to build trust between you and the participants. It is also a way of modelling the introductions exercise ahead.

Step 2: Form groups using the postcards

After introducing yourself, move on to the introductions activity involving all participants, including yourself. This exercise helps everyone get to know each other so they feel more comfortable to interact for the remainder of the training.

Distribute the cut-up postcards randomly to participants and explain that they need to form a whole picture by finding the other pieces of their postcard. They will need to describe what they have on their piece of postcard rather than just showing it to other participants. This is a way of generating conversation and a sense of fun.

If materials are not available, randomly divide participants into groups of four.

When all the participants are standing in their 'postcard groups', explain that they will be working in these 'work groups' throughout the workshop to do various activities.

Step 3: Call for team leads

Once everyone is in their work groups, ask for participants to volunteer to play the role of team leads. You can say something like the following to do this:

In order to successfully meet the goals and objectives of this CBS training as well as meet your expectations, we will need your help facilitating. We are aware that some of you have experience teaching, facilitating, and mentoring your peers, therefore we are asking for a volunteer from each group to help us with this training.

You will be team leads during the small group exercises, discussions, and case studies. In your role, you will:

- Read out information and instructions for role-plays, small group exercises, and case studies found in the Participant Guide and handouts,
- Facilitate and guide the discussion in your group,
- Encourage participation from members in your group, and
- Record information discussed in your group and present it to the larger group during presentation and feedback activities.

Please let us know if you are interested in taking this leadership role by standing up and introducing yourself.

You should provide each volunteer an opportunity to say their name, what community they come from, and why they want to be a team lead during this training. Make sure to thank them all for volunteering.

Step 4: Facilitate small group introductions

Now that everyone is in a group and has a team lead, give each group a piece of flipchart paper, list of introductions questions, and markers.

If materials are not available ask team leads to refer to the Welcome and Introductions section in the Participant Guide for the questions for this activity and record the answers in their journals.

Ask participants to introduce themselves by answering the following questions on the flipchart paper (if available) or in their Participant Guide (page 07):

- 1. What is your name and what community are you from?
- 2. What two things do you enjoy most about the work you do?
- 3. What is one expectation you have for this training?
- 4. What two core values or ground rules should the group have during this training?
- 5. What two words best describe the people in your community?

Ask the group to choose someone who will write the answers and another who will be responsible for introducing each group member and sharing the group's answers with the larger group. If materials are not available, ask the team lead to introduce the group members and share some of the answers discussed in their group.

Each group should be given two minutes to share with the larger group. Remind participants and team leads to stick to the time limit and show respect towards each reporter by not engaging in side conversations.



As a training facilitator remember your role is to not only provide information and give answers to questions, but to create a positive and productive environment that encourages learning and allows participants to feel comfortable interacting and contributing to the training.

SESSION 2

TRAINING OVERVIEW, AGENDA, AND KNOWLEDGE CHECK

C Purpose

- Contextualize and create interest in the training,
- Communicate the training's two general objectives,
- Give participants a roadmap for the workshop via the agenda, and
- Assess their current CBS knowledge and skills.

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Facilitator

- Facilitator Guide: Training Agenda (pp. 13-14)
- Appendix A: Training Knowledge Check Part 1 (copied for CHVs & local-level supervisors)

Participants

- Participant Guide: Training Agenda (pp. 05-06)
- Participant Guide: Purpose of CBS Training (p. 08)



ACTIVITY 2.1

TRAINING OVERVIEW AND AGENDA



Step 1: Review the training goals and agenda

Ask participants to open the Participant Guide to page page 08. Go over the purpose of the training and agenda by reading the script below:

The purpose of this training is to provide you—CHV and local-level supervisors—with the knowledge, skills, and tools necessary to effectively detect, record, and report events that may be happening in your communities. Our training today has two general objectives:

- To build and strengthen your ability to look for and report unusual occurrences in your communities, and
- To improve the flow of information between your community and the health system in this country.

Let's now review the training agenda on page pages 05-06. This one-day CBS training is divided into two parts. The first half of the day will focus on

- What surveillance is and why surveillance is important in communities, and
- ▶ How CHVs can effectively carry out surveillance in their communities.

As you can see from the agenda, we will be covering the following topics in the first workshop:

- CBS overview
- Signals for CBS
- Flow of information: What happens when you report?
- Key informant engagement: How to engage your communities?
- Training review and post-training knowledge check

We will have a 15-minute break at [the time 2 $\frac{3}{4}$ hours from Session 1 start time] so you can stretch your legs and use the bathroom if needed. The workshop will finish at [the time 1 $\frac{3}{4}$ hours from the end of the break].

The second half of the training is specifically for local-level supervisors. It will discuss local-level supervisors' roles and responsibilities in CBS.

Ask if there are any questions relating to the purpose of the training or the agenda.

Step 2: Go over expectations for the workshop and ground rules

Finish the activity by establishing the expectations for group participation and respect for the ground rules that have been established in the introductions activity. You can use the following script:

Our goal as facilitators is to make this training as informative and interactive as possible. In order for us to successfully meet the expectations you shared during the introductions activity, we are asking for everyone's participation. We encourage you to share your work experiences and learn from each other. At the same time, we ask that we all respect the ground rules we have listed (point to the flipcharts). If you have any questions or concerns, please feel free to speak to one of us.

If this activity was conducted without flipcharts, facilitators should replace the above paragraph with the following.

Our goal as facilitators is to make this training as informative and interactive as possible. In order for us to successfully meet the expectations you shared during the introductions activity, we are asking for everyone's participation. We encourage you to share your work experiences and learn from each other. At the same time, we ask that we all respect the ground rules we have discussed and agreed upon, such as... (name a few). If you have any questions or concerns, please feel free to speak to one of us.

ACTIVITY 2.2

PRE-TRAINING KNOWLEDGE CHECK



Step 1: Prepare participants for the knowledge check

Introduce the knowledge check by reading the script below:

Prior to starting our first session, we're going to complete a short survey on what you already know about surveillance. It doesn't matter if you don't know certain terms. Hopefully by the end of the training you will. We'll do a second check at the end of the training.

Distribute Appendix A: Training Knowledge Check Part 1 to both CHVs and local-level supervisors and read the instructions out loud as follows:

You will have 15 minutes to complete the knowledge check. You are encouraged to ask us if you have any questions or need clarification on questions asked. Please respect everyone's time by not engaging in side conversations once you have completed your own test.

Offer participants the option of taking the knowledge check with the assistance of a facilitator who will read the questions in a small group setting away from the larger group. This will allow participants who may be illiterate or have difficulty reading to feel more comfortable completing the test.

Step 2: Finalize the session

After all participants have completed the knowledge check, collect their questionnaires and let them know they will be looking at the questions again at the end of the training and going over the answers at that time.



Remember facilitators, first impressions are critical, therefore it is important to catch and hold participants' attention right from the start. This can be done by establishing your credibility, listing the objectives of the training, introducing the agenda, noting the ground rules and what to expect, and building interest and excitement.

SESSION 3

COMMUNITY-BASED SURVEILLANCE OVERVIEW

This session focuses on defining surveillance and CBS and discussing their importance in detecting and reporting diseases in the community.



Learning Objectives

By the end of this session, participants will be able to:

- Define key terms and activities conducted in CBS,
- Describe how surveillance is conducted in their communities, and
- Describe the importance of surveillance at the community level.



Materials

Facilitator

- Flipchart A (prepare one for each group in advance)
- Markers for each group

Participants

Participant Guide pages 09-14



ACTIVITY 3.1

SURVEILLANCE TERMINOLOGY



Step 1: Introduce the matching exercise

Introduce the activity to the group by explaining they are going to go over some key words used in CBS that will be used throughout the training. Ask everybody to open their Participant Guide to page 10. Explain they should spend 5 minutes going through the terms on the left and matching them with their definitions on the right.

Step 2: Consolidate terms in the Participant Guide

Ask participants to complete the matching exercise individually. Check they have the right answers by reading the terms and definitions to them. Summarize the importance of knowing these terms and ask if anyone has any questions before moving to the content overview.

Offer participants the option of completing this exercise as a small group discussion if reading and writing the answers is problematic. Team leads can read out the term and the group can discuss what they think it means. Team leads can then read out the appropriate definition.

CBS Terms Matching Exercise

Term	Definition
Community-based surveillance (CBS)	Regularly checking on how surveillance is being done, and whether it is working.
Detection	When more incidents of a disease exist than would normally be expected in a specific place and time period.
Event	Becoming aware of or noticing a signal that may not be known to health authorities.
Monitoring	To give (either verbally or in writing) an account of a signal you or someone else has heard, and/or seen to health authorities.
Outbreaks	A reaction by health authorities to a detected and confirmed health event in a community.
Recording	Keeping written notes on details and information (i.e., signals and events) reported.
Response	An unusual occurrence that may cause harm to the health of humans, animals, and/or the environment.
Reporting	Keeping watch for, detecting, and reporting signals and events.
Signals	Structured way of detecting and reporting events within a community, by community members.
Surveillance	Things one sees or hears about that are happening in the community that may lead to finding an event that may be a threat to humans, animals, and the environment.

CBS Terms Matching Exercise Answers

Term

Definition

Community-based surveillance (CBS)	Structured way of detecting and reporting events within a community, by community members.
Detection	Becoming aware of or noticing a signal that may not be known to health authorities.
Event	An unusual occurrence that may cause harm to the health of humans, animals, and/or the environment.
Monitoring	Regularly checking on how surveillance is being done, and whether it is working.
Outbreaks	When more incidents of a disease exist than would normally be expected in a specific place and time period.
Recording	Keeping written notes on details and information (i.e., signals and events) reported.
Reporting	To give either verbally or in writing an account of a signal you or someone else has heard, and/or seen to health authorities.
Response	A reaction by health authorities to a detected and confirmed health event in a community.
Signals	Things one sees or hears about that are happening in the community that may lead to finding an event that may be a threat to humans, animals, and the environment.
Surveillance	Keeping watch for, detecting, and reporting signals and events.





Step 1: Brainstorm the question

Ask students to go over the definition of surveillance as presented in the CBS Terms Matching Exercise. Ask them to discuss what they think this means in practical terms. Provide feedback and encouragement when groups are close to the accepted definition.

Step 2: Consolidate with accepted definition

Read the definition of surveillance as provided below. Participants can follow along in the Participant Guide (page 11). Ask participants to provide examples of surveillance from their communities and answer any questions they may have.

Accepted definition

Surveillance is **keeping watch** and **immediately reporting** signals and events in communities and/ or geographic areas. It encompasses the activities described on the following page:



Look

Look and watch for unusual or unexpected occurrences.

Listen

Listen for other community members talking about unusual or unexpected occurrences.



Record

Record / write down information and details about the unusual or unexpected occurrences that you have heard about or found.

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Report

Report / tell someone (i.e., your supervisor) who will be able to find out more information and verify if these signals are true events that require response actions.

ACTIVITY 3.3

WHY IS SURVEILLANCE IMPORTANT?



Step 1: Brainstorm the question

Ask students to continue working in their groups to answer the question, 'Why is surveillance important?' Get the team lead from each group to read their group's answer. Provide feedback and encouragement where groups are close to the answer below.

Step 2: Provide the answer

Give feedback on the accepted answer to this question by reading the answer as provided below. They can read along in the Participant Guide page 11.

Why is surveillance important?

Surveillance is important because it helps to **detect diseases early** and trigger a response to **reduce the spread of diseases, people getting sick, suffering, and deaths in our communities.** Events must first be detected and reported before they can be solved and gotten rid of in the community. The earlier an event is detected and reported, the faster it can be addressed, so that our friends, families, and neighbors remain safe.

Step 3: Brainstorm ideas on how surveillance is occurring in their communities

Move on to the topic of how surveillance is occurring in their communities by looking at the questions presented in Flipchart A. They also have these questions in their Participant Guide, page 12.

Give each group a copy of Flipchart A and a marker. Ask team leads to take notes (recorder) and to select another group member to be the timekeeper and presenter when it's time to feedback to the larger group. Explain that this is a brainstorming exercise and therefore active participation from every group member is very important. Start the discussion.

Discussion questions

- Do people in your community know the purpose and importance of surveillance? Why? Why not?
- How do people in your community know surveillance activities are being conducted in the community?
- Who is involved in ensuring surveillance activities are happening in your community?
- What are some ways that surveillance is conducted in your community?

If materials are not available, facilitators will ask each group to refer to the 'Small Group Exercise: What is Surveillance?' section in their Participant Guide and complete the exercise by discussing and answering the four questions as a team. The team lead will take notes and present some of the answers discussed in their group during the participant presentation/feedback.

Step 4: Feedback on discussions through small group presentations

Monitor the time of the exercise. Once 15 minutes has passed, ask the groups to direct their attention to the larger group for the group presentations. Ask if there is a group that wants to present first. If no group volunteers, randomly select a group to present.

Inform the groups that they will have two minutes to present. Remind participants to stick to the time limit and show respect towards each reporter by not engaging in side conversations. Provide no more than 10 minutes to complete this discussion.

Summarize common points from the group presentations making sure to include every group's input.

ACTIVITY 3.4

WHAT IS COMMUNITY-BASED SURVEILLANCE?



Step 1: Define CBS

Move on to the topic of CBS using the following script and reading the definition that follows. Students can read along with you in the Participant Guide page 12.

Now that we have shared our ideas on what surveillance is, why it is important, and how it is conducted in our communities, let's identify the characteristics of CBS and its importance at the community level. Let's go over what the main goals of surveillance are.

What are the main goals of surveillance?

Surveillance aims to:

- Identify as early as possible any event that puts the health of a community at risk, including its residents, animals, and the environment,
- Ensure that the health system is made aware of the health-related incident in good time, and
- Ensure that the **right information is available to respond** to the event.

Detecting and reporting events in communities, by community members, is known as **CBS**. This type of surveillance requires and involves community participation. This means community members look for unusual occurrences or events in humans, animals, and/or the environment which may be a risk to their communities.

The goal of CBS is to look for signals that represent events needing an immediate response and to report them immediately to supervisors.

Step 2: Concept check

Present each of the short scenarios below without telling the participants what the suspected disease is. Discuss what events might be occurring and why they need to be responded to quickly.

Case 1

There is a 30-year-old woman with a 2-year-old son in the neighboring village. Both have a high fever, diarrhea, stomach pain, and are vomiting blood. The woman recently prepared the body of deceased relative for their funeral. (It could be **Ebola**).

Case 2

A large number of chickens in your village have died overnight suddenly. (It could be **avian influenza** or another disease that could also occur in humans).



A group of children from the same elementary school have yellowing skin, high fever, bleeding, vomiting, and body aches. (It could be the start of a **yellow fever outbreak**. There is a vaccine that can stop it).

Step 3: Review and wrap-up the session

Facilitators should ask participants to share with the rest of the group one message they understood from this session. After receiving 3-5 answers, he/she should sum up the session by reading the takeaway message below.

The detecting and reporting of events, that are conducted by community members in communities is known as CBS.



The goal of CBS is to look for and report events that need to be responded to quickly.

CBS is more effective when everyone in the community takes part and informs CHVs of events that are a threat to all.

SESSION 4

SIGNALS FOR COMMUNITY-BASED SURVEILLANCE

This session defines signals and discusses how they are detected, recorded, and reported to local-level supervisors.



Objectives

By the end of this session, participants will be able to:

- Define signals that may represent events,
- Explain how signals are detected in communities,
- Describe the various types of signals in their country,
- Explain the importance of recording information (data) for reporting, and
- Demonstrate how signals are recorded.

Materials

Facilitator

- Flipchart paper
- Marker
- Appendix D: Example of Community Health Volunteer Notebook

Participants

Participant Guide pages 15-20



Role-Play Exercise

The recommended way to reinforce the importance and recommended process of signal detection and recording is to have participants simulate and witness the process themselves through role-play exercises. Role-plays are an effective method for demonstrating real life experiences. A role-play enacts a situation and gives participants a chance to observe and re-examine their own or someone else's behavior. Most importantly, role-plays draw upon the experiences and knowledge of the participants and encourages them to put a particular learned theory into practice.



This session will include two role-play exercises, one between a key informant and a CHV, and the other between a CHV and a local-level supervisor. In order for these exercises to have the desired outcome it is important that all facilitators have effective facilitation and communication skills for role-playing exercises.

Effective Role-Play Facilitation Tips

Preparation and facilitation of role-play/simulation exercises includes:

- Arranging the room so that everyone can fully participate,
- Clearly explaining the purpose and the process to be used,
- Verbally choosing roles or handing out printed descriptions of the roles to the participants including the observers,
- Asking for volunteers to play the roles,
- Reassuring everyone that this will be entertaining and informative,
- Asking volunteers if they have any questions or need clarification on the instructions,
- During the role-play, only interrupting if a player is having difficulty or you want to stop the scene to ask questions,
- Conducting a feedback session that reviews and discusses what happened in the role-play,
- Preparing open-ended questions that cover both content and feelings,
- Asking participants to think about how this role-play is similar to their own experiences and what they can take from the exercise and apply to their work,
- Giving participants enough time to process the role-play, and
- Allowing enough time for participants to express their personal thoughts, feelings, and experiences.

Case Study Small Group Exercises

Case studies are written accounts or problems of real or made up situations with enough details for participants to determine the best decisions they might take. They are designed to simulate reality, draw upon participants' experiences and knowledge, and encourage the development of critical thinking and decision-making skills. The use of case studies in a training helps to actively involve participants in the learning process and forces them to apply theory to practice.
In this part of the workshop you will present a case study to the class and then ask them to work in their groups to discuss possible solutions and outcomes for the case in question. You will then discuss the case with the class as a whole and see if a collective conclusion can be reached. At the completion of the case study, participants should be able to explain how events are identified at the community level and how to record and report their occurrences.



This session will include a case study based on the first role-play scenario in this training. In order for this case study to have the desired outcome it is important that all facilitators have effective case study facilitation and communication skills. It is strongly recommended that facilitators follow the Case Study Facilitation and Communication Tips.

Case Study Facilitation and Communication Tips

To effectively prepare for and facilitate a case study you should:

- Review the training sources for each case study and adapt the details of the case to fit the participants' circumstances and that of the country and/or community they live in.
- Prior to dividing participants, explain the purpose of using case studies, read directions out loud, and provide a timeframe for completion of the activity.
- Divide the participants into groups of four to six, provide each group a copy of the case study, some flipchart paper, and a marker, and encourage the group to assign roles (lead, recorder, and reporter).
- Be available to answer questions or provide clarification if needed.
- Regroup for a whole class discussion and ask each group to present their case study and responses.



COMMUNITY-BASED SURVEILLANCE SIGNALS



Step 1: Brainstorm the topic

Using **smoke** as an example, direct participants to look at the image of the forest fire on page 15 of their Participant Guide. Ask the following two questions. Make sure you give participants enough time to provide 2-3 answers before moving on to the next question.



Q1. What do you see in this picture?

Seeing smoke rising above the trees in a forest – you have to go and look to see if there's actually a fire. It could just be a cloud that someone has mistaken for smoke – a rumor that someone has heard and repeated.

Q2. What are signals and events?

Encourage 2-3 answers for this question.

Step 2: Present definitions for signals and events using smoke and fire metaphor

Provide the following definitions of signals and events as they relate to surveillance. Ask participants to fill in the missing words in their Participant Guides page 16.

Signals are like smoke - things one sees or hears about that are happening in the community that may represent a risk to humans, animals, and the environment. In other words, signals are information which might represent an event occurring in the community.

Events are like fires - something that is happening in the community that can spread and cause harm; like fires, events are best handled when they are small.

Step 3: Introduce the concept of the key informant

Signal detection is key to CBS; therefore, it is essential that facilitators stress the importance of community engagement and involvement of key informants. Facilitators will begin this part of the session by asking participants the two questions below and allowing participants to give 3-5 responses before providing the answer and moving to the next question.

Q1. How do we look for (detect) signals for possible events?

- Ask people to tell you what they know of unusual or unexpected occurrences happening in their community.
- Identify community members (key informants) who will be responsible for looking for (detecting) signals in the community.

Q2. If we are looking for key informants, what characteristics might those community members have?

- Individuals who have strong ties and relationships with other community members.
- Individuals who have credibility in the community and positive influence on other community members.

Step 4: Present characteristics of key informants and their role in signal detection

After the question and answer exercise, go over the characteristics of key informants and their role by saying the following. They can read along in their Participant Guide page 16.

How are signals detected?

Signals are most likely to be detected by CHVs and key informants because of their connections to their communities. These key informants may include traditional healers, pharmacists, school teachers, barbers and hairdressers, leaders of social groups, and religious leaders, among others. CHVs can improve signal detection from their communities by engaging key informants to help them to detect signals and report them to CHVs.

Now let the participants know that in order to better understand how signals are detected in communities they are going to participate in a role-play exercise.

ACTIVITY 4.2

HOW ARE SIGNALS DETECTED?



Note: Review the Effective Role-Play Facilitation Tips prior to facilitating this role-play.

Step 1: Prepare participants for the role-play

Introduce the role-play exercise by reading out the following instructions:

Working in your small groups you are going to act out a scene between a CHV and a key informant who has some information about a worrying situation in a neighboring village. Read through the scenario in your Participant Guide (page 16) then choose two people to act out the phone call between Pierre Dubois and Madame Diallo and their meeting at Pierre's house.

Give the groups 5 minutes to work on the scene then ask for two volunteers to play the roles in front of the class.

Step 2: Conduct the role-play

Ask if the volunteers have any questions, then remind them that they are to demonstrate how the signal has been detected and how information has been provided to the CHV. Also, make sure to inform them they have 5 minutes to enact this role-play, and then with a hand motion say 'Action!' indicating for the role-play to start.

Role-Play Scenario 1: How are signals detected?

Pierre Dubois, a 65-year-old man who works and lives in Village X, has called Madame Diallo, the CHV, to let her know that he needs to see her right away about a story he heard in the market that evening. He thinks it may be an incident that needs to be checked out immediately. Madame Diallo quickly picks up her CHV Notebook and heads to Pierre Dubois's home.

Upon her arrival, Pierre tells her that in the market a friend told him that in community Y there are two children under the age of 5 who have stopped walking. Both have stomach pains and sore throats, making it difficult to eat. One has had high fevers almost every night for the past week. Their mothers, who are sister wives, believe the last wife caused the children's illnesses out of jealousy because she was unable to have children of her own. Pierre remembers from a community meeting Madame Diallo held with key informants 3 months ago, that when children experience health problems like he has described it should be reported. He just prays it is not Ebola again.

The above role-play may be amended to fit the country context.

Step 3: Feedback on role-play

Once both volunteers have completed the role-play encourage the observers to clap for them. Then facilitate the feedback discussion by asking open-ended questions of the two volunteers (Pierre and Madame Diallo) and other participants (observers). Make sure to verbally state and write down key points from the discussion on flipchart paper.

If materials are not available, ask the primary facilitator assisting you to take notes which he/she will use to summarize the exercise.

Pierre's character:

- How did you feel about your character's actions in this role-play?
- What information did you think was important to give Madame Diallo about this signal you detected?
- Could a scenario like this happen in your community?

Madame Diallo's character:

- How did you feel about your character's actions in this role-play?
- What information did you receive? Was there any extra information you would have liked to get from Pierre but didn't?
- Could a scenario like this happen in your community?

Training participants (observers):

- Tell us how you felt about the actions of the characters in this role-play.
- How would you describe the signal Pierre detected and what important information was he able to provide Madame Diallo?
- What information should Madame Diallo have recorded in her CHV Notebook?
- What additional information, if any, will she need before reporting this signal to the local-level supervisor?

Step 4: Summarize and wrap-up the role-play

Summarize and close the role-play session thanking everyone for their participation as well as reading the key points written on the flipchart (or recorded by a facilitator/team lead) that came out of the feedback discussion. Inform participants that they will now identify and discuss the priority list of signals for their country.

ACTIVITY 4.3

SIGNALS FOR COMMUNITY-BASED SURVEILLANCE



Step 1: Present definitions of signals for CBS

Ask participants to open their Participant Guides to the list of signals on page 17 (examples from Africa CDC EBS Framework shown below; **these should be replaced by the signals that the country has selected for CBS**).



Ask participants to read each signal out loud. After each signal is read, ask the group:

- What do you think we are trying to detect with this signal?
- How would you describe this signal to someone in your community?

Ensure that all participants understand the signals and respond to any questions they may have. Note that not every signal will mean that a big event is happening, as some will be rumors or misunderstandings. However, it is important that CHVs quickly report the information that they detect to the local-level supervisors.

Step 2: Summarize and reinforce key messages

Recap what has been covered in the session to this point by asking participants to summarize what they have learnt about signals so far. After 3-5 participants have shared their summaries read the key takeaway message below.



A signal is information reported by a member of the community that may be an event.

It is important to remember that once a signal has been detected in a community, it should be reported immediately to the local-level supervisor.





Note: Review the Effective Case Study Facilitation Tips at the beginning of this session prior to facilitating this case study.

Step 1: Prepare participants for the case study

Inform participants that they will now address how CHVs should record the information (data) received from a signal that has been brought to their attention. Ask participants to get into their groups and open the Participant Guide to the case study description on page 18. Make sure each group has some flipchart paper and a marker (if available) to record their answers on. Let them know that the case study is a continuation of the situation described in the first role-play between the key informant (Pierre Dubois) and CHV (Madame Diallo). Read out the case study and instructions that follow.

Case Study Description

On October 3rd 2019, Pierre Dubois, a 65-year-old man who works and lives in Village X called Madame Diallo, the CHV, to let her know that he needed to see her right away about a story he heard in the market that morning. He thought it might be an event that needed to be checked out immediately. Madame Diallo met him the same day at his home to get more information about the signal he had detected. Pierre let Madame Diallo know that a friend had told him that two children under the age of 5 had stopped walking in a family compound less than one-mile walking distance from the market. Both children had been experiencing stomach pains and sore throats making it difficult to eat. One, the youngest, had a high fever almost every night for the past week. Their mothers, who are sister wives, believed the last wife has caused their children's illness out of jealousy, because she couldn't have children of her own. Pierre remembered from a community meeting Madame Diallo held with key informants three months ago, that when children experience health problems like the one he has described it should be reported immediately.

Madame Diallo asked Pierre if she could take him to see his friend that knew exactly where the family compound was located. Pierre agreed to take her to his friend Paul's home. The three of them then went to visit the family compound in question. There, Madame introduced herself to the head of the household, who was sitting in front of the compound, telling him she was one of the CHV responsible for looking out for and reporting any unusual occurrences or events in the community that might cause harm to other humans and animals. She then asked if she could speak with the mothers of the two children who had fallen ill in the past week. The father of the children brought her into the compound to speak to his wives. In the compound Madame Diallo made a few observations. She noticed that the homes were in close proximity to each other; children were eating outside from the same dish with their hands; the open toilet pits and showers were not too far from where the children were eating, and a child about the age of five years, was lying on a mat being fed by a teenage girl.

Once she was introduced to the man's wives, she asked them questions about their children's health. The senior wife, Fatima, and mother of the oldest child, spoke passionately about the children's condition and forcefully blamed the third wife, Tatianna for their illness stating that it wasn't until the third wife had brought her four nieces and nephews from Village Z, 10 miles away, three weeks ago, that their children had gotten sick. She complained that if Tatianna had taken her 6-year-old niece, who was already ill, to the clinic immediately, all their kids would be fine! Tatianna explained that it was not her fault the children were sick. Her nieces and nephews needed a place to stay for two weeks while her sister traveled to the city to find work. Her eldest niece only had a mild fever and fatigue when she arrived at the compound. After three days she was better. She explained that her nieces and nephews were all back in Village Z now and should not be blamed for what was happening to her sister wives' children. Madame Diallo asked to see the all the sick children including those she saw eating outside.

Now imagine you are Madame Diallo and you have received information from the family in addition to that which the key informant shared with you earlier in the day. As a group, think about what information should be recorded, and complete an entry in the CHV Notebook accordingly.

The above case study may be amended to fit the country context.

Step 2: Get participants to record an entry in their CHV notebooks

Ask participants to go to the CHV Notebook example on page 20 of their Participant Guide. Ask them to complete an entry in the CHV Notebook based on the case study you have just read to them. Give them 5 minutes to do this then go over the answers together making sure groups have recorded the correct information.

Step 3: Discuss additional questions related to the case study

When groups have completed the entry exercise, facilitate a discussion by asking open-ended questions about the case study, including what information Madame Diallo acquired, and what she should have recorded. Make sure to write down key points from the discussion on flipchart paper.

Case Study Discussion Questions

- What information did Madame Diallo have prior to visiting the family compound?
- List the additional information she received during her visit that you found helpful?
- Based on the information Madame Diallo recorded in her CHV Notebook, what information should she communicate to the local-level supervisor?
- What did you learn from this case study that can help you conduct better CBS in your community?

If materials are not available, ask another facilitator to write key points from the discussion in a notebook or on paper which will be used to summarize the case study exercise and session. If you are alone, ask a participant team lead to assist you in recording key points from the discussion questions.

Step 3: Summarize and go over key messages

End the discussion by asking participants to share one takeaway message they got from this case study with the rest of the group. After receiving 3-5 answers, summarize the session by reading the takeaway message below then thank everyone for their participation.



Morning Break (15 Minutes)

Inform participants that this is an opportunity to get a drink, go to the bathroom, or chat with their fellow participants and facilitator.

SESSION 5

FLOW OF INFORMATION: WHAT HAPPENS WHEN YOU REPORT?

This session focuses on the importance of the reporting structure that allows information to flow from the community and local level to other health administrative levels.



Learning Objectives

By the end of this session, participants will be able to:

- Identify the reporting structure for signals,
- Explain how signals are reported at the community level,
- Describe what information is reported after detection of a signal, and
- Demonstrate how to report signals using various signal reporting mechanisms.

Materials

Facilitator

- Flipchart B: Reporting Structure for Signals
- Marker

Participants

Participant Guide pages 21-23



ACTIVITY 5.1 REPORTING STRUCTURE FOR SIGNALS



Step 1: Recap previous session & go over Session 5 learning objectives

On returning from the break, ask participants to quickly review what they learned in the session prior to the break. Next read out the purpose of Session 5 and the learning objectives.

Step 2: Introduce next steps in reporting using the case study scenario

Move on to a question and answer session of no more than 10 minutes long to tease out the structure for reporting. You can begin using the following script:

Let's return to our case study. Now that Madame Diallo (CHV) has recorded information regarding the detected signal she has investigated, she is ready to report her findings. What should she do?

Ask participants the following questions and capture the answers in Flipchart B with four equally divided spaces:

- Who should Madame Diallo report to? Why?
- When should she report this signal? Why?
- How can she report this signal?
- What information should she include in her report? Why?

If materials are not available, ask participants to refer to the questions in their Participant Guides (page 21) and follow the discussion. Encourage participants to take notes directly in the Participant Guide.

Step 3: Give lecture on reporting structure for signals

After completing the flipchart (only if flipchart was used), place it in the room where it is visible to everyone. Then give a brief lecture (below) about the flow of information, and how it should be applied at the community and local levels when conducting CBS.

What is the reporting structure for signals? What happens when you report?

When information, or signals, are detected at the community-level they should be reported according to the information flow structure of the country in which they have been detected. The figure (found in your Participant Guide on page 22) shows how information flows up through the different levels, and how feedback flows down to you, the reporters of surveillance information.



The figure above is an example from the Africa CDC EBS Framework and should be replaced with the reporting structure designated by the country where EBS will be implemented.

As we can see:

- Signals detected in communities by CHV, key informants, or other community residents are to be reported immediately to the local level (local-level supervisor).
- Local-level supervisors report events up to the intermediate level.
- Intermediate-level health authorities report to higher administrative levels.

All events must be reported and investigated according to the existing national surveillance and reporting structure.

What should CHVs do after reporting?

They should collaborate with public health authorities as required to collect more information. CHVs may be asked to implement basic prevention measures such as health education, handwashing programs as needed.

Why is feedback important?

Just as timely signal reporting at each level is important, so is timely and routine feedback. Intermediate-level authorities should provide feedback about events and signals to supervisors at the local-level. Feedback on reported signals should be given to CHVs and key informants at the community level by local-level supervisors. The community needs to know how the information they shared was used so trust and mutual collaboration can be preserved.

• ACTIVITY 5.2

THE WHO, WHEN, WHAT, AND HOW OF SIGNAL REPORTING



Step 1: Elicit the who, when, what and how of signal reporting using Q&A

Start this activity with a quick question and answer session on the who, when, what, and how of signal reporting. Ask participants the following questions:

- Q1: If you are a key informant or community member, who do you report signals to?
- A1: Key informants and community members should report signals to a CHV.
- Q2: Who does a CHV with information about a detected signal report to?
- **A2:** CHVs should report signals they have received or detected themselves to the local-level supervisors immediately after the detection of the signal.
- Q3: When should CHVs report signals?
- A3: Signals must be reported immediately.

Q4: What information should be reported to local-level supervisors?

A4: CHVs should report signals they hear or see (detect), including basic information on when the signal was detected, where it took place, and who is affected, to their local-level supervisor. CHVs may also be asked to provide further information to their supervisors as needed.

Q5: How do you report a signal?

A5: Community members, key informants, and CHVs can report signals using telephone, text message (SMS), or in person.

ACTIVITY 5.3

HOW ARE SIGNALS REPORTED?



Note: Review the Effective Case Study Facilitation Tips at the beginning of this session prior to facilitating this case study.

Step 1: Set up the role-play

Introduce the exercise by explaining to the group that they are going to look at how signals are reported by continuing the Madame Diallo and Pierre role-play from Session 4. Remind them that Madame Diallo is the CHV in the role-play and explain she is now reporting to her local-level supervisor, Mr. Fofana. Ask them to work in their groups to prepare the scene where Madame Diallo calls Mr. Fofana to make a report.

Ask for two volunteers to enact the scene to the class. Remind them that they are to demonstrate how a CHV reports a detected signal to his/her local-level supervisor after recording the information in their CHV Notebook. Let volunteers know they have 5 minutes to enact this role-play.

Role-play Scenario 2: How are signals reported?

Madame Diallo, the CHV in Community X, received a call this morning from Pierre, a key informant, regarding a signal he had detected that morning. Immediately after the call she traveled to see him at his home and together they visited a family compound where two children around the age of five were ill and for the past week had been experiencing high fevers, and the inability to walk or eat.

During Madam Diallo's visit to the compound to investigate the signal she made a few observations, asked questions of the children's mothers, and recorded this in her CHV Notebook. She believes this is a signal that should be taken seriously and reported immediately. She calls Mr. Fofana, her local-level supervisor to make a report; unfortunately, the weak telephone signal in the area is making it difficult to hear.

Step 2: Start the role-play

When the volunteers are ready to start the role-play, ask the group to give them their full attention then start the role-play by calling out 'Action!'

Step 3: Seek feedback on the role-play using Q&A

Once the volunteers have completed the role-play encourage the observers to clap for them. Then facilitate the feedback discussion by asking open-ended questions of the two volunteers (Madame Diallo and Mr. Fofana) and other participants (observers). Make sure to write down key points from the discussion on flipchart paper.

If materials are not available, ask another facilitator to write key points from the discussion in a notebook or on paper which will be used to summarize the role-play exercise and data reporting session. If you are alone, ask a participant team lead to assist you in recording key points from the discussion questions.

Madame Diallo's character:

- How did you feel about your character's actions in this role-play?
- What information did you think was important to give Mr. Fofana about this signal you had investigated and are now reporting?
- Could a scenario like this happen to a CHV?

Mr. Fofana's character:

- How did you feel about your character's actions in this role-play?
- What information did you receive? Was there any extra information you would have liked to get from Madame Diallo but didn't?
- Could a scenario like this happen in your community?
- What next steps are you going to take following this report?

Training participants (observers):

- Tell us how you felt about the actions of the characters in this role-play.
- How would you describe Madame Diallo's reporting and what important information was she able to provide Mr. Fofana?
- Was Mr. Fofana able to acquire all the information he needs to understand whether this is an event?
- What additional information does he need from Madame Diallo? How can she better provide him with this information?

Step 4: Summarize key points from the role-play and wrap up the session

Summarize and close the role-play session thanking everyone for their participation as well as reading the key points written on the flipchart paper (or facilitator's/ team lead's notes) that came out of the feedback discussion.

Wrap up this session by asking participants to briefly share what they learned or was reinforced during this session. After 3-5 participants have contributed, say:

Now that Madame Diallo, the CHV, has reported the signal to the local-level supervisor Mr. Fofana, the triage, and if necessary, verification process will need to start. How the local-level supervisor will complete this will be discussed in the second half of this training.

Close the session by reading out loud the key takeaway message below.



SESSION 6

KEY INFORMANT ENGAGEMENT: HOW TO ENGAGE YOUR COMMUNITIES?

This session focuses on the role of key informants as well as strategies to engage communities in CBS.



Learning Objectives

By the end of this session, participants will be able to:

- Explain why key informants are important to the success of CBS,
- Describe characteristics of key informants,
- Define the roles and responsibilities of CBS key informants, and
- List strategies to ensure communities and their key informants are engaged in CBS.

Materials

Facilitator

- Flipchart C: Key Informant Engagement (one per group)
- Markers

Participants

Participant Guide pages 24-25



ACTIVITY 6.1

CHARACTERISTICS OF KEY INFORMANTS



Step 1: Elicit characteristics of key informants through Q&A

Start this session with a quick question and answer discussion. Ask participants to first define who a key informant is in a community and then brainstorm types of community members that could be key informants in their communities. As participants are sharing their answers, capture them on flipchart paper.

If materials are not available, ask another facilitator to write the answers to the Q&A and brainstorming exercise. If you are alone, ask a participant team lead to assist you in recording answers.

Q1: Who is a key informant in your community?

- A community member who detects signals
- An individual who volunteers to work with CHVs to protect the health of the community

Q2: If we are looking for key informants, what characteristics might these community members have?

- Individuals who have strong ties and relationships to other community members
- Individuals who have credibility in the community and a positive influence on other community members
- Individuals who have access to community information

Q3: Who are key informants in your communities?

- School teachers
- Traditional healers
- Hairdressers and barbers
- Religious leaders
- Pharmacists
- Leaders of social groups (women's unions, clubs, labor groups, farmer's unions, etc.)
- Animal health workers, farmers

Once participants have identified these characteristics of key informants, ask them to rejoin their small groups for a small group exercise.

ACTIVITY 6.2

KEY INFORMANT ENGAGEMENT



Step 1: Set up the small the group discussions

Introduce the small group exercise by explaining to participants that they are going to work in their groups to discuss how CHVs can identify and engage community members (key informants). Remind them that informants will be responsible for looking for (detecting) signals of events in the community. Explain that at the end of the discussion one member of each group will be asked to present what their group discussed.

Ask participants to get into their groups and give each group a copy of Flipchart C and a marker. Ask the team leads to take notes during the discussion and ask another group member to be the time keeper and presenter for their group. Explain that this is a small group exercise and therefore active participation from every group member is very important.

If materials are not available, facilitators will ask each group to refer to the questions in their Participant Guide (page 24) and complete the exercise by discussing and answering the four questions as a team. The team lead will take notes and present some of the answers discussed in their group during the participant presentation/ feedback.

Step 2: Get students to discuss and record answers to the questions

Give the groups 10 minutes to work on answering the questions in Flipchart C. Monitor and field questions as necessary.

Step 3: Facilitate group presentations and feedback

Once 10 minutes has passed, ask the groups to direct their attention to the larger group for the group presentations. Ask if there is a group that wants to present first. If no group volunteers, randomly select a group to present. Inform the groups that they will have 2 minutes to present. Remind participants to stick to the time limit and show respect towards each reporter by not engaging in side conversations.

Summarize common points from the group presentations making sure to include every group's input. Ask participants if they have any questions or additional comments to add before moving on.

Step 4: Deliver lecture on engaging key informants in the communities

Start the lecture by referring to the fourth question on the flipchart or handout in the Participant Guide (page 24), "How can you increase key informant engagement in your community?" or strategies for maintaining a network of key informants.

How can your communities be engaged in CBS?

As previously discussed, CBS involves the entire community. Although all community members are encouraged to 'look out' for signs that may pose a health threat, asking everyone to detect signs and report them will likely cause false or duplicate signals to be reported. It is important to identify and sensitize community members who can take on the role of a key informant. Key informants are members of the community who are able to hear about possible events. They play an important part in CBS by working closely with CHVs to detect signals in their communities. Posters and pamphlets that show the signals in text and pictures, can help both CHVs and key informants to detect signals which may turn out to be events.

Once key informants have been identified, each will need to understand:

- What the signals are,
- Why it is important to inform CHVs of signals they see or hear about, and
- When they should inform CHVs of signals they see or hear about.

Step 5: Check participants have the key messages through Q&A

Check that participants have understood the key messages from the group discussions and lecture by asking the following questions.

Q1: Why is it important to work closely with key informants?

- They have close relationships with community members and are aware of what is happening.
- They have been sensitized to the signals and understand the importance of CBS at the community level.

Q2: How can you increase key informants' engagement?

- Follow-up with them if they report something.
- Keep in regular communication with them.
- Inform them of the signals on an ongoing basis.
- Involve them in community health activities and highlight their work.
- Thank them for their service to the community.

Step 6: Summarize and wrap up the session

Summarize the session by reading the key takeaway message below.



It is also essential that key informants can easily communicate with CHVs and are consistently reminded by CHVs of the importance of signal detection. Furthermore, to successfully ensure key informants are dedicated to their role they should be thanked for their service to the community.

SESSION 7

COMMUNITY HEALTH VOLUNTEER TRAINING REVIEW, KNOWLEDGE CHECK, AND CLOSE

This session will give CHVs the opportunity to review what they have learned during the training, evaluate the knowledge and skills acquired, and provide feedback to facilitators regarding their satisfaction with the training.



Purpose

- Summarize lessons learned from the training,
- Assess and evaluate participants' knowledge and skills post training, and
- Provide training feedback and evaluation.



Materials

Facilitator

- Facilitator Guide: CHV Training Agenda (page 13-14)
- Flipchart paper
- Markers
- Appendix A: Training Knowledge Check Part 1 (copied for CHVs + local-level supervisors)
- Appendix C: Training Knowledge Check Part 1 & 2 Answers



ACTIVITY 7.1

REVIEW AND KNOWLEDGE CHECK



Step 1: Review the agenda and what has been learned

Ask participants to refer to their agendas and review the topics of the training. For every session, ask participants to share key takeaway points (information) discussed and learned. Write their answers on the flipchart paper (if available) and encourage participants to take notes in their journals.

If materials are not available, ask another facilitator to write participants' key takeaway points in a notebook or on paper which will be used to summarize the session. If you are alone, ask a participant team lead to assist you in recording key takeaway points.

Step 2: Facilitate the post-training knowledge check

Distribute Appendix A: Training Knowledge Check Part 1 (the second copy) and read the instructions out loud as follows:

We are going to revisit the questionnaire you completed at the beginning of the training. You will have 15 minutes to individually take the post-training knowledge check. You are encouraged to ask us if you have any questions or need clarification on questions asked on the questionnaire. Please respect everyone's time by not engaging in side conversations once you have completed your own test.

Offer participants the option of taking the post-test with the assistance of a facilitator who will read the questions in a small group setting away from the larger group. This will allow participants, who may be illiterate or have difficulty reading, to feel more comfortable completing the test.

Step 3: Collect questionnaires and review answers

After all participants have completed the questionnaires, collect them and review the answers with everyone using Appendix C: Training Knowledge Check Part 1 & 2 Answers. Participants can fill in the correct answers in their Participant Guides Appendix A. Allow 5 minutes for this activity in case there are questions.

• ACTIVITY 7.2

TRAINING CLOSE AND PARTICIPANT FEEDBACK



Step 1: Ask participants for feedback on the training

Give participants the opportunity to provide feedback on the training using the available evaluation tool.

Step 2: Thank participants and close

Thank participants for attending the training and actively participating by saying the following:

On behalf of the CBS Training Facilitators team, I would like to thank you for attending this training and actively participating. We have learned a lot about how to conduct CBS in our communities, and we have all learned from the experiences and knowledge you brought to the training. As your colleagues and facilitators, we are encouraged by your commitment to working and supporting your communities. We hope the expectations you expressed in the introductions exercise this morning were met. We strongly encourage you to share what we have discussed and learned today with other CHVs who were not able to attend, as well as your key informants. For those of you who are staying for the second half of the training, we look forward to your participation. Once again, thank you very much.

LOCAL-LEVEL SUPERVISORS TRAINING (1/2 DAY)

AGENDA FOR LOCAL-LEVEL SUPERVISOR TRAINING

SESSION	ACTIVITIES	ТІМЕ
Energizer Activity	Lie detector game	10 minutes
 8. Triage Pre-training knowledge check Why is triage important for CBS? What is triage? How do you triage reported signals? 	Questionnaire Q&A discussion Lecture Practical exercise	40 minutes
 9. Verification What is verification? Why is verification important in CBS? How do you verify triaged signals? 	Group discussion Lecture Signal game	40 minutes
 10. Data Recording How do you record information (data) that has been reported to you? What information do you record? 	Small group discussions & presentations	30 minutes
 11. Data Reporting Who do you report to? What information do you report? When do you report? How do you report information (data)? 	Q&A discussion Small group discussions Role-play	30 minutes

Afternoon Break (15 minutes)

Opportunity to interact with colleagues and mentors

SESSION	ACTIVITIES	ТІМЕ
 12. Supportive Supervision What is supportive supervision? Why is supportive supervision important? How do you provide supportive supervision to CHVs? 	Q&A discussion Lecture	20 minutes
 13. Continuous Community Engagement Why is continuous community engagement important to CBS? How do you ensure community members (key informants and CHVs) are engaged in CBS? 	Lecture Small group discussions & presentations	30 minutes
14. Local-Level Supervisor Training Review, Post-training Knowledge Check, and Close	Written or verbal post-training questionnaire Group discussion	25 minutes

Local-Level Supervisor Training

Total 3.75 hours

ENERGIZER ACTIVITY

Energizers are brief activities conducted in trainings that are intended to help increase energy in a group by engaging them in physical activity or requiring them to problem solve. These activities are meant to be fun, interactive, and bring energy to a training group encouraging participants to look forward to the rest of the training. Like icebreakers, facilitators should use effective facilitation and communication skills outlined in the introductory ice breaker session.



Step 1: Introduce the game and demonstrate how it's played

Introduce the energizer and provide clear instructions on how the game is played. Ask two volunteers to join you in the front of the class for the game.

Demonstrate the activity by making three statements out loud. Two statements should be true, and one should be false.

Example

I have been training for 10 years. I skydive (jump out of a plane) every year on the 27th of September. I have never cooked a meal.

The participants ask 'lie detector' questions to get further information, so they can determine which statement is false.

Example

Training: Where have you conducted training? What have you taught? What year did you start?

Skydiving: What height have you jumped from? How many times have you jumped? What is the significance of September 27th?

Cooking: What do you normally eat for breakfast? Is there someone in your household who cooks?

Participants will then vote on which statement is a lie.

Step 2: Get the volunteers to take their turns

Run the game with the two volunteers presenting their statements by turn and the participants asking the 'lie detector' questions.

Step 3: Make connections with training to come

Prior to moving to the next session, you should ask:

Why do you think we chose this energizer to start the local-level supervisor training?

Wait for participants to give 2-3 answers. If no one makes the connection with the triage and verification processes, then encourage participants to look for the connection during the triage session of the training.

SESSION 8

TRIAGE: WHY IT IS IMPORTANT, WHAT IT IS, AND HOW TO DO IT

This session starts with the pre-training knowledge check for local-level supervisors and then moves on to defining and discussing the triage process that local-level supervisors must conduct immediately after receiving a reported signal from a CHV.



Learning Objectives

By the end of this session, participants will be able to:

- Assess participants' knowledge & skills pre-training,
- Define triage,
- List the two questions that must be asked during the process,
- Explain how triaging of reported signals occurs,
- Identify which signals are pertinent to CBS and are not duplicates, and
- Demonstrate how signal triage is done by a local-level supervisor.

di Materials

Facilitator

- Appendix B: Training Knowledge Check Part 2
- Flipchart paper
- Markers

Participants

Participant Guide page 29-30



ACTIVITY 8.1

PRE-TRAINING KNOWLEDGE CHECK



Step 1: Prepare participants for the knowledge check

Introduce the knowledge check by reading the script below:

Prior to starting our first activity, we are going to complete a short survey on what you already know about triage, verification, and data reporting. It doesn't matter if you don't know certain terms. Hopefully by the end of the training you will. We'll do a second check at the end of the training.

Distribute Appendix B: Training Knowledge Check Part 2 to each of the participants and read the instructions out loud as follows:

You will have 10 minutes to complete the knowledge check. You are encouraged to ask us if you have any questions or need clarification on questions asked. Remind participants to respect everyone's time by not engaging in side conversations once they have completed their own test.

Step 2: Facilitate participants completing the knowledge check

Give participants 10 minutes to complete the questionnaire. On completion, collect the questionnaires and let the participants know that you will check in again at the end of the training and go over the answers.
ACTIVITY 8.2 SIGNAL TRIAGE PROCESS



Step 1: Prepare participants for the knowledge check

Start this session by reviewing the learning objectives and then assessing participants' previous knowledge and experience of the triage process by asking three questions. Answers should be written on flipchart paper.

If materials are not available, ask another facilitator to write answers from the Q&A exercise. If you are alone, ask a participant team lead to assist you in recording the answers.

Q1: What is triage and why is it part of CBS at the community and local level?

- Process of screening out information (data) that is not relevant for public health
- Helps to eliminate duplicate signals and corrects obvious mistakes that might have occurred
- Decreases background noise

Q2: Who is responsible for triaging reported signals?

Local-level supervisors

Q3: What two questions should be asked during the triage process?

- Does this information represent a potential acute public health risk to humans, animals, and the environment?
- ▶ Is the signal already known to public health staff? Are there supporting reports?

Step 2: Deliver the lecture on triage

After the Q&A discussion, start the lecture part of this session. Students can follow along in their Participant Guides (page 29) and make notes in their journal.

What is triage?

Triage is the process of screening what is reported for information that is relevant for early warning (i.e., signals that if verified could be events).

Why is it important?

The triaging process determines if a signal is relevant to public health. Triaging helps with:

- Selecting signals that may pose a risk to the public's health, and
- Filtering to get rid of duplicates.

'Relevant for public health' means a signal that:

- Could have a large public health impact in the country,
- Is outbreak prone and poses a major public health threat,
- Has previously been prevalent and might re-emerge, and
- Is slated for eradication or elimination.

How do we do it?

Triage can take place in person, by text message or over the telephone. When completing the signal triage process, it is important that local level supervisors ask two important questions.



Is the reported information relevant to early warning (i.e., could this signal be a genuine public health event)?



Was this signal previosly reported (i.e., is this signal a duplicate)?

After triage

If the report is not relevant or is a duplicate, then it can be discarded. If the information is to be discarded, the local-level supervisor will need to communicate this to the CHV who reported the signal.

Local-level supervisors should encourage CHVs to continue reporting other possible signals. They should remind CHVs that it is okay that they have reported a signal that did not turn out to be an event and should encourage them to continue reporting signals immediately when *they are detected*.

If the report is relevant and is not a duplicate, then the local-level supervisor who received the reported signal starts the verification process.

Step 3: Ask for questions

Ask if anyone has any questions, needs clarification, or wants to share their experience of the triage process.







Practical scenario exercise and discussion



15 minutes total (5 minutes for each scenario)

Step 1: Set up the practical exercise

Introduce the practical exercise and explain how the exercise is to be completed as follows:

- > You will be presented with a series of short scenarios in which signals have been reported by CHVs.
- > You will need to identify what questions you should ask for triage.
- I will then present you with the findings from triage and ask you if the signal should be verified or not.
- We will then go over the correct answer for each signal.

Signal #1

Scenario: A CHV has heard of a signal of foodborne illness from a family that has attended a wedding. The CHV has reported the signal to the local-level supervisor.

What questions should be asked for triage?

Answer: Is this situation relevant to public health staff? Has this situation previously been reported (is it a duplicate?)

Information collected from triage:

The foodborne illness was reported as a signal by another CHV 24 hours ago. Two members of this family needed to be hospitalized.

Correct answer: This signal is a duplicate, so it does not need to be verified separately.

Signal #2

Scenario: A woman has reported to a CHV that her 5-year-old son has developed a fever and rash in the last three days. She is worried because her son started coughing last night. The CHV reported this signal to the local supervisor.

What questions should be asked for triage?

Answer: Is this situation relevant to public health?

Has this situation been previously reported to public health staff (is it a duplicate?)

- Information collected from triage: The child currently has fever and rash. Her mother is reporting the situation for the first time.
- Correct answer: This signal is relevant to early warning because it could be a case of measles. It has been reported for the first time (not a duplicate). This signal should be verified.

Signal #3

►

Scenario: Farmers reported to a CHV that many sheep have died from bleeding and diarrhea during the past week. The CHV reported the signal to the local supervisor.

- What questions should be asked for triage? Answer: Is this situation relevant to early warning? Has this situation been previously reported to public health staff (including animal health) (is it a duplicate?)
 - Information collected from triage: More than 60 sheep died last weekend. Farmers are surprised because this has never happened in the past. The CHV reported a signal related to poultry deaths two weeks ago.
- Correct answer: This signal should be verified because it could be an animal-related event, and it has not been reported previously

Step 2: Summarize the activity and wrap up with key message

Congratulate participants for their participation. Ask if anyone has any questions, needs clarification, or wants to comment on the exercise. Summarize the session by reading the key takeaway message below, and then inform participants that in the next session they will discuss another very important process; signal verification.



Local-level supervisors are responsible for triaging reported signals. Triaging helps answer two important questions:

- Is the reported information relevant to early warning (i.e., could this signal be a genuine public health event)?
- Was the signal previously reported (i.e., is the signal a duplicate)

SESSION 9

VERIFICATION: WHY IT IS IMPORTANT, WHAT IT IS, AND HOW TO DO IT

This session will define and discuss the verification process local-level supervisors must conduct after receiving a reported signal from a CHV.



Learning Objectives

By the end of this session, participants will be able to:

- Define verification,
- Explain why it is an important step to confirming a reported signal as an event, and
- Demonstrate how verification of reported signals occurs.



Materials

Facilitator

- Flipchart paper
- Markers
- Appendix E: Verification Tool
- Appendix F: Signal Game (cut up and placed into the two containers)
- Appendix G: Signal Game Answers
- Bowl/container x 2

Participants

Participant Guide page 31-36



ACTIVITY 9.1

SIGNAL VERIFICATION PROCESS



Step 1: Elicit what participants know about verification already

Start this session by first reviewing the learning objectives and then assessing participants' previous knowledge and experience of the verification process by asking three questions. Answers should be written on flipchart paper.

If materials are not available, ask another facilitator to write answers from the Q&A exercise. If you are alone, ask a participant team lead to assist you in recording the answers.

Q1: What is signal verification and why is it part of CBS at the community and local level?

- Signal verification is the determination of a signal as true (not a rumor) and reliable.
- It is important because reported signals cannot always be trusted or considered reliable.

Q2: Who is responsible for verifying reported signals?

Local-level supervisors

Q3: What does the verification process help to determine?

- If the reported signal should be **discarded**
- If the reported signal should be confirmed as an event

Step 2: Deliver the lecture on verification

After the Q&A, deliver the lecture part of this session. Participants can follow along in the Participant Guide and make notes in their journals.

What is signal verification?

Signal verification is completed by local-level supervisors within 24 hours of signal detection, and can take place in person or over the telephone. All signals must be verified within 24 hours of detection. Potential sources of CBS information cannot always be trusted or considered as reliable. The standard for signal verification includes:

- Asking questions of the CHV to ensure they have correctly understood the signal,
- Getting confirmation of the signal from at least two different sources, or
- Determining if the signal is reported by a person or place of medical authority (doctor or clinic).

Reliable or credible sources of information can include official reports, CHV, key informants, healthcare workers, surveillance focal points, etc.

Why is signal verification important?

The verification process for community reported signals is completed by the local-level supervisors. The process helps local-level supervisors determine if the reported signal represents a threat to humans, animals, and/or the environment and requires an immediate response.

How is the signal verification process completed?

Signal verification is completed by local-level supervisors and can take place in person or over the telephone. To conduct verification, the local-level supervisor will ask questions of the CHV who has reported the signal, and possibly other people as well. This can include the patient, the family and friends of the patient, and/or other people within the community. Local-level supervisors are recommended to use the Verification Tool to complete this process. This verification process involves actively cross-checking the validity of available information and collecting additional information about the report using reliable sources as needed. The process of signal verification should answer three main questions:

- ▶ Is the report accurate (i.e., is it true)?
- Has the information been reported by a reliable source or sources?
- Does the report meet the criteria for one or more signals?



- Report is a hoax or a false rumour
- Information has been reported by an unreliable source (e.g., by word of mouth)
- Report does not meet predefined signals



Confirm as an event if...

- Information is accurate and true
- Report meets one or more predefined signals
- Information has been reported by a credible source or sources (e.g., CHV, health facility focal point, or key informants)

After verification:

- If the signal is verified to be an event by local public health authorities, it should be recorded and reported immediately to the intermediate public health authorities. Feedback should be provided to the reporter about the result of the verification process.
- If the signal is not considered to be an event, feedback should be provided to the reporte rabout the result of the verification process.

What happens after signal verification?

Once a signal is verified as an event, risk assessment begins. Risk assessment is a process by which the available information about a real event is analyzed and a judgment is made as to whether it poses an immediate risk to public health. To determine the overall risk and appropriate response in a timely manner, risk assessment of events must be conducted within 48 hours of initial detection as a signal.

Step 3: Ask for questions

Ask participants if they have any questions regarding the lecture. Clarify and answer any questions before moving to the next activity.



APPLYING THE SIGNAL VERIFICATION PROCESS



Step 1: Set up the game

Start by explaining that the purpose of the game is to give local-level supervisors the opportunity to demonstrate how to verify reported signals once they have been received from CHVs and triaged.

Divide participants into two equal groups and ask them to choose a representative to draw the signals from the container for the group. Give instructions for the game as follows:

- Each group representative will come to the front of the room and draw a signal from the container. At that moment the timer will start.
- Each representative will quickly return to their group and discuss how and if the signal should be discarded or confirmed as an event given the information provided.
- After a quick discussion with their group, they have to quickly place the signal either in the discarded list or confirmed list on the flipchart posted at the front of the room.
- Once each representative has posted the reported signal on the flip chart, he/she will draw another from the bowl. The routine will continue until the bowl is empty and all the reported signals are either on the discarded or confirmed side of the flip chart.
- After 10 minutes, the race will stop. The team that has correctly placed the signals wins the game.

Go through an example of a signal and ensure the verification process is correctly understood.

Step 2: Run the game

When the group representatives are in place, start the game by saying, 'Draw your signals!'. Start the timer. Encourage teams to cheer their group representatives on creating a competition atmosphere.

When the 10 minutes is up, go through each of the signals and ask participants which ones have been correctly discarded or confirmed. Tally up the points for each teams' correct responses. Whichever team has the most points should be declared the winner.

Step 3: Summarize and wrap up the session

Summarize the activity and encourage participants to share what they have learned. Congratulate both groups for their participation. Ask if anyone has any questions, needs clarification, or wants to comment on the game. Summarize the session by reading the key takeaway message below.



The signal verification process is an essential step in CBS, and must be conducted within 24 hours of signal detection. Verification helps determine if a reported signal represents a threat to humans, animals, and/or the environment and requires an immediate response. Local-level supervisors must complete and record this process before reporting the signal to higher level authorities.



DATA RECORDING

This session focuses on the importance of recording signal information (data) in order to effectively report signals to intermediate-level public health authorities.



Learning Objectives

By the end of this session, participants will be able to:

- Explain the importance of recording information (data) for reporting,
- Demonstrate how local-level supervisors can effectively record information using the Signal Register for CBS, and
- ▶ Use information (data) from previous lessons and activities to complete the Signal Register.

di Materials

Facilitator

Appendix H: Example of Signal Register for CBS The form that is to be used in the country should replace the example form here.

Participants

Participant Guide page 37-40



• **ACTIVITY** 10.1

LOCAL-LEVEL SUPERVISOR DATA RECORDING



Step 1: Set up the exercise for individual completion

Introduce the small group exercise by explaining to participants that they are going to complete an entry in Signal Register for CBS. Ask participants to use role-plays #1 and #2, and case study descriptions from the morning CHV training to complete one entry in the Signal Register for CBS. The first half of this exercise is to be completed alone (10 minutes).

Step 2: Set up the exercise for group discussion

Once participants have completed the individual exercise, get them to get into the groups they were in for the verification game. Inform both groups that they are to share and discuss the information they recorded individually in their signal register and assist those in the team that need help completing it correctly. Give the groups 10 minutes to complete the discussion.

Step 3: Get a volunteer to present their signal register

After 10 minutes of group work, ask for a volunteer to come to the front of the room and review the signal register with everyone. Only intervene if there are questions or disagreements on how the signal register has been completed.

After the presentation, thank the volunteer by having everyone clap for him or her. Ask if there are any questions or points of clarification needed.

Step 4: Summarize and wrap up the session

Summarize the activity by restating the purpose and importance of data recording. Prior to moving to the next session, share the key takeaway message below with participants.



Local-level supervisors are responsible for triaging, verifying, and if verified as true, reporting events to the intermediate level; therefore, it is essential that their Signal Registers are completed correctly.



This session focuses on why, when a signal has been verified as an event, it is important to report the information (data) to the intermediate-level public health authorities. It also discusses the Who, When, What, and How of verified event reporting at the community and local level by local-level supervisors.



Learning Objectives

By the end of this session, participants will be able to:

- Explain how local-level supervisors report confirmed signals to the intermediate-level public health authorities,
- Describe what information is reported after verification of a signal as an event, and
- Demonstrate how events are reported to higher level authorities.

Materials

Facilitator

- Flipchart paper
- Markers

Participants

Participant Guide page 41



• **ACTIVITY** 11.1

THE WHO, WHEN, WHAT, AND HOW OF EVENT REPORTING



Step 1: Elicit the who, when, what, and how of event reporting through Q&A

Regroup for a quick Q&A discussion to answer the 'who, when, what, and how' of event reporting. Ask participants the following questions.

Question 1:	If you are a local-level supervisor who has triaged and verified a detected signal as an event, who do you report to?
Answer 1:	Local-level supervisors should report to intermediate-level public health authorities.
Question 2:	When should local-level supervisors report an event?
Answer 2:	Local-level supervisors should report an event immediately after they have verified it.
Question 3:	What information should be reported?
Answer 3:	Local-level supervisors should report that an event has been detected, triaged and verified in a specific community. Details about the event (when it occurred, who and how many have been affected, where it has taken place) as well as who reported it should be provided to intermediate-level authorities.
Question 4:	How do you report an event?
Answer 4:	Local-level supervisors can report an event using the designated or most convenient method (e.g., telephone, text message [SMS], or in person), as long as it is done immediately.

• **ACTIVITY 11.2**

LOCAL-LEVEL SUPERVISOR DATA REPORTING



The following are some methods of reporting:



Text (SMS)





In Person

Step 1: Set up the role-play

Ask participants to imagine they are Mr. Fofana, the local-level supervisor from the morning's role-play. They have just verified Madame Diallo's reported signal from Community X as a verified health event that needs an immediate response from intermediate-level public health authorities.

Divide them into three small groups. Each group will be provided with flipchart paper and a marker (if available).

If materials are not available, inform the small group team leads that they will be responsible for writing the script in their journals or on paper that will be developed by their small group.

Ask each group to develop a script that they would use to report the event to the intermediate-level public health authority, Madame Dubois. Let them know they have 10 minutes to develop the script and write it.

Ask them to choose one or two persons who will act out the script in role-play fashion in front of the larger group using any method of reporting. Ask them to address the following questions:

- What information should the local level provide?
- Should the local level provide information about discarded signals?
- What could the response be from the intermediate level? (e.g., rapid response vs. monitoring vs. local action)

Step 2: Facilitate the role-plays

Once they have completed their scripts, randomly select a group to go first. Have them act out their scene (no more than 1 to 2-minutes). Briefly feedback on how well they addressed the questions then move on to the next group.

Step 3: Debrief and wrap up the session

After the role-plays, thank the groups by having everyone clap for each other. Debrief the role-play exercise and ask if there are any questions or points of clarification needed for this session. Summarize the activity by restating the purpose and importance of data reporting and share the key takeaway message below with participants.



Local-level supervisors should report to intermediate-level public health authorities. Reporting should be done immediately after the signal has been triaged and verified using the available and most convenient method of reporting (e.g., telephone, text message [SMS], in person, etc.).

SESSION 12 SUPPORTIVE SUPERVISION

This session focuses on the importance of supportive supervision on behalf of local-level supervisors towards CHVs. It will discuss the benefits of supportive supervision and how best to provide it to CHVs during CBS implementation.



Learning Objectives

By the end of this session, participants will be able to:

- Define supportive supervision,
- Describe what it looks like in the CBS context at the community level, and
- List at least three ways to effectively provide supportive supervision to CHVs.

Materials

Facilitator

- Flipchart paper
- Markers

Participants

Participant Guide page 42-43

Supervision monitoring visits should be conducted based on routine surveillance (information will need to be adapted by country).



ACTIVITY 12.1 SUPPORTIVE SUPERVISION



Step 1: Elicit the characteristics of effective supervision through Q&A

Start this session by reviewing the learning objectives and then inquiring about participants' experience supervising public health professionals, specifically CHVs. Answers should be written on flipchart paper.

If materials are not available, ask another facilitator to write answers from the Q&A discussion. If you are alone, ask a participant team lead to assist you in recording the answers.

Allow participants enough time to answer these questions without interrupting them. Remember to apply the Facilitators Effective Facilitation and Communication tips during this session. These questions and this session may lead to animated discussion and complaints.

Q&A Discussion

- Q1: What are the characteristics of an effective supervisor?
- Q2: How many of you in your role as local-level supervisors supervise a team of CHVs?
- Q3: What has been your experience supervising CHVs?
- Q4: What is supportive supervision?
- **Q5:** If you had to name one reason why supportive supervision is important in CBS implementation, what would it be?
- Q6: Are there any challenges to effectively providing CHVs support and supervision?

Step 2: Deliver lecture on supportive supervision

After the Q&A discussion start the lecture part of this session.

What is supportive supervision, why is it important, and how do we do it?

What is supportive supervision?

Supportive supervision promotes mentorship, joint problem-solving and communication between supervisors and supervisees—CHVs. Supportive supervision requires a supervisor who has effective leadership characteristics, respects and values the CHVs, allowing them to feel heard, valued, and cared about.

Why is supportive supervision important?

Supportive supervision is a great approach to improving routine collection of information (data) for signal detection, recording, and reporting for CBS, especially at the community-level. When conducted successfully by local-level supervisors, it can increase CHVs capacity to detect, record, and report signals.

Supportive supervision can improve both local-level supervisor and CHVs leadership and is necessary in order to ensure that they are correctly fulfilling their responsibilities. Supportive supervision leads to positive outcomes, such as:

- Improved support
- Increased commitment
- Reduced turnover

How is supportive supervision conducted?

This section should be adapted to the country context based on existing national guidance for supervision of disease surveillance activities.

Local-level supervisors are required to conduct regular supervisory visits to CHVs as scheduled by national surveillance guidance (e.g., IDSR). Supervision should incorporate refresher training for CHVs on what to report, and the importance of reporting signals. Supportive supervisory visits between local-level supervisors and CHVs should be frequent and continuous. These visits are also an opportunity for local-level supervisors to provide feedback regarding reported signals.

During these visits, local-level supervisors should:

- 1. Engage and involve CHVs in CBS activity planning and decision-making by:
 - Asking for the opinions and ideas of CHVs and actually using them, and
 - Encouraging them to increase their knowledge and skill-set and access growth opportunities.
- 2. Show concern for them by:
 - Taking the time to get to know them personally beyond their role as a CHV,
 - Listening to what they have to say without interrupting or inferring you know better and more, and
 - Providing constructive feedback.

- 3. Highlight and share CHVs success and commitment with the community and higher-level health authorities.
- 4. Thank them regularly for their support and commitment to the health and safety of their community. This is very important and has proven to be beneficial, especially for CHVs who do not receive a wage for their work.

Step 3: Wrap up session with key message

Prior to moving to the next session, reinforce the key takeaway message below.



Supportive supervision is a great approach to improving routine collection of information (data) for signal detection, recording, and reporting for CBS. Supporting supervision visits should be frequent and continuous. Local-level supervisors should also use these visits as opportunities to strengthen the relationships he/ she has with CHVs and community members.

SESSION 13

CONTINUOUS COMMUNITY ENGAGEMENT

This session focuses on the importance of ensuring continuous community engagement through local-level supervisors, and strategies on how best to engage at the community and local level.



Learning Objectives

By the end of this session, participants will be able to:

- Describe the importance of community engagement in CBS implementation,
- List at least three strategies to ensure continuous community engagement,
- Describe one strategy that can be implemented immediately with CHVs and key informants after CBS training, and
- Identify the resources and support needed to implement the strategy.

Materials

Facilitator

- Flipchart paper
- Markers

Participants

Participant Guide page 44



ACTIVITY 13.1 CONTINUOUS COMMUNITY ENGAGEMENT



Step 1: Deliver lecture on continuous community engagement

Move on to the lecture on continuous community engagement by reading the lecture following. Students can follow along in the Participant Guide and make notes in their journals.

What is community engagement, why is it important, and how do we do it?

What is community engagement?

Community engagement is "the process of working collaboratively with and through groups of people affiliated by geographic proximity, special interests, or similar situations to address issues affecting the wellbeing of those people. It is a powerful vehicle for bringing about environmental and behavioral changes that will improve the health of the community and its members".

Why is community engagement important?

Focusing on community engagement has become important for public health initiatives including CBS as communities face reoccurring and complex health challenges due to events which are a threat to humans, animals, and the environment. It benefits health professionals and public health authorities to engage with diverse community stakeholders in ways that foster trust, demonstrate respect and build relationships.

Community engagement that is continuous and involves all community members recognizes that people are at the center of any effort to create better health and that resilient people are the foundation of resilient health systems and communities. Actions taken by engaged communities are key to controlling public health threats.

Step 2: Reinforce key message and wrap up lecture

End the lecture by saying something like, 'Now that we have a definition for community engagement and know its importance to public health programming, we will answer the question How can local-level supervisors ensure it is conducted as part of CBS? through a small group brainstorming activity'.

• **ACTIVITY 13.2**

APPLYING COMMUNITY ENGAGEMENT PRINCIPLES



Step 1: Set up the small group brainstorming session

Introduce this activity by explaining to participants that they are going to develop strategies to increase community engagement in CBS implementation. Divide participants into two smaller groups and distribute one sheet of flipchart paper for each group.

If materials are not available, ask participant team leads to write their groups' strategies in their journal or on paper.

Ask participants to brainstorm ways (strategies) they can increase community engagement in CBS implementation. Ask them to choose one strategy from the list they feel could be implemented shortly after the training and describe the resources and support they will need. Remind the team leads to write their ideas on flipchart paper or journal and to choose another group member to present the group's strategies to the larger group.

Step 2: Group presentations and feedback

After 10 minutes of group work, ask for the groups' team leads and presenters to come together to the front of the room and present. Briefly give feedback to each group on their chosen strategy. After the presentations, thank the groups for actively participating in this activity. Ask if there are any questions or points of clarification needed.

Step 3: Summarize and wrap up the session

Summarize the activity by restating the importance of having continuous community engagement in CBS implementation. Prior to moving to the training review and close of the training, reinforce this session's key takeaway message.



Continuous community engagement benefits local-level supervisors and other health authorities to engage with diverse community stakeholders (CHVs and key informants) in ways that foster trust, demonstrate respect, and build relationships.

SESSION 14

LOCAL-LEVEL SUPERVISOR TRAINING REVIEW, KNOWLEDGE CHECK, AND CLOSE

This session will give participants the opportunity to review the learning objectives for the training, evaluate the knowledge and skills acquired, and provide feedback to facilitators regarding their satisfaction with the training.

C Purpose

- Summarize lessons learned from the training,
- Assess and evaluate their knowledge and skills post-training, and
- Provide training feedback and evaluation.

Hi Materials

Facilitator

- Facilitator Guide: Local-Level Supervisor Training Agenda (pp. 66-67)
- Flipchart paper
- Markers
- Appendix B: Training Knowledge Check Part 2
- Appendix C: Training Knowledge Check Part 1 & 2 Answers

Participants

Participant Guide page 45





REVIEW AND POST-TRAINING KNOWLEDGE CHECK



Step 1: Review the agenda

Ask participants to refer to their agenda to review the topics for the second half of the training. For every session, ask participants to share key takeaway messages (information) discussed and learned. Write their answers on the flipchart paper and encourage participants to take notes in their journals.

Step 2: Post-training knowledge check

Distribute Appendix B: Training Knowledge Check Part 2 to each of the participants and give them the following instruction:

You will have 10 minutes to individually take the knowledge check. You are encouraged to ask us if you have any questions or need clarification on questions asked in the questionnaire. Please respect everyone's time by not engaging in side conversations once you have completed your own test.

Step 3: Collect the papers and review answers

After all participants have completed the questionnaires, collect them, and review the answers using Appendix C: Training Knowledge Check Part 1 & 2 Answers. Allow 5 minutes for this activity in case there are questions. They can mark the correct answers in the Participant Guide Appendix A.

ACTIVITY 14.2 PARTICIPANT FEEDBACK AND TRAINING CLOSE

Ask participants for feedback on the day's training using the available evaluation tool.

Thank participants for attending the training and actively participating by saying the following:

On behalf of the CBS Training Facilitators' team, I would like to thank you for attending this training and actively participating. This morning we reviewed and discussed how to conduct CBS in our communities with our CHV counterparts. In addition, this afternoon we learned the importance of both supportive supervision and continuous community engagement and how to effectively incorporate this in the work we do as local-level supervisors. As your colleagues and facilitators, we are encouraged by your commitment to CBS and we are eager to work with you and support you in your efforts. We hope the expectations you expressed in the introductions session this morning were met. We strongly encourage you to share what we have discussed and learned today with other local-level supervisors who were not able to attend as well as CHVs in your catchment area. Once again, thank you, and we wish you a safe journey home.



APPENDIX A

TRAINING KNOWLEDGE CHECK PART 1

The purpose of this questionnaire is to assess your knowledge, understanding, and application of CBS. On your own, please circle the best answer.

1. Surveillance is important because it can be used to help reduce the spread of diseases, people getting sick, suffering and deaths.

2. CBS is an active process of community participation in ______ signals in the community.

a) detecting	b) reporting	c) monitoring	d) all of the abov
--------------	--------------	----------------------	--------------------

3. Signals are information you hear from the community that might lead you to find outbreaks that are a threat to public health.

a) True b) False

- A Community Health Volunteer's (CHV) role is to _____
 - a) detect signals b) record signals c) report signals d) all of the above
- 5. Key informants are members of the community and are in a position to detect signals that might represent outbreaks or serious diseases.

a) True b) False

6. All detected signals must be reported immediately.

a) True b) False

- **7.** The chickens owned by a member of the community start to die at an unusual rate. Should the CHV consider this a signal and visit the farmer?
 - a) Yes, the CHV should consider this situation as a signal and try to visit the farmer.
 - **b)** No, it's common for large numbers of chickens to die together.
- 8. All detected signals by key informants are events and should be reported to local-level supervisors by CHVs.

a) True b) False

9. Name three (#3) ways CHVs can report a signal to the local-level supervisor. Write the answers below.

a)_____b)_____c)_____

10. Key informant engagement is important for the success of CBS at the community level and should be conducted by both CHV and local-level supervisors.

a) True b) False

APPENDIX B

TRAINING KNOWLEDGE CHECK PART 2

The purpose of this questionnaire is to assess your knowledge, understanding, and application of triage, verification, and data reporting. On your own, please circle the best answer.

- 1. Local-level supervisors are responsible for triaging and verifying all signals to determine whether they are events.
 - a) True, it is a key function of their role.
 - b) No, triage and verification of events is the responsibility of the intermediate-level authorities.
- **2.** A CHV has reported that several people in a neighborhood have developed severe illness at about the same time. Is this an event?
 - a) Not necessarily. Triage and verification need to take place first before it can be confirmed as an event.
 - **b)** Yes, it is an event because the people affected can die.
- **3.** You conducted a triage of a signal reported by a CHV about several people getting seriously ill after attending a wedding. You considered the signal as relevant to public health and confirmed that it has not been reported to any public health staff before:
 - a) You have to report the signal as an event immediately.
 - b) You have to verify if the signal has truly occurred and matches with predefined signals.
- 4. All verified events by local supervisors should be reported to intermediate-level authorities immediately.
 - a) True b) False
- **5.** You conducted a triage of a signal reported by a CHV about several people becoming seriously ill after attending a wedding. You considered the signal as relevant to public health and confirmed that it has not been reported to any public health staff before. Then you verified that there was only one person affected with mild diarrhea. Should you report the signal as an event?
 - a) Yes, I should report the signal as an event.
 - b) No, I should discard the signal as an event and should not report it to the intermediate-level authorities.

APPENDIX C

TRAINING KNOWLEDGE CHECK PART 1 & 2 ANSWERS

Part 1 - Answers in bold

1. Surveillance is important because it can be used to help reduce the spread of diseases, people getting sick, suffering and deaths.

a) True b) False

2. CBS is an active process of community participation in ______ signals in the community.

a) detecting	b) reporting	c) monitoring	d) all of the above
--------------	--------------	----------------------	---------------------

3. Signals are information you hear from the community that might lead you to find outbreaks that are a threat to public health.

a) True b) False

4. A Community Health Volunteer's (CHV) role is to _____

- a) detect signals b) record signals c) report signals d) all of the above
- 5. Key informants are members of the community and are in a position to detect signals that might represent outbreaks or serious diseases.

a) True b) False

6. All detected signals must be reported immediately.

a) True b) False

7. The chickens owned by a member of the community start to die at an unusual rate. Should the CHV consider this a signal and visit the farmer?

a) Yes, the CHV should consider this situation as a signal and try to visit the farmer.

b) No, it's common for large numbers of chickens to die together.

8. All detected signals by key informants are events and should be reported to local-level supervisors by CHVs.

a) True b) False

9. Name three (#3) ways CHVs can report a signal to the local-level supervisor. Write the answers below.

a) In person b) By telephone call c) By SMS

10. Key informant engagement is important for the success of CBS at the community level and should be conducted by both CHV and local-level supervisors.

a) True b) False

APPENDIX C

TRAINING KNOWLEDGE CHECK PART 1 & 2 ANSWERS

Part 2 - Answers in bold

1. Local-level supervisors are responsible for triaging and verifying all signals to determine whether they are events.

a) True, it is a key function of their role.

b) No, triage and verification of events is the responsibility of the intermediate-level authorities.

2. A CHV has reported that several people in a neighborhood have developed severe illness at about the same time. Is this an event?

a) Not necessarily. Triage and verification need to take place first before it can be confirmed as an event.

- b) Yes, it is an event because the people affected can die.
- **3.** You conducted a triage of a signal reported by a CHV about several people getting seriously ill after attending a wedding. You considered the signal as relevant to public health and confirmed that it has not been reported to any public health staff before:
 - a) You have to report the signal as an event immediately.

b) You have to verify if the signal has truly occurred and matches with predefined signals.

4. All verified events by local supervisors should be reported to intermediate-level authorities immediately.

a) True b) False

- **5.** You conducted a triage of a signal reported by a CHV about several people becoming seriously ill after attending a wedding. You considered the signal as relevant to public health and confirmed that it has not been reported to any public health staff before. Then you verified that there was only one person affected with mild diarrhea. Should you report the signal as an event?
 - a) Yes, I should report the signal as an event.
 - b) No, I should discard the signal as an event and should not report it to the intermediate-level authorities.

APPENDIX D

EXAMPLE OF COMMUNITY HEALTH VOLUNTEER NOTEBOOK

General Information	on		
Name:			
Telephone:			
Name of CBS Supe	rvisor:		
Telephone:			

Instructions

When you detect one or more signals in your community, please report immediately to your CBS Supervisor. Use this notebook to record the following information and communicate it to the CBS Supervisor:

- Date the signal began
- Date/time the signal was detected
- Description of the signal, including number of people/animals affected
- Location of the signal

Signals to be reported (examples)	Image
Two or more persons presenting with similar signs/ symptoms from the same community, school, or workplace, within one week	Pictures or images of the signals can be included on the front page to assist in detection at the community-level.
A cluster of unexplained deaths of animals within one week	
Any person presenting with new or rare signs/symptoms	
Any person with fever and rash	
APPENDIX E VERIFICATION TOOL

As EBS is highly sensitive, it is essential to verify the authenticity of a reported signal and its characteristics. This process of verification involves actively cross-checking the validity of available information, and collecting additional information about the report using reliable sources as needed. The process of signal verification must be conducted within 24 hours of signal detection, and should answer three main questions:

- Is the report accurate (i.e., true)?
- Has the information been reported by a reliable source or sources?
- Does the report meet the criteria for one or more signals?

The graphic shown below can be used to determine the outcome of signal verification, once sufficient information has been collected and validated.



- Report is a hoax or a false rumour
- Information has been reported by an unreliable source (e.g., by word of mouth)
- Report does not meet signal criteria



- Information is accurate and true
- Report meets criteria for one or more signals
- Information has been reported by a credible source or sources (e.g., CHV, health facility focal point, or key informants)

The examples on the following pages demonstrate the process of signal verification using specific signals that may be utilized in CBS.

Two or more persons presenting with similar severe illnesses in the same setting (e.g., household, workplace, school, street) within one week



Discard if...

- There is only one person presenting with illness
- The persons present with dissimilar signs and symptoms
- There is no temporal association, and
 >1 week separates the patients' illness
- The persons presenting with similar symptoms reside in different settings that are physically well-separated



Confirm as an event if...

- There are two or more persons presenting with similar signs and symptoms who live or work in the same setting
- The ill persons had an opportunity for exposure or close contact with one another
- The persons' illness requires hospitalization
- One or more persons has died
- There is a common source of exposure

Unexpected large number of deaths of poultry or other domestic animals



Discard if...

- The number of animal deaths is what is normally expected
- There is a reasonable explanation for the animal deaths



Confirm as an event if...

- The number of animal deaths is not what is usually expected
- There are multiple clusters/groups of animal deaths
- There is no explanation for the animal deaths

APPENDIX F

SIGNAL GAME

Cut out the signals below and place one set in one bowl and the other set in another bowl.

Two or more cases of people presenting with similar severe signs/symptoms from the same community, school, or workplace within one week

A cluster of unexplained animal deaths within one week.

An illness with novel or rare symptoms

Any person with fever and rash

Two or more cases of people presenting with similar severe signs/symptoms from the same community, school, or workplace within one week

A cluster of unexplained animal deaths within one week

An illness with novel or rare symptoms

Any person with fever and rash

APPENDIX G

SIGNAL GAME ANSWERS

Two or more cases of people presenting with similar severe signs/symptoms from the same community, school, or workplace within one week.

1. Findings from verification:

- There is only one person, a 95-year-old man with diabetes, presenting with a heart attack
- The person affected required hospitalization but died 15 minutes ago
- 2. Decision tree for this type of signal (findings from verification highlighted in blue):





There is only one person presenting with illness

- The persons present with dissimilar signs and symptoms
- There is no temporal association, and >1 week separates the patients' illness
- The persons presenting with similar symptoms reside in different settings that are physically well-separated



Confirm as an event if...

- There are two or more persons presenting with similar signs and symptoms who live or work in the same setting
- The ill persons had an opportunity for exposure or close contact with one another
- The persons' illness requires hospitalization
- One or more persons has died
- There is a common source of exposure

3. Correct answer: Discard the signal

A cluster of unexplained animal deaths within one week.

1. Findings from verification:

Around 25 lamb deaths from 1-5 October

- In the last 10 years there have not been more than 5 lamb deaths between September and October
- Unexplained deaths
- 2. Decision tree for this type of signal (findings from verification highlighted in blue):



- The number of animal deaths is what is normally expected
- There is a reasonable explanation for the animal deaths



- The number of animal deaths is not what is usually expected
- There are multiple clusters/groups of animal deaths
- There is no explanation for the animal deaths
- 3. Correct answer: Confirmed as an event

An illness with novel or rare symptoms

- 1. Findings from verification:
 - A previously healthy young woman suddenly developed coughing, fever, and bleeding and needed to be hospitalized 48 hours after developing symptoms
 - A CHV referred the patient to the hospital
- 2. Decision tree for this type of signal (findings from verification highlighted in blue):



community



The illness is very common in the

Information has been reported by an

unreliable source (e.g., by word of mouth)



Confirm as an event if...

- The illness is rare in the community
 - Information has been reported by a credible source or sources (e.g., CHV, hospital focal point, or key informants)

3. Correct answer: Confirmed as an event

Any person with fever and rash

- 1. Findings from verification:
 - A 15-year-old girl has developed a rash after playing outdoors
 - She has a history of allergic reactions to some foods and medication
- 2. Decision tree for this type of signal (findings from verification highlighted in blue):





- Report is a hoax or a false rumour
- Information has been reported by an unreliable source (e.g., by word of mouth)
- Report does not meet signal criteria



Confirm as an event if...

- Information is accurate and true
- Report meets criteria for one or more signals
- Information has been reported by a credible source or sources (e.g., CHV, health facility focal point, or key informants)

3. Correct answer: Discard the signal

APPENDIX H

EXAMPLE OF SIGNAL REGISTER FOR COMMUNITY-BASED SURVEILLANCE

This Signal Register may be completed by local-level supervisor upon receiving reports of signals detected at the community-level.

TABLE INFORMATION KEY

- 'Date identified' is the date that the person reporting became aware that a person (or persons) showed signs/symptoms of one or more of the signals. Please enter date in the DD-MM-YYYY format.
- 'Date reported' is the date that the reporter informed a local-level supervisor about the signal. Please enter date in the DD-MM-YYYY format.
- Source of report' is the individual reporting to the local-level supervisor. A source may be: a CHV, school teacher, traditional healer, community resident, healthcare professional, among others.
- Please state the location of the patient's home, hospital, or place where the incident is occurring, as precisely and exactly as possible. If an address is available, please record it. If an address is not available, please describe the relationship between the patient's location and a landmark. If necessary, please describe the appearance of the setting. For example, a patient's home might be the brown house with a red door that is four buildings away from a specific church.
- '# of people affected' is the number of individuals who show signs of the signal being reported. Any deaths should be included in this value.
- 'Reported by multiple sources?' asks the local-level supervisor to state whether the signal has been reported by other individuals at any level of the health system.
- Any recent travel history?' asks the local-level supervisor to state whether the person(s) affected by the signal have travelled to or are visiting from another community, sub-national jurisdiction, or country in the 21 days preceding identification of the signal.
- 'If travel history, where?' asks the local-level supervisor to state the location of travel of person(s) affected by the reported signal. More than one location may be stated here.
- Signal Verification' asks the local-level supervisor to authenticate the report and record the date of report authentication. If the information has been reported by a credible source in the community (e.g., CHV, village leader, etc.), and/or by multiple sources, and also meets the signal criteria, it is an event. If the report does not meet these criteria, it is false. All events must be communicated immediately to the sub-national jurisdiction.
- 'Date signal verified' is the date that the local-level supervisor verified the signal. Please enter date in the DD-MM-YYYY format.
- 'Date event reported' is the date that the local-level supervisor communicated events (i.e., signals verified as true) to the local level. Please enter date in the DD-MM-YYYY format.

Please use the following codes to show the type of signal that is reported:

CODE EXAMPLE SIGNALS

- 1 Two or more persons presenting with similar signs/symptoms from the same community, school, or workplace, within one week
- 2 A cluster of unexplained deaths of animals within one week
- 3 Any person presenting with new or rare signs/symptoms
- 4 Any person with fever and rash

SIGNAL REGISTER

YEAR: 20 Name of Local-Level Supervisor: _____

Health Facility (if applicable): ____

Sub-National Jurisdiction: _

#	ate ified ¹	tte rted ²	Name of person	Source of	Phone number	Location of	nal de ⁵	eople sted ⁶	Any recent	If travel	Sig Verific	nal ation ¹⁰	signal ied ¹¹	event rted ¹
#	Da ident	Da	reporting	report ³	reporting	signal⁴	Sig Co	# of p affec	history? ⁸ (Y/N)	where? ⁹	Fasle	True	Date : verif	Date
											Fasle	True		
Con	nmunitv-E	Based Sur	veillance Training M	odule								Facil	tator Gui	de ∙116



Flipchart A: Surveillance Group Discussion (one per group)

Q1: Do people in your community know the purpose and importance of surveillance?	Q2: How do people in your community know surveillance activities are being conducted in the community?
Yes. Why?	
NO. WHY HOL?	
Q3: Who is involved in ensuring surveillance activities are happening in your communities?	Q4: What are some ways that surveillance is conducted in your comunities?

Q1: Who should Madame Diallo report to?	Q2: When should she report this signal?
Why?	Why?
Q3: How can she report this signal?	Q4: What information should she include in her report?
	Why?

Q1: Why are key informants important for the success of CBS?	Q2: What characteristics should key informants have?
Q3: What are key informants' roles and responsibilities?	Q4: How can you increase key informant engagement in your community?
Q5: How can you secure the trust and support of key informants in your	communities?

MODULE 5.2

COMMUNITY-BASED SURVEILLANCE TRAINING MODULE



PARTICIPANT GUIDE

U.S. Centers for Disease Control and Prevention



4 STEPS TO COMMUNITY-BASED SURVEILLANCE

SURVEILLANCE SAVES LIVES

Step 1. Educate



Step 2. Keep watch and listen



Step 3. Record



Step 4. Report



KNOW THE SIGNALS FOR YOUR COUNTRY

EXAMPLES OF SIGNALS FOR COMMUNITY-BASED SURVEILLANCE





A cluster of unexplained animal deaths within one week

Any person with fever and rash



An illness with novel or rare symptoms (signs/symptoms that the community has not seen before)



Two or more people presenting with similar severe signs/symptoms (i.e., needing to seek medical care) from the same community, school, or workplace within one week

TABLE OF CONTENTS

Community Health Volunteers Training (1/2 day)	005
Agenda for Community Health Volunteer Training	005
S1. Welcome and Introductions	007
S2. Training Overview, Agenda, Pre-Training Knowledge Check	008
S3. Community-Based Surveillance Overview	009
S4. Signals for Community-Based Surveillance	015
S5. Flow of Information: What happens when you report?	021
S6. Key Informant Engagement: How to engage your communities?	024
S7. Community Health Volunteer Training Review, Post-Training Knowledge Check, and Close	026
Local-Level Supervisors Training (1/2 day)	027
Agenda for Local-Level Supervisor Training	027
S8. Triage: What it is, why it is important, and how to do it	029
S9. Verification: What it is, why it is important, and how to do it	031
S10. Data Recording	037
S11. Data Reporting	041
	042
S12. Supportive Supervision	042
S12. Supportive Supervision S13. Continuous Community Engagement	042
S12. Supportive Supervision S13. Continuous Community Engagement S14. Local-Level Supervisor Training Review, Post-Training Knowledge Check, and Close	042
S12. Supportive SupervisionS13. Continuous Community EngagementS14. Local-Level Supervisor Training Review, Post-Training Knowledge Check, and CloseAppendix A: Training Knowledge Check Part 1	042 044 045 046

COMMUNITY HEALTH VOLUNTEERS TRAINING (1/2 DAY)

AGENDA FOR COMMUNITY HEALTH VOLUNTEER TRAINING

SESSION	ACTIVITIES	TIME
1. Welcome and Introductions Activity	Small group formation Introductions	30 minutes
2. Training Overview, Agenda, and Pre-Training Knowledge Check	Group discussion Written or verbal pre-training questionnaire	25 minutes
 3. Community-Based Surveillance Overview What is surveillance? Why is surveillance important in our communities? 	Matching exercise Small group discussions & presentation Lecture	30 minutes
 4. Signals for Community-Based Surveillance What are signals? How are signals detected? What are the signals for community-based surveillance? How do you record signals? 	Group discussion Lecture Role-play Case study	60 minutes

Morning Break (15 minutes)

Opportunity to interact with colleagues and mentors

SESSION	ACTIVITIES	TIME
 5. Flow of Information: What happens when you report? What do you report? Who do you report to? When do you report? How do you report signals? 	Group discussion Lecture Q&A discussion Role-play	45 minutes
 6. Key Informant Engagement: How to engage your communities? Who are key informants and what is their role? How do you maintain a network of key informants? 	Q&A discussion Small group discussions and presentations Lecture	30 minutes
7. Community Health Volunteer Training Review, Post-Training Knowledge Check, and Close	Group discussion Written or verbal post-training questionnaire Summary and participant feedback	25 minutes

Community Health Volunteer Training

Total 4 hours

WELCOME AND INTRODUCTIONS



Purpose

- Getting to know each other
- Group formation



Total time: 30 minutes

Introductions questions

Please answer the following questions and share your answers with those in your group.

1. What is your name and what community are you from?	2. What two things do you enjoy most about the work that you do?
3. What is one expectation you have for this training?	4. What two core values or ground rules should the group have during this training?
5. What two words best describe the people in your of	community?

TRAINING OVERVIEW, AGENDA, PRE-TRAINING KNOWLEDGE CHECK



Purpose

- Training overview & purpose
- Agenda for the day
- Pre-training questionnaire



Total time: 25 minutes

Purpose of community-based surveillance training

The purpose of this training is to provide you—community health volunteers (CHVs) and local-level supervisors with the knowledge, skills, and tools necessary to effectively detect, record, and report events that may be happening in your communities. Our training today has two general objectives:

- To build and strengthen your ability to look for and report unusual occurrences in your communities, and
- To improve the flow of information between your community and the health system in this country.

This one-day community-based surveillance (CBS) training is divided into two parts. The first half of the day will focus on:

- What surveillance is and why surveillance is important in communities, and
- How CHVs can effectively carry out surveillance in their communities.

The second half of the training is specifically for local-level supervisors. It will discuss local-level supervisors' roles and responsibilities in CBS.

Pre-training knowledge check

The purpose of the pre-training knowledge check is to assess your knowledge, understanding, and application of CBS. Your facilitator will distribute the questionnaire to you to complete.

COMMUNITY-BASED SURVEILLANCE OVERVIEW



Purpose

- Define key terms and activities conducted in CBS
- Describe how surveillance is conducted in your communities
- Describe the importance of surveillance at the community level



Total time: 30 minutes

CBS terms matching exercise

Match the term on the left with its definition on the right.

Term	Definition
Community-based surveillance (CBS)	Regularly checking on how surveillance is being done, and whether it is working.
Detection	When more incidents of a disease exist than would normally be expected in a specific place and time period.
Event	Becoming aware of or noticing a signal that may not be known to health authorities.
Monitoring	To give (either verbally or in writing) an account of a signal you or someone else has heard, and/or seen to health authorities.
Outbreaks	A reaction by health authorities to a detected and confirmed health event in a community.
Recording	Keeping written notes on details and information (i.e., signals and events) reported.
Reporting	An unusual occurrence that may cause harm to the health of humans, animals, and/or the environment.
Response	Keeping watch for, detecting, and reporting signals and events.
Signals	Structured way of detecting and reporting events within a community, by community members.
Surveillance	Things one sees or hears about that are happening in the community that may lead to finding an event that may be a threat to humans, animals, and/or the environment.

What is surveillance?

Surveillance is **keeping watch** and **immediately reporting** signals and events in communities and/or geographic areas. It encompasses the following activities:





Listen

Listen for other community members talking about unusual or unexpected occurrences.



Record

Record / write down information and details about the unusual or unexpected occurrences that you have heard about or found.

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Report

Report / tell someone (i.e., your supervisor) who will be able to find out more information and verify if these signals are true events that require response actions.

Why is surveillance important?

Surveillance is important because it helps to **detect diseases early** and trigger a response to **reduce the spread of diseases, people getting sick or suffering, and deaths in our communities.** Events must first be detected and reported before they can be solved and eliminated in the community. The earlier an event is detected and reported, the faster it can be addressed, so that our friends, families, and neighbors remain safe.

Surveillance in your communities

Q1: Do people in your community know the purpose and importance of surveillance?	Q2: How do people in your community know surveillance activities are being conducted in their community?
Yes. Why?	
No. Why not?	
Q3: Who is involved in ensuring surveillance activities are happening in your communities?	Q4: What are some ways that surveillance is conducted in your communities?

How the main goals of surveillance?

Surveillance aims to:

- Identify as early as possible any event that puts the health of a community at risk, including its residents, animals, and the environment,
- Ensure that the health system is made aware of the health-related incident in good time, and
- Ensure that the right information is available for residents to respond to the event.

Detecting and reporting events in communities, by community members, is known as CBS. This type of surveillance requires and involves community participation. This means community members look for unusual occurrences or events in humans, animals, and/or the environment which may be a risk to their communities.

The goal of CBS is to look for signals that represent events needing an immediate response and to report them immediately to supervisors.

Look at the following cases. What events might be occurring and why do they need to be responded to quickly?

Case 1

There is a 30-year-old woman with a 2-year-old son in the neighboring village. Both have a high fever, diarrhea, stomach pain, and are vomiting blood. The woman recently prepared the body of a deceased relative for their funeral.



Case 2

A large number of chickens in your village have died overnight suddenly.



Case 3

A group of children from the same elementary school have yellowing skin, high fever, bleeding, vomiting, and body aches.





SIGNALS FOR COMMUNITY-BASED SURVEILLANCE

Purpose

- Define signals that may represent events
- Explain how signals are detected in communities
- Describe the various types of signals in your country
- Explain the importance of recording information (data) for reporting
- Demonstrate how signals are recorded



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Total time: 60 minutes

What are signals?

Look at the picture. What do you see?



Fill in the blanks:

Signals are like ______ —things one sees or hears about that are happening in the community that may represent a risk to humans, animals, and the environment. In other words, signals are information which might represent an event occurring in the community.

Events are like ______ - something that is happening in the community that can spread and cause harm; like fires, events are best handled when they are small.

How are signals detected?

Signals are most likely to be detected by CHVs and key informants because of their connections to their communities. These key informants may include traditional healers, pharmacists, school teachers, barbers and hairdressers, leaders of social groups, and religious leaders, among others. CHVs can improve signal detection from their communities by engaging key informants to help them to detect signals and report them to CHVs.

Role-play

Role-Play Scenario 1: How are signals detected?

Pierre Dubois, a 65-year-old man who works and lives in Village X, has called Madame Diallo, the CHV, to let her know that he needs to see her right away about a story he heard in the market that evening. He thinks it may be an incident that needs to be checked out immediately. Madame Diallo quickly picks up her CHV Notebook and heads to Pierre Dubois's home.

Upon her arrival, Pierre tells her that in the market a friend told him that in Community Y there are two children under the age of 5 who have stopped walking. Both have stomach pains and sore throats, making it difficult to eat. One has had high fevers almost every night for the past week. Their mothers, who are sister wives, believe the last wife caused the children's illnesses out of jealousy because she was unable to have children of her own. Pierre remembers from a community meeting Madame Diallo held with key informants three months ago, that when children experience health problems like he has described it should be reported. He just prays it is not Ebola again.



What are the signals in our country?

Two or more people presenting with similar severe signs/symptoms (i.e., needing to seek medical care) from the same community, school, or workplace within one week.

 A cluster of unexplained animal deaths within one week

 An illness with novel or rare symptoms (signs/symptoms that the community has not seen before)

Any person with fever and rash

Examples of signals for CBS









Not every signal will mean that a big event is happening, as some will be rumors or misunderstandings. However, it is important that CHVs quickly report the information that they detect to their local-level supervisors.



A signal is information reported by a member of the community that may be an event.

It is important to remember that once a signal has been detected in a community, it should be reported immediately to the local-level supervisor.



Case study description

On October 3rd, 2019, Pierre Dubois, a 65-year-old man who works and lives in Village X, called Madame Diallo, the CHV, to let her know that he needed to see her right away about a story he heard in the market that morning. He thought it might be an event that needed to be checked out immediately. Madame Diallo met him the same day at his home to get more information about the signal he had detected.

Pierre let Madame Diallo know that a friend had told him that two children under the age of five had stopped walking in a family compound less than one-mile walking distance from the market. Both children had been experiencing stomach pains and sore throats, making it difficult to eat. One, the youngest, had a high fever almost every night for the past week. Their mothers, who are sister wives, believed the last wife had caused their children's illnesses out of jealousy, because she couldn't have children of her own. Pierre remembered from a community meeting Madame Diallo held with key informants three months ago that when children experience health problems like the ones he had described, it should be reported immediately.



Madame Diallo asked Pierre if she could take him to see his friend who knew exactly where the family compound was located. Pierre agreed to take her to his friend Paul's home. The three of them then went to visit the family compound in question. There, Madame Diallo introduced herself to the head of the household, who was sitting in front of the compound, telling him she was one of the community health volunteers responsible for looking out for and reporting any unusual occurrences or events in the community that might cause harm to other humans and animals. She then asked if she could speak with the mothers of the two children who had fallen ill in the past week. The father of the children brought her into the compound to speak to his wives. In the compound Madame Diallo made a few observations. She noticed that the homes were in close proximity to each other; children were eating outside from the same dish with their hands; the open toilet pits and showers were not too far from where the children were eating; and a child about the age of five years was lying on a mat being fed by a teenage girl.

Once she was introduced to the man's wives, she asked them questions about their children's health. Fatima, the senior wife and mother of the oldest child, spoke passionately about the children's condition and forcefully blamed the third wife, Tatianna, for their illness. She said that it wasn't until the third wife had brought her four nieces and nephews from Village Z, 10 miles away, three weeks ago, that their children had gotten sick. She complained that if Tatianna had taken her 6-year-old niece, who was already ill, to the clinic immediately, all their kids would be fine! Tatianna explained that it was not her fault the children were sick. Her nieces and nephews needed a place to stay for two weeks while her sister traveled to the city to find work. Her eldest niece only had a mild fever and fatigue when she arrived at the compound. After three days she was better.



She explained that her nieces and nephews were all back in Village Z now and should not be blamed for what was happening to her sister wives' children. Madame Diallo asked to see all the sick children, including those she saw eating outside.

Now imagine you are Madame Diallo and you have received information from the family, in addition to that which the key informant shared with you earlier in the day. As a group, think about what information should be recorded, and complete an entry in the CHV Notebook accordingly.

General Information		
Name:		
Telephone:		
Name of CBS Supervisor:		
Telephone:		

Instructions

When you detect one or more signals in your community, please report immediately to your CBS Supervisor. Use this notebook to record the following information and communicate it to the CBS Supervisor:

- Date the signal began
- Date/time the signal was detected
- Description of the signal, including number of people/animals affected
- Location of the signal

Signals to be reported (examples)	Image
Two or more persons presenting with similar signs/ symptoms from the same community, school, or workplace, within one week	Pictures or images of the signals can be included on the front page to assist in detection at the community-level.
A cluster of unexplained deaths of animals within one week	
Any person presenting with new or rare signs/symptoms	
Any person with fever and rash	

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FLOW OF INFORMATION: WHAT HAPPENS WHEN YOU REPORT?

Purpose

- Identify the reporting structure for signals
- Explain how signals are reported at the community level
- Describe what information is reported after detection of a signal
- Demonstrate how to report signals using various signal reporting mechanisms

Total time: 45 minutes

Structure for reporting signals

Participants should follow the discussion led by the facilitator and complete the following questions related to the case study.

Q1: Who should Madame Diallo report to?	Q2: When should she report this signal?
Why?	Why?
Q3: How can she report this signal?	Q4: What information should she include in her report?
	Why?

What is the reporting structure for signals? What happens when you report?

When information, or signals, are detected at the community-level, they should be reported according to the information flow structure of the country in which they have been detected. The figure below shows how information flows up through the different levels, and how feedback flows down to you, the reporters of surveillance information.



As we can see:

- Signals detected in communities by CHVs, key informants, or other community residents are to be reported immediately to the local level (local-level supervisor).
- Local-level supervisors report events up to the intermediate level.
- Intermediate-level health authorities report to higher administrative levels.

All events must be reported and investigated according to the existing national surveillance and reporting structure.

What should CHVs do after reporting?

They should collaborate with public health authorities as required to collect more information. CHVs may be asked to implement basic prevention measures such as health education and handwashing programs as needed.

Why is feedback important?

Just as timely signal reporting at each level is important, so is timely and routine feedback. Intermediate-level authorities should provide feedback about events and signals to supervisors at the local-level. Feedback on reported signals should be given to CHVs and key informants at the community level by local-level supervisors. The community needs to know how the information they shared was used so trust and mutual collaboration can be preserved.

How are signals reported?

Role-Play Scenario 2: How are signals reported?

Madame Diallo, the CHV in Village X, received a call this morning from Pierre, a key informant, regarding a signal he had detected that morning. Immediately after the call, she traveled to see him at his home and together they visited a family compound where two children around the age of five were ill and for the past week had been experiencing high fevers and the inability to walk or eat.

During Madam Diallo's visit to the compound to investigate the signal, she made a few observations, asked questions of the children's mothers, and recorded this in her CHV Notebook. She believed the situation was a signal that should be taken seriously and reported immediately. She called Mr. Fofana, her local-level supervisor, to make a report; unfortunately, the weak telephone signal in the area made it difficult to hear.





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KEY INFORMANT ENGAGEMENT: HOW TO ENGAGE YOUR COMMUNITIES?

Purpose

- Explain why key informants are important to the success of CBS
- Describe characteristics of key informants
- Define the roles and responsibilities of CBS key informants
- List strategies to ensure communities and their key informants are engaged in CBS



E Key informant engagement

In your groups discuss and answer the following questions.

Q1: Why are key informants important for the success of CBS?	Q2: What characteristics should key informants have?
Q3: What are key informants' roles and responsibilities?	Q4: How can you increase key informant engagement in your community?
Q5: How can you secure the trust and support of key informants in your communities?	
How can your communities be engaged in CBS?

As previously discussed, CBS involves the entire community. Although all community members are encouraged to 'look out' for signs that may pose a health threat, asking everyone to detect signs and report them will likely cause false or duplicate signals to be reported. It is important to identify and sensitize community members who can take on the role of a key informant. Key informants are members of the community who are able to hear about possible events. They play an important part in CBS by working closely with CHVs to detect signals in their communities. Posters and pamphlets that show the signals in text and pictures can help both CHVs and key informants to detect signals which may turn out to be events.

Once key informants have been identified, each will need to understand:

- What the signals are,
- Why it is important to inform CHVs of signals they see or hear about, and
- When they should inform CHVs of signals they see or hear about.



It is also essential that key informants can easily communicate with CHVs and are consistently reminded by CHVs of the importance of signal detection. Furthermore, to successfully ensure key informants are dedicated to their role, they should be thanked for their service to the community.

COMMUNITY HEALTH VOLUNTEER TRAINING REVIEW, POST-TRAINING KNOWLEDGE CHECK, AND CLOSE

Purpose

- Summarize lessons learned from the training
- Assess and evaluate your knowledge and skills post training
- Provide training feedback and evaluation



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Total time: 25 minutes

Post-training knowledge check

The purpose of the post-training knowledge check is to assess your knowledge, understanding, and application of CBS now that you have finished the training. Your facilitator will distribute the questionnaire to you to complete.

Many thanks for your participation!

Many thanks for your participation today! We are encouraged by your commitment to working and supporting your communities. We hope the expectations you expressed in the introductions exercise this morning were met. We strongly encourage you to share what we have discussed and learned today with other CHVs who were not able to attend, as well as your key informants.

LOCAL-LEVEL SUPERVISORS TRAINING (1/2 DAY)

AGENDA FOR LOCAL-LEVEL SUPERVISOR TRAINING

SESSION	ACTIVITIES	ТІМЕ
Energizer Activity	Lie detector game	10 minutes
 8. Triage Pre-training knowledge check Why is triage important for community-based surveillance? What is triage? How do you triage reported signals? 	Questionnaire Q&A discussion Lecture Practical exercise	40 minutes
 9. Verification What is verification? Why is verification important in community- based surveillance? How do you verify triaged signals? 	Group discussion Lecture Signal game	40 minutes
 10. Data Recording How do you record information (data) that has been reported to you? What information do you record? 	Small group discussions and presentations	30 minutes
 11. Data Reporting Who do you report to? What information do you report? When do you report? How do you report information (data)? 	Q&A discussion Small group discussions Role-play	30 minutes

Afternoon Break (15 minutes)

Opportunity to interact with colleagues and mentors

SESSION	ACTIVITIES	TIME
 12. Supportive Supervision What is supportive supervision? Why is supportive supervision important? How do you provide supportive supervision to community health volunteers? 	Q&A discussion Lecture	20 minutes
 13. Continuous Community Engagement Why is continuous community engagement important to community-based surveillance? How do you ensure community members (key informants and community health volunteers) are engaged in community-based surveillance? 	Lecture Small group discussions and presentations	30 minutes
14. Local-Level Supervisor Training Review, Post-Training Knowledge Check, and Close	Written or verbal post-training questionnaire Group discussion	25 minutes

Local-Level Supervisor Training

Total 3.75 hours

TRIAGE: WHAT IT IS, WHY IT IS IMPORTANT, AND HOW TO DO IT

Purpose

- Assess your knowledge & skills pre-training
- Define triage
- List the two questions that must be asked during the process
- Explain how triaging of reported signals occurs
- Identify which signals are pertinent to CBS and are not duplicates
- Demonstrate how signal triage is done by a local-level supervisor



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Total time: 40 minutes

Pre-training knowledge check

The purpose of the pre-training knowledge check is to assess your knowledge, understanding, and application of CBS prior to completing the training. Your facilitator will distribute the questionnaire to you to complete.

What is triage?

Triage is the process of screening what is reported for information that is relevant for early warning (i.e., signals that if verified could be events).

Why is it important?

The triaging process determines if a signal is relevant to public health. Triaging helps with:

- Selecting signals that may pose a risk to the public's health, and
- Filtering to get rid of duplicates.

'Relevant to public health' means that the signal fits one or more of the following descriptions:

- Could have a large public health impact in the country,
- Is outbreak-prone and poses a major public health threat,
- Has previously been prevalent and might re-emerge, and
- Is slated for eradication or elimination.

How do we do it?

Triage can take place in person, by text message, or over the telephone. When completing the signal triage process, it is important that local level supervisors ask two important questions.



Is the reported information relevant to early warning (i.e., could this signal be a genuine public health event)?



Was this signal previosly reported (i.e., is this signal a duplicate)?

After triage

- If the report is not relevant or is a duplicate, then it can be discarded. If the information is to be discarded, the local-level supervisor will need to communicate this to the CHV who reported the signal. Local-level supervisors should encourage CHVs to continue reporting other possible signals. They should remind CHVs that it is okay that they have reported a signal that did not turn out to be an event and should encourage them to continue reporting signals immediately when they are detected.
- If the report is relevant and is not a duplicate, then the local-level supervisor who received the reported signal starts the verification process.



Local-level supervisors are responsible for triaging reported signals. Triaging helps answer two important questions:

- Is the reported information relevant to early warning (i.e., could this signal be a genuine public health event)?
- Was the signal previously reported (i.e., is the signal a duplicate)?

VERIFICATION: WHAT IT IS, WHY IT IS IMPORTANT, AND HOW TO DO IT

Purpose

- Define verification
- Explain why it is an important step to confirming a reported signal as an event
- Demonstrate how verification of reported signals occurs



Total time: 40 minutes

What is verification, why is it important, and how do we do it?

What is signal verification?

Signal verification is completed by local-level supervisors within 24 hours of signal detection, and can take place in person or over the telephone. All signals must be verified within 24 hours of detection. Potential sources of CBS information cannot always be trusted or considered as reliable. The standard for signal verification includes:

- Asking questions of the CHV to ensure they have correctly understood the signal,
- Getting confirmation of the signal from at least two different sources, or
- Determining if the signal is reported by a person or place of medical authority (doctor or clinic).

Reliable or credible sources of information can include official reports, CHVs, key informants, healthcare workers, surveillance focal points, etc.

Why is signal verification important?

The verification process for community reported signals is completed by the local-level supervisors. The process helps local-level supervisors determine if the reported signal represents a threat to humans, animals, and/or the environment and requires an immediate response.

How is the signal verification process completed?

Signal verification is completed by local-level supervisors and can take place in-person or over the telephone. To conduct verification, the local-level supervisor will ask questions of the CHV who has reported the signal, and possibly other people as well. This can include the person affected, the family and friends of the patient, and/or other people within the community. It is recommended that local-level supervisors use the Verification Tool to complete this process. The process of signal verification must be conducted within 24 hours of signal detection, and should answer three main questions:

- Is the report accurate (i.e., is it true)?
- Has the information been reported by a reliable source or sources?
- Does the report meet the criteria for one or more signals?

Verification Tool

The graphic shown below can be used to determine the outcome of signal verification, once sufficient information has been collected and validated.



Discard if...

- Report is a hoax or a false rumour
- Information has been reported by an unreliable source (e.g., by word of mouth)
- Report does not meet predefined signals



Confirm as an event if...

- Information is accurate and true
- Report meets one or more predefined signals
- Information has been reported by a credible source or sources (e.g., community health volunteer, health facility focal point, or key informants)

After verification:

- If the signal is verified to be an event by local public health authorities, it should be recorded and reported immediately to the intermediate public health authorities. Feedback should be provided to the reporter about the result of the verification process.
- If the signal is not considered to be an event, feedback should be provided to the reporter about the result of the verification process.

What happens after signal verification?

Once a signal is verified as an event, risk assessment begins. Risk assessment is a process by which the available information about a real event is analyzed and a judgment is made as to whether it poses an immediate risk to public health. To determine the overall risk and appropriate response in a timely manner, risk assessment of events must be conducted within 48 hours of initial detection as a signal.

The following page provides examples of the verification process for specific signals.

Two or more persons presenting with similar severe illnesses in the same setting (e.g., household, workplace, school, street) within one week



Discard if...

- There is only one person presenting with illness
- The persons present with dissimilar signs and symptoms
- There is no temporal association, and >1 week separates the patients' illness
- The persons presenting with similar symptoms reside in different settings that are physically well-separated



Confirm as an event if...

- There are two or more persons presenting with similar signs and symptoms who live or work in the same setting
- The ill persons had an opportunity for exposure or close contact with one another
- The persons' illness requires hospitalization
- One or more persons has died
- There is a common source of exposure

A cluster of unexplained animal deaths within one week



Discard if...

- The number of animal deaths is what is normally expected
- There is a reasonable explanation for the animal deaths



Confirm as an event if...

- The number of animal deaths is not what is usually expected
- There are multiple clusters/groups of animal deaths
- There is no explanation for the animal deaths

An illness with novel or rare symptoms



Discard if...

- The illness is very common in the community
- Information has been reported by an unreliable source (e.g., by word of mouth)



Confirm as an event if...

- The illness is rare in the community
- Information has been reported by a credible source or sources (e.g., community health volunteer, hospital focal point, or key informants)

Any person with fever and rash



Discard if...

- Report is a hoax or a false rumour
- Information has been reported by an unreliable source (e.g., by word of mouth)
- Report does not meet signal criteria



Confirm as an event if...

- Information is accurate and true
- Report meets criteria for one or more signals
- Information has been reported by a credible source or sources (e.g., community health volunteer, health facility focal point, or key informants)

Applying the signal verification process

Discuss whether the following signals should be verified or discarded based on the information you have.

Two or more cases of people presenting with similar severe signs/symptoms from the same community, school, or workplace within one week

1. Findings from verification:

- One man, 95-years-old with diabetes, has presented with a heart attack.
- The man required hospitalization but died 15 minutes ago.
- 2. Should this signal be discarded or verified as an event? Why?

A cluster of unexplained animal deaths within one week

1. Findings from verification:

- Around 25 young lambs have died from 1-5 October.
- In the last 10 years there has never been more than 5 lamb deaths between September and October.
- The deaths are unexplained.

2. Should this signal be discarded or verified as an event? Why?

- 1. Findings from verification:
 - A previously healthy young woman suddenly developed coughing, fever, and bleeding and needed to be hospitalized 48 hours after developing symptoms.
 - A CHV referred the patient to the hospital.
- 2. Should this signal be discarded or verified as an event? Why?

Any person with fever and rash

- 1. Findings from verification:
 - A 15-year-old girl has developed a rash after playing outdoors.
 - She has a history of allergic reactions to some foods and medication.
- 2. Should this signal be discarded or verified as an event? Why?



The signal verification process is an essential step in CBS, and must be conducted within 24 hours of signal detection. Local-level supervisors are responsible for verifying reported signals. Verification helps determine if a reported signal represents a threat to humans, animals, and/or the environment and requires an immediate response. Local-level supervisors must complete and record this process before reporting the signal immediately to higher level authorities.

SESSION 10 DATA RECORDING

Purpose

- Explain the importance of recording information (data) for reporting
- Demonstrate how local-level supervisors can effectively record information using the Signal Register for CBS
- Demonstrate how verification of reported signals occurs



Total time: 30 minutes

Local-level supervisor data recording

Use the role-play and case study descriptions from the morning CHV training to complete one entry in the Signal Register for CBS.

EXAMPLE OF SIGNAL REGISTER FOR COMMUNITY-BASED SURVEILLANCE

This Signal Register may be completed by local-level supervisors upon receiving reports of signals detected at the community level.

TABLE INFORMATION KEY

- ▶ 'Date identified' is the date that the person reporting became aware that a person (or persons) showed signs/symptoms of one or more of the signals. Please enter date in the DD-MM-YYYY format.
- 'Date reported' is the date that the reporter informed a local-level supervisor about the signal. Please enter date in the DD-MM-YYYY format.
- Source of report' is the individual reporting to the local-level supervisor. A source may be: a community health volunteer (CHV), school teacher, traditional healer, community resident, or healthcare professional, among others.
- Please state the location of the patient's home, hospital, or place where the incident is occurring, as precisely and exactly as possible. If an address is available, please record it. If an address is not available, please describe the relationship between the patient's location and a landmark. If necessary, please describe the appearance of the setting. For example, a patient's home might be the brown house with a red door that is four buildings away from a specific church.

CODE	EXAMPLE SIGNALS
1	Two or more persons presenting with similar signs/symptoms from the same community, school, or workplace, within one week
2	A cluster of unexplained deaths of animals within one week
3	Any person presenting with new or rare signs/symptoms
4	Any person with fever and rash

Please use the following codes to show the type of signal that is reported:

- '# of people affected' is the number of individuals who show signs of the signal being reported. Any deaths should be included in this value.
- 'Reported by multiple sources?' asks the local-level supervisor to state whether the signal has been reported by other individuals at any level of the health system.
- Any recent travel history?' asks the local-level supervisor to state whether the person(s) affected by the signal have travelled to or are visiting from another community, sub-national jurisdiction, or country in the 21 days preceding identification of the signal.
- If travel history, where?' asks the local-level supervisor to state the location of travel of person(s) affected by the reported signal. More than one location may be stated here.
- Signal Verification' asks the local-level supervisor to authenticate the report and record the date of report authentication. If the information has been reported by a credible source in the community (e.g., CHV, village leader, etc.), and/or by multiple sources, and also meets the signal criteria, it is an event. If the report does not meet these criteria, it is false. All events must be communicated immediately to the subnational jurisdiction.
- 'Date signal verified' is the date that the local-level supervisor verified the signal. Please enter date in the DD-MM-YYYY format.
- 'Date event reported' is the date that the local-level supervisor communicated events (i.e., signals verified as true) to the local level. Please enter date in the DD-MM-YYYY format.

SIGNAL REGISTER

YEAR: 20 Name of local-level supervisor:

Health Facility (if applicable): ____

Sub-National Jurisdiction: _

#	ate tified	ate orted	Name of person	Source of	Phone number	Location of	l Code	eople cted	Any recent If travel		Any Signa	nal ation	signal fied event irted	event orted
#	Da ident	Da	reporting	report	reporting	signal	Signal	# of p affe	history? (Y/N)	where?	False	True	Date : veri	Date repo



Local-level supervisors are responsible for triaging, verifying, and, if verified as true, reporting events to the intermediate level; therefore, it is essential that their Signal Registers are completed correctly.

SESSION 11 DATA REPORTING

Purpose

- Explain how local-level supervisors report confirmed signals to the intermediate-level public health authorities
- Describe what information is reported after verification of a signal as an event
- Demonstrate how events are reported to higher level authorities



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Total time: 30 minutes

? The Who, When, What and How of event reporting

Question 1: If you are a local-level supervisor who has triaged and verified a detected signal as an event, who do you report to?

Question 2: When should local-level supervisors report an event?

Question 3: What information should be reported?

Question 4: How do you report an event?



Local-level supervisors should report to intermediate-level public health authorities. Reporting should be done immediately after the signal has been triaged and verified using the available and most convenient method of reporting (e.g., telephone, text message [SMS], in person, etc.).

SUPPORTIVE SUPERVISION

Purpose

- Define supportive supervision
- Describe what it looks like in the CBS context at the community level Þ
- List at least three ways to effectively provide supportive supervision to CHVs



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Total time: 20 minutes



What is supportive supervision?

Supportive supervision promotes mentorship, joint problem-solving and communication between supervisors and supervisees-CHVs. Supportive supervision requires a supervisor who has effective leadership characteristics, and respects and values the CHVs, allowing them to feel heard, valued, and cared about.

Why is supportive supervision important?

Supportive supervision is a great approach to improving routine collection of information (data) for signal detection, recording, and reporting for CBS, especially at the community-level. When conducted successfully by locallevel supervisors, it can increase CHVs capacity to detect, record, and report signals.

Supportive supervision can improve both local-level supervisor and CHV leadership and is necessary in order to ensure that they are correctly fulfilling their responsibilities. Supportive supervision leads to positive outcomes, such as:

- Improved support ►
- ► Increased commitment
- Reduced turnover ►

How is supportive supervision conducted?

Local-level supervisors are required to conduct regular supervisory visits to CHVs as scheduled by national surveillance guidance (e.g., IDSR). Supervision should incorporate refresher training for CHVs on what to report, and the importance of reporting signals. Supportive supervisory visits between local-level supervisors and CHVs should be frequent and continuous. These visits are also an opportunity for local-level supervisors to provide feedback regarding reported signals.

During these visits, local-level supervisors should:

1. Engage and involve CHVs in CBS activity planning and decision-making by:

- Asking for the opinions and ideas of CHVs and actually using them, and
- Encouraging them to increase their knowledge and skill sets and access growth opportunities.

2. Show concern for CHVs by:

- Taking the time to get to know them personally beyond their role as a CHV,
- Listening to what CHVs have to say without interrupting or implying that supervisors know better, and
- Providing constructive feedback.

3. Highlight and share CHVs success and commitment with the community and higher-level health authorities.

4. Thank CHVs regularly for their support and commitment to the health and safety of their community. This is very important and has proven to be beneficial, especially for CHV who do not receive a wage for their work.



Supportive supervision is a great approach to improving routine collection of information (data) for signal detection, recording, and reporting for CBS. Supportive supervisory visits should be frequent and continuous. Local-level supervisors should also use these visits as opportunities to strengthen the relationships he/she has with CHVs and community members.

CONTINUOUS COMMUNITY ENGAGEMENT

Purpose

- Describe the importance of community engagement in CBS implementation
- List at least three strategies to ensure continuous community engagement
- Describe one strategy that can be implemented immediately with CHVs and key informants after CBS training
- Identify the resources and support needed to implement the strategy



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Total time: 30 minutes



What is community engagement, why is it important, and how do we do it?

What is community engagement?

Community engagement is "the process of working collaboratively with and through groups of people affiliated by geographic proximity, special interests, or similar situations to address issues affecting the wellbeing of those people. It is a powerful vehicle for bringing about environmental and behavioral changes that will improve the health of the community and its members".

Why is community engagement important?

Focusing on community engagement has become important for public health initiatives including CBS as communities face reoccurring and complex health challenges due to events which are a threat to humans, animals, and the environment. It benefits health professionals and public health authorities to engage with diverse community stakeholders in ways that foster trust, demonstrate respect, and build relationships.

Community engagement that is continuous and involves all community members recognizes that people are at the center of any effort to create better health and that resilient people are the foundation of resilient health systems and communities. Actions taken by engaged communities are key to controlling public health threats.



"Continuous community engagement benefits local-level supervisors and other health authorities by encouraging engagement with diverse community stakeholders (CHVs and key informants) in ways that foster trust, demonstrate respect, and build relationships.

LOCAL-LEVEL SUPERVISOR TRAINING REVIEW, POST-TRAINING KNOWLEDGE CHECK, AND CLOSE

Purpose

- Summarize lessons learned from the training
- Assess and evaluate their knowledge and skills post-training
- Provide training feedback and evaluation



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Total time: 25 minutes

Post-training knowledge check

The purpose of the post-training knowledge check is to assess your knowledge, understanding, and application of triage, verification, and data reporting now that you have finished the training. Your facilitator will distribute the questionnaire to you to complete.

Many thanks for your participation!

Many thanks for your participation today! We are encouraged by your commitment to working with and supporting your communities. We hope the expectations you expressed in the introductions exercise this morning were met. We strongly encourage you to share what we have discussed and learned today with other local-level supervisors who were not able to attend, as well as your key informants.

APPENDIX A

TRAINING KNOWLEDGE CHECK PART 1

The purpose of this questionnaire is to assess your knowledge, understanding, and application of CBS. On your own, please circle the best answer.

1. Surveillance is important because it can be used to help reduce the spread of diseases, people getting sick, suffering and deaths.

a) True b) False

2.	CBS is an active process of community participation in	_ signals in the community.

	above
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3. Signals are information you hear from the community that might lead you to find outbreaks that are a threat to public health.

a) True b) False

4. A Community Health Volunteer's (CHV) role is to _____

a) detect signals b) record signals c) report signals d) all of the above

5. Key informants are members of the community and are in a position to detect signals that might represent outbreaks or serious diseases.

a) True b) False

6. All detected signals must be reported immediately.

a) True b) False

7. The chickens owned by a member of the community start to die at an unusual rate. Should the CHV consider this a signal and visit the farmer?

a) Yes, the CHV should consider this situation as a signal and try to visit the farmer.

- **b)** No, it's common for large numbers of chickens to die together.
- 8. All signals detected by key informants are events and should be reported to local-level supervisors by CHVs.

a) True b) False

9. Name three (3) ways CHVs can report a signal to the local-level supervisor. Write the answers below.

a)_____b)_____c)____

10. Key informant engagement is important for the success of CBS at the community level and should be conducted by both CHV and local-level supervisors.

a) True b) False

TRAINING KNOWLEDGE CHECK PART 2

On your own, please circle the best answer.

The purpose of this questionnaire is to assess your knowledge, understanding, and application of triage, verification, and data reporting. On your own, please circle the best answer.

- 1. Local-level supervisors are responsible for triaging and verifying all signals to determine whether they are events.
 - a) True, it is a key function of their role.
 - **b)** No, triage and verification of events is the responsibility of the intermediate-level authorities.
- **2.** A CHV has reported that several people in a neighborhood have developed severe illness at about the same time. Is this an event?
 - a) Not necessarily. Triage and verification need to take place first before it can be confirmed as an event.
 - **b)** Yes, it is an event because the people affected can die.
- **3.** You conducted a triage of a signal reported by a CHV about several people getting seriously ill after attending a wedding. You considered the signal as relevant to public health and confirmed that it has not been reported to any public health staff before:
 - a) You have to report the signal as an event immediately.
 - **b)** You have to verify if the signal has truly occurred and matches with predefined signals.
- 4. All verified events by local supervisors should be reported to intermediate-level authorities immediately.
 - a) True b) False
- **5.** You conducted a triage of a signal reported by a CHV about several people becoming seriously ill after attending a wedding. You considered the signal as relevant to public health and confirmed that it has not been reported to any public health staff before. Then you verified that there was only one person affected with mild diarrhea. Should you report the signal as an event?

a) Yes, I should report the signal as an event.

b) No, I should discard the signal as an event and should not report it to the intermediate-level authorities.

APPENDIX B COMMUNITY-BASED SURVEILLANCE TERMS

Term

Definition

Community-based surveillance (CBS)	Structured way of detecting and reporting events within a community, by community members.
Detection	Becoming aware of or noticing a signal that may not be known to health authorities.
Event	An unusual occurrence that may cause harm to the health of humans, animals, and/or the environment.
Monitoring	Regularly checking on how surveillance is being done, and whether it is working.
Outbreaks	When more incidents of a disease exist than would normally be expected in a specific place and time period.
Recording	Keeping written notes on details and information (i.e., signals and events) reported.
Reporting	To give either verbally or in writing an account of a signal you or someone else has heard, and/or seen to health authorities.
Response	A reaction by health authorities to a detected and confirmed health event in a community.
Signals	Things one sees or hears about that are happening in the community that may lead to finding an event that may be a threat to humans, animals, and/or the environment.
Surveillance	Keeping watch for, detecting, and reporting signals and events.