

Standard Methodology - 6-Month Contact Point

Step 1. Advocacy

- Hold advocacy meetings with the MOH and partners to gain support for the 6-month contact point. Use advocacy materials such as the Lives Saved Tool
 - Monitoring tools:
 - Participation of key stakeholders in advocacy meetings
 - Guideline changes as necessary to include 6 month contact point

Step 2. Preparation

- If child health cards will be revised to include a 6-month contact point, hold stakeholder review meetings to determine the design and content of health cards and what additional services the 6-month contact point will include
 - Monitoring tools:
 - Participation of key stakeholders in review meetings
 - Approval from key stakeholders on the card design and content
 - Distribution of completed card on schedule
- Design IEC materials
 - Using data from formative research, determine what type of IEC materials should be used and to whom materials should be targeted.
 - Develop materials with active participation of key stakeholders
 - Pre-test all IEC materials with the targeted population
 - Review pre-test results with key stakeholders and modify materials as necessary
 - Finalize IEC materials, print and distribute
- Develop and Implement trainings for health workers on the 6-month contact point
 - Determine how to best integrate the 6-month contact point training into the current training schedule for health workers, if applicable
 - Develop training materials
 - Develop training evaluation materials:
 - Reaction Tools: Standardized Action Plan and Training Quality
 - Learning Tools: Pre-Post test developed from training materials

- At the end of each training, participants should have completed a training quality assessment, finished both a pre and post tests for knowledge and have developed an action plan for how the training will be integrated into their work.

Step 3. Conduct Baseline Survey

- Prior to the introduction of the 6-month contact point activities, a baseline survey must be conducted.
- Review the '6107 baseline survey' for both caretakers of children age 9-12 months and for healthcare workers
- Modify the 6107 baseline survey to include country specific factors and messaging.

Indicators which should not be modified include:

- Age of first receipt of VAS
 - Age of first receipt of Measles vaccine
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- For Methodology of the 6107 baseline survey, please refer to the cluster selection handout. The EPI cluster sampling methodology has been selected for the baseline with a minimum of 30 clusters from the targeted region randomly selected, where the probability of a cluster being selected proportional to the population size. A minimum of 10 households with children 9-12 months will be selected to complete the baseline.

Step 4. Implement the 6-month contact point

- Distribute IEC materials and child health cards
- Implement the 6-month contact point for a minimum of 7 months before conducting the post-test
 - 7 months has been determined as the minimum length of time needed to be able to evaluate the success of the 6-month contact point

Step 5. Supportive Supervision

- Using the 6-month contact point training as a guide, develop a supportive supervision checklist to be used to determine if key tasks are implemented, and to reinforce information learned during the training.

- Determine how often supportive supervision will be implemented in each participating health facility. This will depend on the number of facilities, number of supervisors available, time needed to travel to each facility and budget.
- Develop a Supportive Supervision schedule in which the supervisor will visit each participating health facility. The supervisor should observe the health worker, use the checklist to evaluate the health worker's performance, provide on-site support for tasks not completed correctly and discuss with the health worker any difficulties they have experienced.

Step 6. Conduct Post-test

- After a minimum of 7 months, the 6107 end line survey should be conducted with caretakers of children age 9-12 months and to healthcare workers.
- The end line survey should use same form as the baseline survey. However, new questions can be added, if desired, to determine the effectiveness specific programs.
- For Methodology of the 6107 end line survey, please refer to the cluster selection handout. The EPI cluster sampling methodology has been selected for the baseline with a minimum of 30 clusters from the targeted region randomly selected, where the probability of a cluster being selected proportional to the population size. A minimum of 10 households with children 9-12 months will be selected to complete the baseline.