



Key Roles in Community Case Management

Peer Supervisor

- Reports to PHU's In-Charge
- Links CBD with PHU
- Visits CBDs to supervise their work
- Checks CBD registers and adds up CBDs' monthly drug supply
- Tops up CBDs drug supply when needed
- Completes Supervision Checklist, Supervisor Compiled Monthly Report, and Health Facility Monthly Report
- Helps CBDs improve their skills and solve problems
- Participates in monthly CBD meeting

CBD

- Refer children with danger signs to the clinic
- Identify and treat fever, pneumonia, and diarrhea in children 2 – 59 months
- Counsel caregivers on home care and prevention
- Follow up on children referred or treated

PHU Staff

- Support communities during selection of CBDs
- Participate in the training and supervision of CBDs
- Replenish drug stocks for CBDs
- Manage sick children referred by the CBDs
- Integrate records of Peer Supervisors into HMIS
- Investigate and follow up problems reported by the community that may be related to the CBD's work

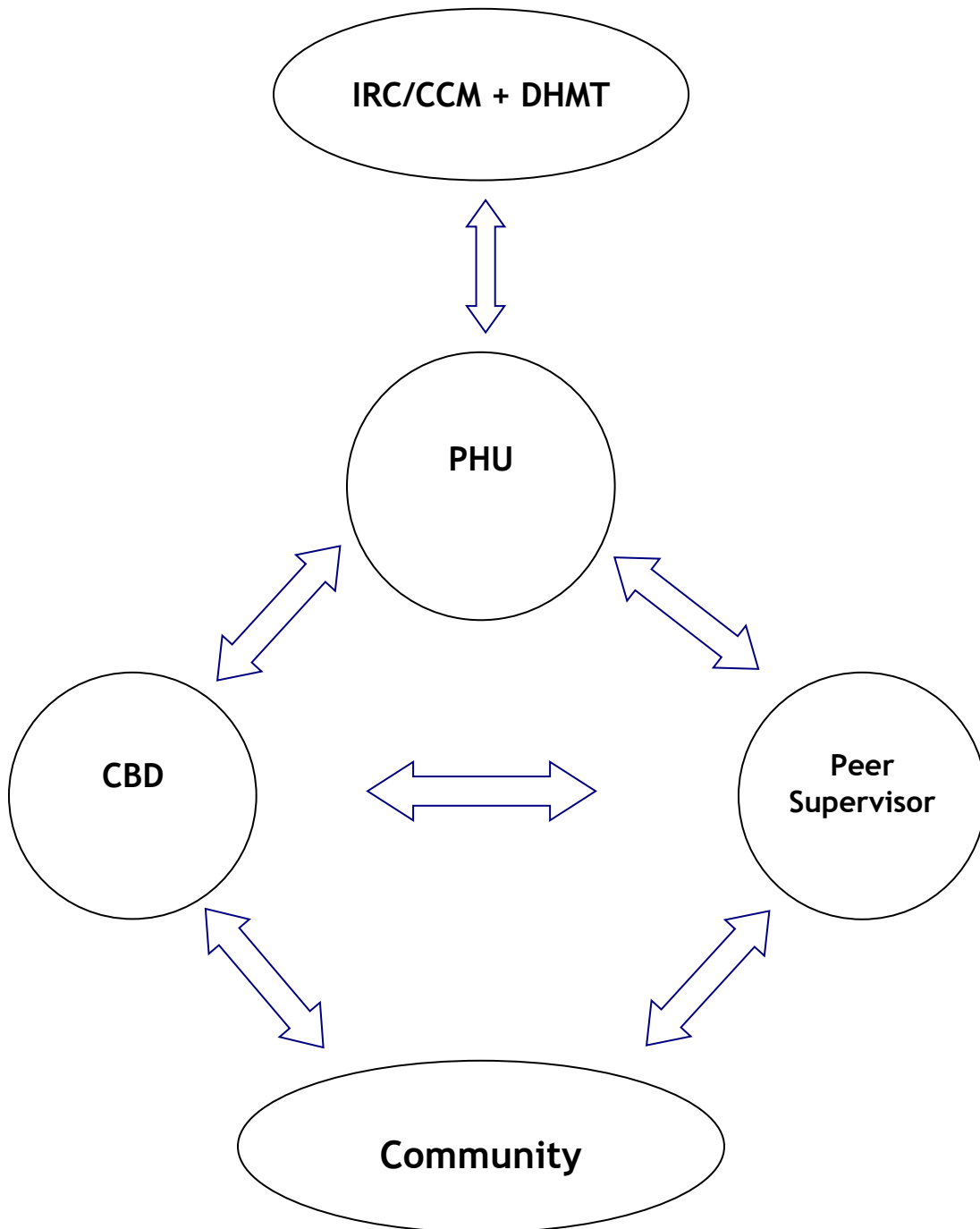
CCM Officer

- Trains CBDs and Peer Supervisors
- Links IRC with the PHU
- Links IRC with the communities through the PHU, CBDs, and Peer Supervisors
- Provides information to the PHU and Peer Supervisors
- Directly oversees the Peer Supervisors, along with the PHU

DHMT

- Partners with IRC on community case management
- Oversees the PHUs
- Compiles reports from PHUs
- Feeds back information about the overall health of the community

CCM and the CBD Peer Supervisor in the Community



CBD Peer Supervisor Role and Responsibilities

The CBD Peer Supervisor plays a crucial role in the expanded use of CBDs to deliver primary health care to children under five in Sierra Leone. They provide first-line support to CBDs and ensure the flow of important information between the CBD and the rest of the program—data used to assess and improve CCM. CBD Peer Supervisors have three main areas of responsibility: record keeping, activity monitoring, supportive supervision, and community/stakeholder liaison.

- Liaise with community leaders to create more awareness of CCM activities in their catchment areas.
- Complete supervisory checklist for up to 16 CBDs by the every end of the month.
- Compile all CBD reports on summary sheets provided; present to PHU in-charge or IRC field supervisor.
- Organize monthly meetings with CBDs and keep the minutes at PHU with the in-charge.
- Resupply CBDs with drugs from the PHU when appropriate or at least monthly.
- Cross-check drug inventory to drug register for every CBD supervised.
- Follow up and record all under-five deaths in the catchment area.
- Monitor the use of ITNs/LLINs by mothers and children under five in their catchments.
- Monitor the use of vitamin A supplements by children under five in their catchments.
- Follow up referrals done by CBDs in their catchments.

Specific tasks include:

- Develop monthly action plan and submit it to the CCM officer (and PHU in-charge, as appropriate).
- See under-five patients and keep up-to-date patient, drug, and death registers.
- Plan and conduct supervision visits with each CBD in the catchment area up to 16) every month.
- Complete supervision checklist during each supervision visit.
- Listen to and help identify problems CBD might be having.
- Develop and work with CBD to implement action plans following supervision visits where problems or opportunities are identified.
- Provide on-the-job training to CBDs as needed and appropriate.
- Help organize, and then participate in, the monthly CBD meeting.
- Collect CBDs' patient, drug, and death registers (from CBD or from PHU).
- Balance CBDs' drug registers.
- Check all patient, drug, and death registers for completeness, correctness, and consistency.
- Give CBD constructive feedback.
- Work with CBD (and others as necessary) to address problems identified.
- Get community feedback on CBDs (informally).
- Help get community support (moral and substantive) from community.
- Complete and submit Supervisor Compiled Monthly Report on time every month.
- Complete and submit CCM Health Facility Monthly Report on time every month.
- Store and submit CBD registers monthly.
- Review registers and reports with CCM Officer.
- Highlight issues based on supervision, stakeholder interaction, and checking registers.
- Check action plan monthly for things done and missed; create new action plan monthly.



MEMORANDUM OF UNDERSTANDING BETWEEN THE IRC COMMUNITY CASE MANAGEMENT PROGRAM AND COMMUNITY BASED PEER SUPERVISOR

The international Rescue committee's Community case management program started in 2006 in Kono district with particular emphasis on the child survival. The program aims at improving the health of children under five. To achieve the program objectives, IRC will employ three cross-cutting and inter-related strategies: At PHU facility, Community and household level; Use of data for decision making; Quality assurance through an integrated approach which specifically utilizes community involvement and participation in identifying and addressing community health needs.

Under the framework of child survival program, The community case management program will work with existing CBD structures to identify competent CBDs(hereafter referred to as CBD Supervisors) In partnership with PHU staff/DHMT in order to give full support to IRC field supervisors in meeting the objectives of the project.

The roles of International Rescue Committees and the Community based supervisors will be as follows:

The IRC Community case Management program is committed to:

1. Improving the quality and quantity of curative and preventative services such as home management of Malaria, diarrhea and pneumonia and vitamin A and Bed net coverage.
2. Building on local partners and working on simple interventions that bring measurable results. E.g. identification of competent supervisors from within the existing CBDs who can be trained to complement the work of IRC CCM field supervisors at PHU level.
3. Provide incentive of 100,000 Leones for each supervisor at the end of every month based on performance. IRC reserves the right to stop the incentive at any time.
4. Establish a joint supervision system between IRC, DHMT and CBD supervisors to monitor and upgrade skills and services provided by the CBDs at community level.

CBD Supervisor's Role:

- Liaise with community leaders to create more awareness of CCM activities in their catchment areas.
- Complete supervisory checklist for at most 16 CBDs every end of the month
- Compile all CBD reports on IRC summary sheet provided and present to PHU in charge/IRC field supervisor.
- Organize monthly meetings with CBDs and keep the minutes at PHU with the in charge
- Resupply of CBD drugs from the PHU when appropriate at least monthly.
- Cross check drug inventory to register for every CBD supervised.

- Follow up of all under five deaths in the catchment areas.
- Monitor the use of LLIN by mothers and children under five in their catchments.
- Monitor the use of vitamin A supplements by children under five in their catchments.
- Follow up referrals done by CBDs in their catchments.

The following signatures are a representation of all parties understanding of the Commitment to the aforementioned roles and responsibilities.

In signing below, each party confirms they have read and accepted the terms of this agreement.

 CBD Supervisor
 Coordinator

 IRC Field Supervisor

 IRC CCM

Date:

Date:

Date:

Approved by Field Coordinator

Date:.....



CBD ETHICS

RULES AND REGULATIONS FOR COMMUNITY-BASED DISTRIBUTORS

During our first training of the community distributors in the 10 pilot PHUs, we asked them to make some basic rules themselves. We did not want to appear to create regulations for them but for themselves to realize the importance of togetherness in their community service as volunteers in each one's village. We keep repeating to each training session. This is what they came up with.

Each community distributor should:

- Be committed to serving the people who selected them.
- Avoid use of alcohol during the time one is a community distributor.
- Not use the services to make friends and/or create enemies.
- Not ask for favors from the community e.g. property, sexual favors, etc.
- Not do beyond what is assigned.
- See and treat only children below 5yrs for Fever, Diarrhea and Pneumonia, referring the very sick children to the PHU.
- Avoid quarrelling or arguing with the mother.
- Be attentive to the needs of the community.
- Inform the villagers whenever he/she is traveling outside the village and for how many days.
- Never give medicine to a mother who comes to get medicine for a child remaining back home.

In case of any difficulties a community distributor is required to consult the supervisor (PHU in-charge, IRC/CS staff and or the DHMT) in their respective area. This will make a difference in the health status of our children and the community at large.

Thanks for your commitment.

Sierra Leone Community Case Management Program
From CBD to Peer Supervisor: A Five-Day Workshop
Client/Caregivers' Rights

Caregivers seeking care for their children have certain rights. Observing these rights will help ensure that they receive high-quality care from the CBD.

Caregivers, and by extension their children, have the right to:

- Respect
- Honesty
- Correct and clear information
- Appropriate medication free of charge
- Choice as to whether to accept medication and/or advice
- Privacy and confidentiality
- Encouragement

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Providing High-Quality CCM Services

Quality means being able to provide clients (in this case caregivers and their young children) with good services that they need. Sometimes CBDs can do this without all their needs being met, but it is much easier and happens much more consistently if CBDs have what they need to do their jobs well.

Client/Caregivers' Rights

Caregivers seeking care for their children have certain expectations or rights. Ensuring these rights are respected will help ensure that they receive high-quality care from the CBD.

Caregivers, and by extension their children, have the right to:

- Respect
- Honesty
- Correct and clear information
- Appropriate medication free of charge
- Choice as to whether to accept medication and/or advice
- Privacy and confidentiality
- Encouragement

CBD Needs

Quality CCM means being able to provide caregivers and their young children with good services that they need. Sometimes CBDs can do this without all their needs being met, but it is much easier and happens much more consistently if CBDs have what they need to do their jobs well.

- Clear job description
- Adequate training
- Consistent supply of medicines
- Basic supplies and materials such as storage box, spoon, jug, treatment protocols
- Constructive feedback
- Community support – moral if not material
- Clinic support such as provision of supplies and adequate attention to referred patients
- Information

A key role of CBD Peer Supervisors is helping ensure that CBDs' needs are met so that they can always provide quality care.