**Community health committee visit and community satisfaction checklist**

In order to confirm CBHFA implementation status, it is important to monitor key issues at the community level with the community health committee. The CBHFA branch coordinator[[1]](#footnote-1) can visit each community/village quarterly and conduct the review.

Check each area listed in the community health committee visit checklist. Fill in short comments for each area. After the review share the findings with the teams involved at the community level.

**Community satisfaction:**

Form small groups of 8 – 10 community members (women, men, youth and others as appropriate) and find out how they are feeling about project implementation. Use these questions to facilitate discussion:

1. Have you participated in CBHFA[[2]](#footnote-2) activities? If yes, which activity, if no why not.
2. How have you benefited from the activity?
3. How have you benefited by having volunteers in your community?
4. Are you satisfied by the overall program?
5. What more can be done to improve CBHFA implementation?

One copy of the report should be left with the volunteer team leader/community health committee and another can be placed in the branch CBHFA office.

**Community health committee visit and community satisfaction checklist**

*(To be administered quarterly by CBHFA Branch Coordinator)*

|  |  |  |
| --- | --- | --- |
| Branch name: |  |  |
| Name of community: |  |  |
| Supervisors: |  |  |
| Date of supervision: |  |  |
| Period covered: |  |  |

|  |  |  |
| --- | --- | --- |
| **Criteria** | **Categories** | **VHC Score** |
| 1. CBHFA plan of action | 0. Absent |  |
| 1. Present, last updated over 12 months |
| 2. Present, updated between 6-12 months |
| 3. Present, updated less than 6 months |
| 1. Implementation of prioritized/agreed activities in plan of action | 0. No Implementation |  |
| 1. <25% activities implemented |
| 2. 25-50% activities implemented |
| 3. 50-75% activities implemented |
| 4. >75% activities implemented |
| 1. Meetings on CBHFA | 0. No meetings in quarter |  |
| 1. 1 recorded meeting in quarter |
| 2. 2 recorded meetings in quarter |
| 3. 3 or more recorded meetings in quarter |
| 1. Status of community level monthly report    *3 monthly reports must be submitted for each quarter of supervision (reference)* | 0. None submitted |  |
| 0. Late submission – 1 report |
| 1. On-time submission – 1 report |
| 1. Late submission – 2 reports |
| 2. On-time submission – 2 reports |
| 2. Late submission – 3 reports |
| 3. On-time submission – 3 reports |
| 1. Coordination and/or linkages with other existing activities in the community | 0. No coordination and/or linkages |  |
| 1. Information sharing/meetings |
| 2. Action or joint activities |
| 1. Display of IEC materials and progress summaries on community sign boards | 0. None displayed |  |
| 1. Displayed not up-to-date |
| 2. Displayed and up-to-date |
| 1. Recruited community health volunteers[[3]](#footnote-3) | 0. No recruitment |  |
| 1. 1 per more than 40 households |
| 2. 1 per 20-40 households |
| 3. 1 per 20 households |
|  | Total Score |  |
| ***Performance*** | ***Score*** |
| *Good* | *≥14 (≥70%)* |
| *Average* | *8-13* |
| *Needs improvement* | *≤7* |

|  |
| --- |
| **Community Satisfaction**  Number of groups involved :\_\_\_\_\_\_\_\_\_\_\_\_ Number of people participating:\_\_\_\_\_\_\_\_\_  Participant[[4]](#footnote-4) details : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Findings from discussion:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  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**Report prepared and submitted by:**

1. Change as appropriate for the National Society [↑](#footnote-ref-1)
2. Use local name [↑](#footnote-ref-2)
3. Change categories as appropriate [↑](#footnote-ref-3)
4. Like women, men, youth etc. [↑](#footnote-ref-4)