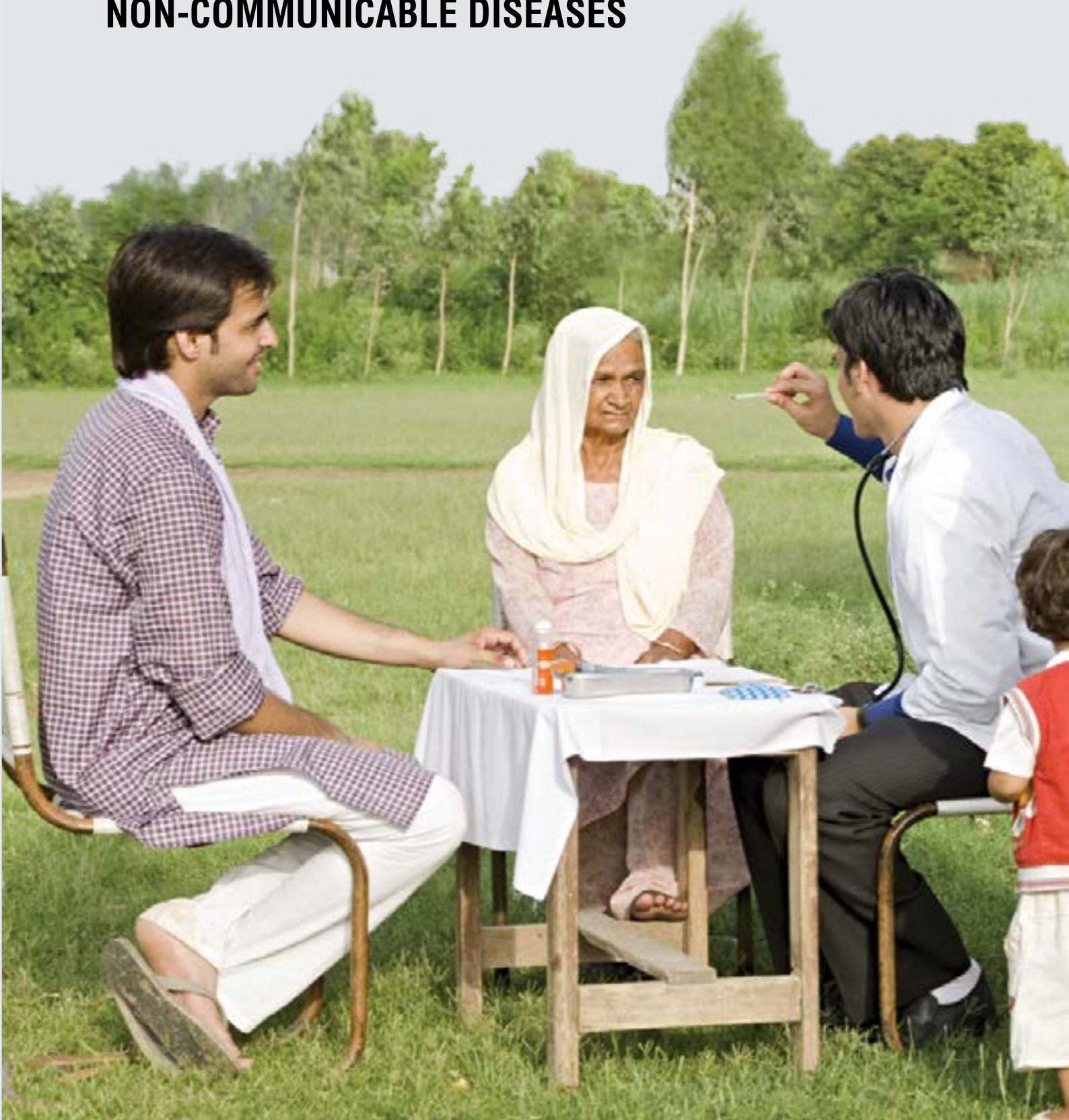


TRAINING ON PREVENTION AND MANAGEMENT OF NON-COMMUNICABLE DISEASES



Disclaimer:

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In case of reproduction of this manual or any part of this manual, Project HOPE should be duly acknowledged in written as "Designed & developed by Project HOPE-The People to People Health Foundation Inc." for HealthRise Project.

This package has been developed for capacity building of health care providers on diabetes and hypertension prevention and management.

Care has been taken to confirm the accuracy of the information presented to describe generally accepted practices. However, Project HOPE and the authors are not responsible for errors or omissions or for any consequences from the application of the information in this publication.

We would like to invite reader participation in our endeavour to improve this publication further. Please send in your feedback and comments to Project HOPE.

Contact Details:

Project HOPE – The People to People Health Foundation Inc.
K-40, Second Floor, Jangpura Extension, New Delhi-110014
Call: +91-11-43523008
Email: India.Info@projecthope.org

Designed by: Rouge Communications
rougecommunications@gmail.com | www.rougecommunications.org

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The manual provides tools and techniques to build the capacity of Master Trainers to train the medical officers on understanding of NCD prevention and management and effective communication to bring about a behaviour change that includes treatment adherence and regular follow-up.

We appreciate the time and wisdom contributed by the national and international experts to ensure the accuracy and relevance of the content in the manual. We are extremely thankful to Dr. Damodar Bachani, Deputy Commissioner (Non-Communicable Diseases), Ministry of Health & Family Welfare, Government of India, for his invaluable support in thoroughly reviewing the content of this manual in accordance with the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) guidelines.

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INTRODUCTION



This Facilitators' Manual is designed to train the trainers on non-communicable diseases (NCDs) such as diabetes and cardiovascular disease. The technical content of the Manual is adapted from the guidelines of Government of India's National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS).

As part of the Master Training of Trainers (MToT), this module has been designed to provide knowledge and skills to Master Trainers to train medical officers (MOs) on key technical NCD aspects like treatment protocols, complications management and medication as well as interpersonal communication (IPC) and counselling skills. This module will also help the Master Trainers in mentoring medical officers on site as the latter see patients, initiate treatment, prescribe tests and counsel the patients on treatment adherence and regular follow-ups (at the health facilities).

The Facilitators' Manual will function as a resource book for the Trainers to plan, design, monitor and conduct training for MOs.

Who Should Use the Manual?

The Facilitators' Manual has been designed for Master Trainers to train MOs on NCDs. The module emphasizes developing technical knowledge and facilitation skills in conducting sessions on NCDs through a participatory approach.

How to Use the Manual?

The Manual includes four sessions, divided over two days training and refresher

training sessions, with exercises ranging in duration from 20-60 minutes each.

Each session includes:

- Learning objectives
- A list of materials needed (including training aids, handouts and audio-visual content)
- Time allotted
- Key information with explanation of content
- Brainstorming session and case scenarios

Step by step instructions for conducting the course are presented along with the reference handouts and annexures.

Care has been taken to keep the content simple and focussed; the manual will be supported with interactive discussions and practice sessions wherever applicable.

The module has two parts:

Part I: Participants' Manual, for the participants to learn and advance their understanding about NCD management and principles of communication to facilitate behaviour change which includes treatment adherence and regular follow-up.

Part II: Facilitators' Manual, for the Master Trainer to conduct each session and to transfer facilitation skills to the participants so that they may effectively facilitate such trainings in future, while simultaneously enhancing their subject knowledge.

HealthRise MToT Course Agenda

| Topic | Objectives | Time |
|--|--|---------|
| DAY 1 : 8 hours | | |
| Session 1: Opening of MToT | | |
| <ul style="list-style-type: none"> Welcome the participants Opening and introductions Objectives of the MToT Two-day MToT schedule and introduction to NPCDCS Roles and responsibilities of participants of MToT Administer the pre-training evaluation | <ul style="list-style-type: none"> Introduce the participants Introduce training objectives, expectations, schedule and two day MToT Engage participants for complete participation Increase understanding of the responsibilities of participants of MToT | 1 hour |
| Session 2: Facilitation Skills | | |
| <ul style="list-style-type: none"> Facilitation skills Key steps for facilitating a training session Trainer's role Types of participants | <ul style="list-style-type: none"> Understand facilitation skills and steps for facilitating a training session Understand trainer's role Understand types of participants Understand training methods | 1 hour |
| Session 3: Introduction of Participants' Manual - Training Medical Officers on Prevention and Management of NCDs | | |
| <ul style="list-style-type: none"> Introducing the Manual Self-reading of the Manual by participants Discussing the layout of the Manual | <ul style="list-style-type: none"> Brief the trainees on the Participants' Manual | 1 hour |
| Session 4: Understanding Module 1- Understanding Non-Communicable Diseases | | |
| <ul style="list-style-type: none"> NCD status – Globally and in India NCDs – Risk factors Disease progression – health and illness ladder Current facts about NCDs MOs role under NPCDCS Demonstration of measurement of blood pressure, blood sugar and anthropometric measurements | <ul style="list-style-type: none"> Enhance the understanding of the assigned topics Develop facilitation skills to facilitate similar sessions | 2 hours |

| Topic | Objectives | Time |
|--|--|---------|
| Session 5: Understanding Module 2 - Know about Diabetes and Hypertension | | |
| <ul style="list-style-type: none"> • Introduction to diabetes • Introduction to hypertension • Complications of diabetes and hypertension – long-term and short-term complications • Pharmacotherapy for diabetes and hypertension • Treatment protocols for diabetes, hypertension and their complications • Promotion of self-monitoring | <ul style="list-style-type: none"> • Enhance the understanding of the assigned topics • Develop facilitation skills to facilitate similar sessions | 3 hours |
| DAY 2 : 6 hours | | |
| Session 6: Understanding Module 3 - Pillars for Prevention and Management of NCDs | | |
| <ul style="list-style-type: none"> • Recap of Module 1 & 2: Module 1 & 2 brainstorming exercise • Maintaining a healthy lifestyle - Do it for life! • Adhering to the treatment | <ul style="list-style-type: none"> • Enhance the understanding of the assigned topics • Develop facilitation skills to facilitate similar sessions | 2 hours |
| Session 7: Understanding Module 4 - Counselling is Key to Behaviour Change | | |
| <ul style="list-style-type: none"> • Effective communication • Barriers to healthy living • Barriers to effective communication and Hands-on communication skills • Role plays | <ul style="list-style-type: none"> • Enhance the understanding of the assigned topics • Develop facilitation skills to facilitate similar sessions | 3 hours |
| Session 8: Post-Training Evaluation, Feedback and Closing | | |
| <ul style="list-style-type: none"> • Post-test, feedback and closing | <ul style="list-style-type: none"> • Evaluate the effectiveness of MToT on the participants' knowledge and skills • Take training feedback • Close the training with a thank you note | 1 hour |

NOTE: All handouts are part of the Participants' Manual which can be used by the MOs as job aids and/or handy information leaflets in the field.

Objectives of the Training

By the end of the training, participants will learn:

- Facilitation skills
- Skills to train MOs
- Advising the community on the importance of early and regular screening
- Advising the community on the adoption of healthy lifestyle
- Communicating the importance of early screening to the community
- Assisting the community to overcome barriers, myths and misconceptions
- Initiating timely action for confirmatory diagnosis and appropriate treatment
- Following and adhering to the standard treatment protocols
- Making timely referrals of complicated cases for speciality care (higher healthcare centres)
- Assisting the community to adhere to the treatment and regular follow-up
- Effectively using communication materials for better communication about treatment adherence and regular follow-up
- Glossy paper and chart papers
- Markers (1 box black + 1 box colour)
- Participants' registration forms (1 per day)
- Flash cards
- Props like food items, sticks, bowls, etc. for live demonstration sessions.
- Glucometer set and blood pressure measuring machine, stadiometer and measuring tape for practice sessions

Training Method

The training methodology is based on adult learning principles. The methods used in this module are: Brainstorming, Lecture, Group Discussion, Role Plays, Case Studies, Structured Exercises.

Training Materials Required

- Participants' Manual and related handouts
- Facilitators' Manual and related annexures
- Stationery
- Flip charts (50 pages) and flip chart stands

Evaluation of Training

Pre and post knowledge evaluation to evaluate the two-day MToT, will be conducted by asking the participants to fill up a small objective type questionnaire before and at the end of the training. This exercise will help in evaluating the effectiveness of the training by measuring the improvement in knowledge and identifying topics that needs revision and strengthening during refresher trainings. This exercise will help in making the trainings more effective. Training feedback will be conducted at the end of the 2 days training.

Post-Training Follow-up

The project team should plan refresher training and impact assessment at the community level after 3 months of main MToT training.

Responsibilities of the Participants After Receiving the Training

The participants should be able to conduct the training on prevention and management of NCDs by using the steps learnt during the 2 days MToT and be able to use the training materials (handouts, etc.) related to the topics and sub-topics. The Master Trainer should play the role of a good trainer and motivator and will be responsible for managing the MO training with support from other staff and officials.

The one day MO training agenda to be followed for conducting MO training on

prevention and management of NCDs is given below:

| MOs ONE DAY TRAINING AGENDA | | |
|--|---|----------------------|
| Topic | Objectives | Time |
| DAY 1 : 8 hours | | |
| Session 1: Introduction and Objectives | | |
| <ul style="list-style-type: none"> Welcome participants Opening and introduction Objectives of the training One day training schedule Administer the pre training questionnaire | <ul style="list-style-type: none"> Introduce the participants Introduce training objectives, expectations, schedule and training agenda Engage participants for complete participation | 30 minutes |
| Session 2: Understanding Non-Communicable Diseases | | |
| <ul style="list-style-type: none"> NCD status - Globally and in India NCDs risk factors Disease progression - Health and illness ladder Current facts about NCDs MOs role under NPCDCS Demonstration of measurement of blood pressure, blood sugar, and anthropometric measurements | <p>At the end of this session, the participants will be able to:</p> <ul style="list-style-type: none"> State the burden of NCDs and their risk factors Explain how NCDs progress Understand preventive measures to reduce the risk of NCDs Communicate the importance of timely screening Understand their role in implementing NPCDCS guidelines Have hands-on experience in blood sugar monitoring using glucometer, hypertension monitoring using digital BP instrument and calculating anthropometric values like body mass index (BMI), waist circumference of patients | 1 hour 30 minutes |
| Session 3: Know about Diabetes and Hypertension | | |
| <ul style="list-style-type: none"> Introduction to diabetes Introduction to hypertension Complications of diabetes and hypertension – long term and short term complications Pharmacotherapy for diabetes and hypertension Treatment protocols for diabetes, hypertension and their complications Promotion of self-monitoring | <p>At the end of this session, the participants will be able to:</p> <ul style="list-style-type: none"> Know the types of diabetes, its symptoms and diagnostic criteria Know what is hypertension - its stages, symptoms and diagnostic criteria Understand long and short term complications of diabetes and hypertension Know how to treat a patient with diabetes/hypertension, with or without complications Promote self-monitoring | 1 hour 30 minutes |

| Topic | Objectives | Time |
|--|--|------------|
| Session 4: Pillars for Prevention and Management of NCDs | | |
| <ul style="list-style-type: none"> Maintaining a healthy lifestyle - Do it for life! Adhering to the treatment | <p>At the end of the session, the participants will be able to:</p> <ul style="list-style-type: none"> Understand the importance of managing lifestyle through: <ul style="list-style-type: none"> Healthy eating Staying physically active Staying stress free Quitting alcohol and tobacco Gain clarity on importance of treatment compliance; associated barriers and how to improve quality of life by preventing complications | 2 hours |
| Session 5: Counselling is Key to Behaviour Change | | |
| <ul style="list-style-type: none"> Effective communication Barriers to healthy living Barriers to effective communication and hands-on communication skills Role plays | <p>At the end of the session, the participants will have an understanding on:</p> <ul style="list-style-type: none"> Effective communication/counselling skills to bring positive behaviour change in patients based on ORPA (Observe, Reflect, Personalize & Act) technique Tackling barriers to adopting healthy living Addressing common myths and facts on NCDs | 2 hours |
| Session 6: Post-Training Evaluation, Feedback and Closing | | |
| Post-test, feedback and closing | <ul style="list-style-type: none"> Evaluate the effect of MToT on participant's knowledge and skills Take training feedback Close the training with a thank you note | 30 minutes |



DAY





SESSION – 01

Opening of MToT

Objectives:

- Fully engage each participant
- Introduce the participants
- Introduce training objectives, expectations, schedule and two-day MToT approach
- Increase understanding of the responsibilities of the participants of MToT

 **1 HOUR**



- Welcome Participants
- Opening and Introduction
- Objectives of the MToT
- Two-Day MToT Schedule - About NPCDCS
- Roles and Responsibilities of Participants of MToT
- Administering MToT Pre Training Evaluation



5 minutes

WELCOME PARTICIPANTS

Steps for conducting the activity:

Greet the participants and introduce yourself to them.



20 minutes

OPENING AND INTRODUCTION

Materials: 1 Paper ball - Crush 2-3 waste papers to make a ball


Play an ice-breaker introduction activity, which will help make the group more comfortable with one another as well as with you.

Steps for conducting the activity:

Say –

1. We will now play a game which will help me to know you better and vice versa.
2. Let's play the ball game.
3. I have this paper ball which I am going to pass to any one of you.
4. Whoever catches it has to stand up, say your name and say 5 things about yourself to the group that the rest do not know, which could be personal or professional. Then you must share your expectations from this training session. You must then tell the group that if you were not an MO, what would you be?
5. You must then throw the paper ball to another participant, with your eyes closed.
6. We shall repeat the process till we have covered all the participants.
7. Please feel free to throw the paper ball to me as well. I shall be more than happy to participate.
8. Let's start the game.


Facilitator Notes: When participants talk about what they wish they could be, apart from being an MO, explain to them how they are still playing the role of what they wanted to be in their current profession. For example, if a participant says, 'I wanted to be a teacher', you can try and relate it with their current role, and how they would also be teaching and training other health professionals.

 5 minutes

OBJECTIVES OF THE MToT

Materials: **Facilitators' Manual - Introduction-Objectives of the Training**


Walk the participants through the objectives of the MToT. Refer to *Facilitators' Manual - Introduction* for objectives of the training.

 10 minutes

TWO-DAY MToT SCHEDULE - ABOUT NPCDCS


Materials: **Participants' Manual – Handout 2**

- Walk the participants through the objectives of the MToT. Refer to the *Facilitators' Manual/Participants' Manual – Introduction*.
- Walk the participants through the two-day MToT agenda. Refer to *HealthRise MToT agenda given in the Facilitators' Manual Introduction. How to use the Manual*.
- Discuss NPCDCS. Refer to *Handout 2 of the Participants' Manual*.

 5 minutes

ROLES AND RESPONSIBILITIES OF THE PARTICIPANTS OF MToT

Discuss the importance of the MToT and the roles and responsibilities of the participants of MToT. Refer to *Facilitators' Manual-Introduction for responsibilities of participants after receiving training*.

 15 minutes

ADMINISTERING MToT PRE TRAINING EVALUATION

Materials: **Annexure 1A- Pre and Post Assessment Questionnaire print copies**

Distribute the training pre-assessment questionnaire amongst the participants. Give them 15 minutes to complete the assessment and submit the forms.



SESSION – 02

Facilitation Skills

Objectives:

- **Understand facilitation skills and steps for facilitating a training session**
- **Understand the trainer's role**
- **Understand types of participants**
- **Understand training methods**

 **1 HOUR**



- Facilitation Skills'
- Key Steps for Facilitating a Training Session
- Trainer's Role
- Types of Participants



15 minutes

FACILITATION SKILLS'

Steps for conducting the activity:

1. Ask the participants
 - What do they understand by the term facilitation skills?
 - What are the roles of a facilitator?
 - How do you think that you can improve your own facilitation skills?
2. Discuss key methods used in this training and ask the participants to read more on training methodologies.

Facilitator Notes: Use the following lists to explain facilitation skills and how to improve these skills.

Key Facilitation Skills

- Face the audience when speaking
- Make eye contact with the participants
- Approach the participants to get their attention and solicit response
- Ask open-ended questions
- Ask questions that will encourage the participants to reflect on their problems
- Encourage and motivate the participants
- Keep discussions to the point
- Listen (not hear) to what the participants say
- Allow the participants time to think and digest the information

Improving Facilitation Skills

- Listen to the main point of the message
- Never make a mistake of rejecting the message outright
- Understand the message but do not judge it
- Look for hidden messages



15 minutes

KEY STEPS FOR FACILITATING A TRAINING SESSION

Materials: Flip Chart and Marker

Steps for conducting the activity:

1. Begin the session by mentioning the session topic.
2. Explain the objectives of the session by showing a flip chart which has the objectives listed on it.
3. Ask the participants to come up with what they think are key steps for facilitating a training session and discuss the steps.
4. Prepare a list of session steps in logical order at the end of the discussion.
5. Summarize the collated points on a flip chart and compare these with the following recommended steps:
 - Clearly mention the topic of your session
 - Mention the objectives of the session
 - Mention how long the session will be
 - Link your topic with the previous session
 - Follow the session plan accurately and completely – using the Facilitators' Manual
 - Do not learn the session by heart; follow the Manual but talk in your own style
 - Emphasize important and key points and do not leave out any important points
 - Do not introduce too much extra material, but give a few local examples to aid comprehension
 - Try to avoid repetition unless really useful
 - If you find it necessary to read from the Manual, look at the audience occasionally
 - Summarize session learning at the end of the session



10 minutes

TRAINER'S ROLE

Materials: Flip Chart and Marker

Steps for conducting the activity:

1. Probe the participants on the roles a trainer needs to play to conduct a training effectively. Write down all the answers on a flip chart, categorized under the following headings: Before Training, During Training and After Training.
2. Explain the primary roles of a trainer:
 - Ask questions that will encourage the participants to reflect on their problems
 - Encourage the participants by all means
 - Keep the discussion to the point
 - Guide the situation without dominating
 - Listen (not hear) to what the participants say
 - Allow the participants time to think, digest the information and make decisions



5 minutes

TYPES OF PARTICIPANTS

Materials: Flip Chart and Marker

Steps for conducting the activity:

1. Brainstorm on the types of participants the trainees have come across during the training.
2. Refer to the types of participants given below and explain how to deal with each type to create a learning environment in the class:
 - Overly Talkative
 - The Know-it-all
 - Side Conversationalist
 - Silent (Shy)
 - Argumentative
 - Complainer



15 minutes

TRAINING METHODS

Materials: **Flip Chart and Marker**

Steps for conducting the activity:

1. Highlight the training activities, teaching methods and aids.
2. Write down the main points raised during the discussion.
3. Brief the group on why those training methods were used by *referring to the information given below on training methods*.
4. *Ask: Why is it important to practice? What should we focus on while practicing this module in MToT?*
5. Write down the answers on a flip chart.

Training Methods

i. Brainstorming

Brainstorming allows exercising trainees brains to find out best possible ideas that can later be summarized by the trainer. In this method:

- Give the participants a topic or a question.
- Ask them to think about as many items related to the topic or question as they can.
- Write down all their responses (there is no such thing as a wrong answer).
- Guide the participants to determine the best ideas presented.

Pros: The ideas are not criticized or rejected during a brainstorming session, interesting ideas can be refined gradually. While brainstorming the trainees build their solutions on the ideas of others, “think them up” and improve them.

Cons: Group thinking can sometimes fall heavy on individual ideas. The sessions at times can be time consuming.

ii. Case study

A case study is a description of a real or imagined situation which contains information that trainees can use to analyze what has occurred and why. The trainees recommend solutions based on the content provided.

Pros: A case study can present a real-life situation which lets trainees consider what they would do. It can present a wide variety of scenarios where application of knowledge is important.

Cons: Cases can be difficult to write and time-consuming to discuss. The trainer must be creative and very skilled at leading discussions, making points and keeping trainees on track.

iii. Demonstration

Demonstration is very effective for basic skills training. The trainer shows trainees how to perform a task and may provide an opportunity for trainees to perform the task being demonstrated.

Pros: This method emphasizes trainee involvement. It engages several senses: seeing, hearing, feeling, touching.

Cons: It requires a great deal of trainer preparation and planning. There also needs to be adequate space for the training to take place. If the trainer is not skilled in the task being demonstrated, this could adversely impact the learning process.

Ask the participants to practice a new skill by showing what they have learned to the rest of the group. Such demonstrations allow learners to 'try out' new learning.

iv. Role Play

Role play is a simulation in which each participant is given a role to play. The trainees are given basic information on description of the role, concerns, objectives, responsibilities, emotions, etc. A general description of the situation and the hypothetical problem that each one of them faces is also provided. Once the participants read their role descriptions, they act out their roles by interacting with one another.

Pros: Trainees can learn possible results of certain behaviours in a classroom situation. They get an opportunity to practice people skills. It is possible to experiment with many different approaches to a situation without alienating any actual customers.

Cons: A lot of time is spent making a single point. Trainers must be skilled and creative in helping the class learn from the situation. In some role play situations, only a few people get to practice while others watch.

v. Storytelling

Narrate a story. Use the story as a way to open a discussion, engage the participants, share experiences, pose and/or solve problems and aid in understanding.

Pros: This being an interesting method allows trainees to stay attentive and retain the information well.

Cons: This method might call for a prior preparation by the trainer to carefully knit the story ensuring inclusion of all the important information that needs to be conveyed

vi. Lecture

A lecture is the method learners most often commonly associate with college and secondary education. Yet, it is also considered one of the least effective methods to use for adult learners. In this method, one person (the trainer) does all the talking. S/he may use handouts, visual aids, question/answer or posters to support the lecture. Communication is primarily one-way: from the instructor to the learner.

Pros: Less time is needed for the trainer to prepare a lecture than other methods. It provides a lot of information quickly when it is less important that the trainees retain a lot of details.

Cons: Does not actively involve the trainees in the training process and the trainees tend not to retain complete information if presented orally.

vii. Small group discussion

The small group discussion technique allows all the participants to express their opinions, discuss the problem in a more convenient and comfortable setting and helps the participants to communicate more openly with each other.

Pros: Trainees can brainstorm together to find collective feasible field solutions. This method allows trainees to become more comfortable with each other and openly discuss their opinions.

Cons: All trainees might not participate in the discussion and rely only on the talkative or proactive ones.

Facilitator Notes:

At the end of the session, discuss the following questions:

1. What are facilitation skills?
2. What are the steps one should follow to conduct a session?
3. What is a trainer's role in a participatory training?
4. What are the different types of participants?
5. What are the techniques used to handle each participant type?
6. What training methods can be used for training MOs?



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SESSION – 03

Introduction of Participants' Manual - Training Medical Officers on Prevention and Management of NCDs

Objectives:

- **Brief the trainees on the
Participants' Manual**

 **1 HOUR**



- Introducing the Participants' Manual
- Self-Reading of Modules by the Participants
- Discussing the Layout of the Participants' Manual



10 minutes

INTRODUCING THE PARTICIPANTS' MANUAL - TRAINING MEDICAL OFFICERS ON PREVENTION AND MANAGEMENT OF NON-COMMUNICABLE DISEASES

Materials: Copies of Participants' Manual - Training Medical Officers on
Prevention and Management of Non-Communicable Diseases

Steps for conducting the activity:

1. Give each trainee a copy of the Participants' Manual.
2. Introduce main components of the Manual and lead a discussion so that the participants can understand the Manual.
3. Elicit and answer questions.



30 minutes

SELF-READING OF MODULE BY THE PARTICIPANTS

Steps for conducting the activity:

Ask the participants to read the headings and topics of the *Participants' Manual – Table of contents and modules*.



20 minutes

DISCUSSING THE LAYOUT OF THE PARTICIPANTS' MANUAL

Steps for conducting the activity:

1. Discuss the layout, topics and headings of the Participants' Manual. Answer any questions the participants might have. *Refer to the Participants' Manual- Introduction- How to use the Manual?*

Facilitator Notes:

At the end of the session, discuss the following questions:

1. How many modules does the Participants' Manual consist of? What are the module headings?





SESSION – 04

Understanding Module 1- Understanding Non- Communicable Diseases

Objectives:

- Enhance the understanding of the assigned topics
- Develop facilitation skills to facilitate sessions

 **2 HOURS**



- NCD Status - Globally and in India
- NCD Risk Factors
- Disease Progression - Health and Illness ladder
- Current Facts about NCDs
- MOs Role under NPCDCS
- Demonstration of Measurement of Blood Pressure, Blood Sugar and Anthropometric Measurements



20 minutes

1. NCD STATUS-GLOBALLY AND IN INDIA

Materials: **Participants' Manual-Handout 1**

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the *Participants' Manual-Handout 1*.
2. Ask the participants to go through the Handout and initiate discussion around it.
3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.




20 minutes

2. NCD RISK FACTORS

Materials: **Participants' Manual-Handout 3**

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the *Participants' Manual-Handout 3*.
2. Ask the participants to go through the Handout and initiate discussion around it.
3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.

 20 minutes

3. DISEASE PROGRESSION- HEALTH AND ILLNESS LADDER

Materials: **Participants' Manual-Handout 4**

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the *Participants' Manual-Handout 4*.
2. Ask the participants to go through the Handout and initiate discussion around it.
3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.

 10 minutes

4. CURRENT FACTS ABOUT NCDS

Materials: **Participants' Manual-Handout 5**

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the *Participants' Manual-Handout 5*.
2. Ask the participants to go through the Handout and initiate discussion around it.
3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.

 10 minutes

5. MOs ROLE UNDER NPCDCS

Materials: **Participants' Manual-Handout 6**

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the *Participants' Manual-Handout 6*.
2. Ask the participants to go through the Handout and initiate discussion around it.

3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.



40 minutes

6. DEMONSTRATION OF MEASUREMENT OF BLOOD PRESSURE, BLOOD SUGAR AND ANTHROPOMETRIC MEASUREMENTS

Materials:

- **Participants' Manual-Handout 7**
- **Glucometer kit - Glucometer, lancet, lancet device and alcohol swab (4)**
- **Automated BP apparatus (4)**
- **Measuring tape - 4**
- **Weighing scale - 4**
- **Stadiometer - 4**

Steps for conducting the activity:

1. Divide the participants into 4 groups.
2. Ask each group to practice measuring blood glucose using glucometer, taking blood pressure using BP apparatus and anthropometric measurements which include body mass index and waist circumference.

Refer to the Participants' Manual-Handout 7 to conduct this activity.

Facilitator Notes:

At the end of the session, discuss the following questions:

1. How is prevention key to healthy living?
2. How can diabetes and hypertension be prevented?

स्वास्थ्य उप केंद्र
दुबलिया, कोंक रीछी।

प्रत्येक बुधवार को
(आई० यू०
कोषर-तमाये)

प्रत्येक सोमवार को
गर्भवती माता का
इन्फेक्शन जांच किया जाता है।





SESSION – 05

Understanding Module 2- Know about Diabetes and Hypertension


Objectives:

- **Enhance the understanding of the assigned topics**
- **Develop facilitation skills to facilitate sessions**

 **3 HOURS**



1. Introduction to Diabetes
 - What is Diabetes?
 - Types of Diabetes
 - Symptoms of Diabetes (Khatre ki ghanti!)
 - Diagnosing Diabetes (*Kaise chalega pata?*)
2. Introduction to Hypertension
 - Blood Pressure, High Blood Pressure – Stages, Symptoms & Diagnosis of Hypertension
3. Complications of Diabetes and Hypertension – Long-Term and Short-Term Complications
 - Long-Term Complications
 - Short-Term Complications
 - Low Blood Sugar – Hypoglycaemia
4. Pharmacotherapy for Diabetes and Hypertension
 - Understanding of Oral Anti Diabetes Agents (OAs) used in Diabetes
 - Insulin and Types of Insulin
 - Medicine for Hypertension
 - Medicine for Dyslipidaemia
5. Treatment Protocols for Diabetes, Hypertension and Related Complications
 - Opportunistic Screening Protocol
 - Hypertension Treatment Protocol
 - Cardiovascular Diseases Treatment Protocol
 - Diabetes Mellitus Treatment Protocol
 - Management of Diabetes Complications
6. Promotion of Self-Monitoring


 20 minutes

1. INTRODUCTION TO DIABETES

Materials: Participants' Manual-Handouts 8 to 11

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the Participants' Manual-Handouts 8 to 11.
2. Ask the participants to go through the Handout and initiate discussion around it.
3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.

 20 minutes

2. INTRODUCTION TO HYPERTENSION

Materials: Participants' Manual-Handout 12

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the Participants' Manual-Handout 12.
2. Ask the participants to go through the Handout and initiate discussion around it.
3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.

 40 minutes

3. COMPLICATIONS OF DIABETES AND HYPERTENSION- LONG-TERM AND SHORT TERM COMPLICATIONS

Materials:

- Participants' Manual-Handouts 13 to 15
- Flashcards on Retinopathy (FC-1) and Nephropathy Stages (FC-2) (5 each)

Steps for conducting the activity:

1. Walk the participants through the Participants' Manual-Handout 13 for understanding the long-term complications.

2. Use flash cards to reinforce understanding on retinopathy and nephropathy stages:
 - a. Divide the participants into 5 groups.
 - b. Distribute one flashcard each on retinopathy to each of the groups.
 - c. Ask the participants to read their respective flashcards.
 - d. After 10 minutes, ask the groups to present their stage of retinopathy using the flashcard.
 - e. Once all groups have presented the stages allotted to them, summarize the five stages using the details in the flashcards.
3. Facilitate a similar flash card activity on nephropathy.
4. Walk the participants through the *Participants' Manual-Handouts 14 and 15* for enhancing their understanding on short term complications of diabetes.



40 minutes

4. PHARMACOTHERAPY FOR DIABETES AND HYPERTENSION

Materials:

- **Participants' Manual-Handouts 16 to 19**
- **Flashcards on Anti-Diabetes Agents (FC-3)- 7 cards**

Steps for conducting the activity:

1. Refer to the Participants' Manual-Handout 16 for walking the participants through anti-diabetes agents.
2. Play a flashcard activity to enhance the understanding of the participants on anti-diabetes agents:
 - a. Divide the participants into 7 groups.
 - b. Distribute one flashcard to each group.
 - c. Ask the groups to go through their respective cards.
 - d. After 10 minutes, ask each group to present their class of anti-diabetes agent.
 - e. Once all the groups have presented their cards, summarize the session.
3. Walk the participants through the *Participants' Manual-Handouts 17 to 19* to brief them on insulin, hypertension and dyslipidaemia medicines.



50 minutes

5. TREATMENT PROTOCOLS FOR DIABETES, HYPERTENSION AND RELATED COMPLICATIONS

Materials:

Participants' Manual-Handouts 20 to 24

Steps for conducting the activity:

1. Walk the participants through the topic by referring to Participants' Manual-Handouts 20 to 24.

2. Ask the participants to go through the Handout and initiate discussion around it.
3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.



10 minutes

6. PROMOTION OF SELF-MONITORING

Materials: Participants' Manual-Handout 25

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the Participants' Manual-Handout 25.
2. Ask the participants to go through the Handout and initiate discussion around it.
3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.

Facilitator Notes:

At the end of the session, discuss the following questions:

- List the tips for foot care for diabetics
- Name the most important stage of nephropathy and explain its significance
- State the Rule of 15 for treating hypoglycaemia
- Which oral anti-diabetes agent is associated with hypoglycaemia?
- What are the different types of insulin?

Ask the participants to come prepared for Day 2's live Food Pyramid Activity.

Preparation for Day 2

For Food Pyramid Activity:

Divide the participants into five groups. Each group shall bring small quantities of the required food items:

- **Group 1:** Fruits and Vegetables
- **Group 2:** Cereals like wheat flour, *dalia*, *suji*, brown and/or white bread, biscuits, *idli*, rice, corn (based on availability)
- **Group 3:** Proteins like *dals*, eggs, curd, milk, cottage cheese (as per availability)
- **Group 4:** Oils and Nuts like *desi ghee*, *vanaspati*, butter, refined oil, almonds, walnuts, *pista* (as per availability)
- **Group 5:** Sweets and savoury foods like chips, pickles, sweets such as *gulab jamun*, *malpua* and *laddoo*, *namkeens*, *papads*, etc. (as per availability)

DAY





SESSION – 06

Understanding Module 3- Pillars for Prevention and Management of NCDs

Objectives:

- Enhance the understanding of the assigned topics
- Develop facilitation skills to facilitate sessions

 **2 HOURS**



1. Recap of Modules 1 & 2
2. Maintaining a Healthy Lifestyle-Do It for Life!
 - Eating Healthy
 - Dietary Recommendations for People with Hypertension and Diabetes
 - Healthy Eating Pyramid
 - Plate Method
 - Learn Estimation of Portion Size With Your Hands
 - Simple Tips and Sample Diet Plan
 - Being Physically Active in Day-to-Day Life
 - General Physical Activity Pyramid
 - Staying Stress Free - Just relax! (The best and most efficient pharmacy is within your own system!)
 - Say No to Alcohol - Yes to Life!
 - Say No to Tobacco - Yes to Life!
3. Adhering to the Treatment
 - Challenges to Adherence – Work Out Simple Solutions with Patients
 - Advice for Better Quality Life - Adhere to Treatment Advice!



20 minutes

1. WELCOME AND RECAP OF MODULES 1 & 2

Materials: Participants' Manual-Modules 1 and 2 Brainstorming Exercise

Steps for conducting the activity:

1. Welcome participants to Day 2 of the training.
2. Facilitate a quick recap of Day 1 by asking the participants to answer the questions in the *Participants' Manual Modules 1 and 2 Brainstorming Exercise*.
3. Divide the participants into 5 groups.
4. Each group can answer a question as their turn comes; repeat this cycle till all the questions are answered.
5. Ask the participants if they have any doubts regarding the given questions and answer their queries.



1 hour

2. MAINTAINING A HEALTHY LIFESTYLE-DO IT FOR LIFE!

Materials:

- **Participants' Manual-Handouts 26 to 36**
- **Food items for Food Pyramid Activity**
- **Chalk**

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the *Participants' Manual-Handouts 26 to 36*.
2. Refer to *Participants' Manual-Handout 28* for conducting the *Live Food Pyramid Demonstration* activity.
3. Ask the participants to get into the five groups formed at the end of Day 1 for this activity.
4. Ask the five groups to stand in a circle.
5. Draw a pyramid with chalk.
6. Ask group 1 to place all the food items they have got at the base of the pyramid followed by groups 2, 3, 4 and 5 as explained in Handout 28 of the *Participants' Manual*.
7. Once all the groups have placed their respective food items, explain to them why a particular food item has been placed in a particular area of the pyramid. Refer to the information below on Food Pyramid for further explanations:
 - **Fruits and vegetables (Group 1)** - form the basis of healthy diet since they provide a lot of fibre and micro-nutrients which are essential for controlling blood glucose and blood pressure.
 - **Cereals (Group 2)** - Unpolished cereals and cereals with skin are rich in fibre and hence help in controlling weight and blood glucose. Consuming refined cereals is harmful since they do not have fibre which makes them readily available to the body to produce enough glucose at a faster rate, thus, increasing blood glucose levels.
 - **Proteins (Group 3)** - Whole pulses are preferred since they have more fibre. Proteins are essential for the body since they help in building and repairing the body but they should be consumed in moderation. Avoid red meat and whole milk and whole milk products since these are high in fat and can contribute to weight gain and cardiovascular problems.
 - **Fats, oils and nuts (Group 4)** - should be consumed in less quantity. Oils which are liquid at room temperature should be preferred over saturated fats (solid at room temperature like *ghee*, butter, *vanaspati*, etc.). Nuts like almonds and walnuts do have good fats but should be taken in moderation.
 - **Anything which has excess of sugar, salt and fat (Group 5)** - Try to have these food items sparingly (once in 15 days or a month in less quantity). If consumed frequently, these can lead to diabetes and high blood pressure.



40 minutes

3. TREATMENT ADHERENCE

Materials:

- **Participants' Manual-Handouts 37 & 38**
- **A4 size coloured pastel sheets (8-10)**
- **Whiteboard and Marker**

Steps for conducting the activity:

Emphasize the importance of identifying the barriers/challenges faced by the community against treatment adherence and self-care. Effective treatment outcome can be achieved only after treatment adherence and self-care barrier identification and working out the alternates to overcome them. *Refer to the Participants' Manual-Handouts 37 and 38 for more information.*

Say

1. You must have come across a number of barriers that stop people from acting in the right direction even after being advised.
2. Please form five groups.
3. Each group will pick up one pastel sheet from the table and take five minutes to list the barriers related to treatment adherence and self-care on the sheet.
4. Next, we will discuss these barriers in details.
5. Once all the barriers are identified, ask a representative from group 1 to present the barriers they have written.
6. Write these barriers on the whiteboard and ask the participants to mark them as 'modifiable' and 'non-modifiable' at their level.
7. Once this activity is repeated with all the five groups, try to probe solutions from the groups on the modifiable and alternates to the non-modifiable barriers.
8. Summarize the session and make necessary additions based on the information collected from the participants.
9. Summarize the points given under the Participants' Manual-Handout 38 for aiding in treatment adherence as an MO.

Facilitator Notes:

At the end of the session, discuss the following questions:

- How can one eat healthy?
- How can one stay stress free?
- How can an MO aid in treatment adherence and self-care?





SESSION – 07

Understanding Module 4- Counselling is Key to Behaviour Change

Objectives:

- Enhance the understanding of the assigned topics
- Develop facilitation skills to facilitate sessions

 **3 HOURS**



1. Effective Communication
 - Effective Communication
 - WATER Approach (adapted from tips from Dr. Sanjay Kalra, Bharti Hospital, Karnal, Haryana)
 - ORPA (Observe, Reflect, Personalize & Act)
2. Barriers to Healthy Living
3. Barriers to Effective Communication and Hands-on Communication Skills
4. Role Plays



30 minutes

1. SKILFUL COMMUNICATION

Materials: Participants' Manual-Handouts 39 to 41

Steps for conducting the activity:

1. Walk the participants through the topic by referring to the *Participants' Manual-Handouts 39 to 41*.
2. Ask the participants to go through the Handout and initiate discussion around it.
3. Ask participants for any queries, insights on the topic. Clarify their doubts.
4. Summarize key highlights before moving on to the next session.



20 minutes

2. BARRIERS TO HEALTHY LIVING

Ask the participants to discuss the common myths around diabetes and hypertension they come across in their day-to-day lives and how to address these with the community. You can add on to the list of common myths and ways to address the same.



20 minutes

3. BARRIERS TO EFFECTIVE COMMUNICATION AND HANDS-ON COMMUNICATION SKILLS

Materials: A4 sheets (8-10)

Steps for conducting the activity:

1. Divide the participants into 5 groups.
2. Ask each group to take 5 minutes and write down 3 barriers to effective communication.
3. After 5 minutes, collect the slips from them and read out the compilation of barriers.
4. Discuss each barrier and ask the participants to come up with solutions.



1 hour 50 minutes

4. ROLE PLAYS

Materials: Participants' Manual-Module 4 Brainstorming Exercise**Steps for conducting the activity:**

1. Refer to the case studies (Q2, 3 & 4) given in the Participants' Manual - Module 4 Brainstorming Exercise.
2. Divide the participants into 3 groups.
3. Allot a case study (Q2, 3 & 4) to each group.
4. Ask the groups to discuss and prepare themselves for a role play for the next 15 minutes.
5. Once all the groups are ready, ask members from each group to enact the case study allotted to them, giving appropriate solutions to the problems.
6. Refer to the hints given in Annexure-Module 4 Brainstorming Exercise Answers to direct the role plays.
7. Ask the participants to give constructive feedback once the role plays are over.
8. Share your own feedback and summarize the session.

Facilitator Notes:

At the end of the session, discuss the following questions:

- What are the key elements of counselling?
- What is ORPA?
- When to use ORPA and how?



SESSION – 08

Post Training Evaluation, Feedback and Closing

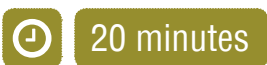
Objectives:

- Evaluate the effect of MToT on the participants' knowledge and skills
- Take training feedback
- Closing the training

 **1 HOUR**



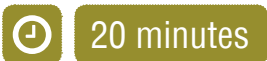
1. Administering MToT Post-Assessment
2. Feedback
2. Closing the training



1. ADMINISTERING MToT POST-TRAINING EVALUATION

Materials: **Annexure 1A – Pre-Post Assessment Questionnaire**

Distribute the post-assessment training questionnaire amongst the participants and give them 15 minutes to complete and submit the forms.



2. FEEDBACK

Materials: **Annexure 8A- Feedback Form**

Steps for conducting the activity:

1. Distribute feedback forms (*Annexure 8A*) to the participants.
2. Request the participants to share their feedback so that you can address the concerns in the upcoming refresher sessions.
3. Gather the group into a circle and encourage each participant to share their thoughts on the training.



20 minutes

3. CLOSING THE TRAINING

1. Ask the participants if they have any queries before closing the session.
2. After addressing their queries, close the session by appreciating the participants for their patience, active listening and participation throughout the training.
3. Encourage the participants by letting them know that they are doing very good work in the field and must continue their efforts to contribute to the noble cause of combating NCDs.
4. Reassure the participants that they can turn to you in case of any query or guidance.
5. Close the session with your best wishes to the group.



ANNEXURES



MToT Annexures for MO Training



Annexure 1A

PRE AND POST- ASSESSMENT QUESTIONNAIRE

Pre and Post - Assessment Questionnaire

Date:

(Tick the correct answer - Only one option per question is correct)

Q1. What is the body mass index range for an overweight person?

- A. 23-24.9 kg/m²
- B. 22.9-24.9 kg/m²
- C. 24.9-27.9 kg/m²
- D. None of the above

Q2. What is the HbA1c range for impaired glucose tolerance?

- A. 6-6.5%
- B. 5.9-6.4%
- C. 5-6%
- D. 5.7-6.4%

Q3. Sodium-glucose co-transporter-2 (SGLT2) inhibitors may cause urinary tract infection.

- A. True
- B. False

Q4. Regular insulin peaks at:

- A. 1 hour
- B. 3-5 hours
- C. 2-3 hours
- D. None of the above

Q5. If a person with diabetes comes to you on his/her first follow-up with a random blood glucose level of 190 mg/dl, what will you do?

- A. Increase the dose of medicine prescribed
- B. Continue the same treatment
- C. Intensify diet and exercise plan and follow up after 3 months
- D. Ask the person to return after a month

Q6. What are normal blood pressure values?

- A. 120/80 mm of Hg
- B. Less than 120/80 mm of Hg
- C. 130/90 mm of Hg
- D. Less than 130/90 mm of Hg

Q7. What is the daily recommended salt intake?

- A. 2.5 gm
- B. 5 gm
- C. 5-7 gm
- D. 1/2 teaspoon

Q8. Which anti-hypertensive drug should be avoided in case of Chronic Obstructive Pulmonary Disorders?

- A. Calcium channel blockers
- B. Beta blockers
- C. Diuretics
- D. ACE inhibitors

Q9. If a person is suffering from Non-Proliferative Diabetic Retinopathy, what type of exercises are appropriate for him/her?

- A. All kinds of physical activities
- B. Light walk
- C. Jogging
- D. Specific yoga exercises like *kapalbhati pranayam*

Q10. Statins may lead to

- A. Severe heart burn
- B. Severe muscular pain
- C. No major problems
- D. Upper respiratory tract infections

Q11. In a 9 inch diameter plate, what should be the proportion of cereals?

- A. 1/2 plate
- B. 1/3rd plate
- C. 1/4th plate
- D. 2/3rd plate

Q12. A good facilitator is one who

- A. Encourages participants to speak and participate
- B. Demonstrates the training session well
- C. Talks loudly
- D. Talks more and listens less

Q13. You are conducting a training session and come across a few participants who are shy and not willing to participate. How will you encourage these individuals to participate in the session?

- A. Will just allow them to sit quietly and listen
- B. Will try to involve them in group activities and encourage them to speak up
- C. Will directly tell them that they must participate
- D. None of the above

Q14. If during the training, a participant is not demonstrating an activity correctly, how will you respond as a trainer?

- A. By telling the participant on his/her face that s/he is not performing well
- B. By letting them make mistakes and encouraging them to do a self-review
- C. By not letting them participate in any of the other activities
- D. By stopping the participant from making the mistake and correcting them on the spot.

Q15. ORPA (Observe Reflect Personalize Act) technique helps in effective use of:

- A. Counselling skills
- B. Communication material
- C. Negotiation
- D. None of the above



Annexure 8A

TRAINING FEEDBACK FORM

Workshop Title:**Training Venue:****Training Dates:**

The Training Feedback Form is intended to capture perceived benefits from the training that you have just completed. Your responses and inputs will assist in:

- providing support and guidance to the trainers
- development of programme improvement and evaluation
- conducting better trainings

Your responses and suggestions regarding curriculum, trainer and topics covered will be reviewed and considered to improve the quality of training.

Thank you for your thoughtful appraisal of this training and for your commitment to providing quality training. If you have any queries, please get in touch with the Training Team.

1. Please rate the following for this training:

| | | | | | | |
|---|------|------|------|-----------|-----------|-----|
| The training you attended was: | Poor | Fair | Good | Very good | Excellent | N/A |
| The content presented was: | Poor | Fair | Good | Very good | Excellent | N/A |
| The way the trainer taught was: | Poor | Fair | Good | Very good | Excellent | N/A |
| How do you rate the Training Manual as a training support material? | Poor | Fair | Good | Very good | Excellent | N/A |
| Overall, how would you rate the performance of the trainers in this training? | Poor | Fair | Good | Very good | Excellent | N/A |
| The language used was: | Poor | Fair | Good | Very good | Excellent | N/A |
| The Facilitator manual was user friendly: | Poor | Fair | Good | Very good | Excellent | N/A |
| The Participants manual was user friendly: | Poor | Fair | Good | Very good | Excellent | N/A |

Summary Evaluation

1. What are the three most important **things [or topics]** you learnt during this training?
2. Was enough material covered during these two days? If not, was too *much* material covered or too *little*?
3. Were the Facilitator and Participants' Manual understandable enough? If not, What can be done for improving them?
4. To what extent do you expect this training will make a **difference** in the way you do your job and further train the frontline health workers?

Comments:

Thank you for taking the time to provide your feedback!





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