|  |  |  |  |
| --- | --- | --- | --- |
| **PBAS#:** | **National Office:** | **Programme site or ADP:** | **District/Region:** |
| **Name of Person Completing the Tool:** | **Title:** | **Type of Assessment:**  **Self-Assessment  Third Party  Mixed** | **Date of Assessment (mm/dd/yyyy):** |
| **Length of programme implementation:**  **< 6 months  6 - 12 months  > 12 - 24 months  > 24 months** | | **Level of Assessment (e.g. what level is this assessment being conducted):**  **Programme site  ADP  District/Regional  National** | |

Instructions:

Beside each essential element, there is a checklist of critical components of the essential element. As you go through your assessment, check the boxes that apply to the programme. Use the CMAM IQA calculator for an automatic calculation of the IQA score. The overall IQA is the mean of individual IQA scores from all the essential elements. An overall IQA score of 1.5-2 indicates high fidelity; 1.0-1.4 indicates moderate fidelity; less than 1.0 indicates low fidelity. The components that are optional, exceeding expectations will not be included in the IQA scoring.

|  |  |  |
| --- | --- | --- |
| **Essential Element** | **Check the box  for those that are present in the model.** | **IQA** |
| 1. **Caregivers bring daily contribution of food or materials to Hearth.** | Hearth menus are shared with caregivers before the start of Hearth to discuss with caregivers on who will bring what ingredients on 1st day of Hearth.  Volunteers meet with PDH participant caregivers prior to the 1st day of Hearth so they are aware of what ingredients they must bring, to agree on a time and location for 1st day of Hearth.  Caregivers contribute to foods and/or materials for the Hearth sessions.  **Optional, exceeding expectations:**  Community also contributes materials for Hearth session |  |
| 2. **Caregivers present and actively involved every day of the Hearth session.** | All primary caregivers come with their child(ren) to hearth sessions.  Caregivers participate in all aspects of the hearth sessions in the 10-12 days of hearth (especially the cooking of the meals).  Caregivers follow the designed Hearth menus when cooking during Hearth sessions.  Volunteers help caregivers cook the Hearth meal on Day 1 and 2, but caregivers cook the meal without the help of volunteers on Day 3-12  All the caregivers and children attend every session. One or two absence maximum is allowed, or as decided by the community members and staff.  Volunteers spend time to reflect with caregivers about the changes in the child during the course of the hearth sessions, especially on the last day of hearth.  **Optional, exceeding expectations:**  Grandmothers and Fathers of participant children also attend Hearth sessions on Day 1 and 12 |  |
| 3**. Hearth sessions run for 10–12 days within a two-week period.** | There were 10-12 days of Hearth within a two-week period.  Hearth sessions do not run for more than 3 hours long  **Optional, exceeding expectations:**  Volunteers spend time to reflect with caregivers about the changes in the child during the course of the hearth sessions, especially on the last day of hearth. |  |
| 4. **Include follow-up home visits (every 2-3 times a week) for two weeks after the session.** | Volunteers visited the households ever 2-3 days for two weeks after the Hearth sessions.  Volunteers had a maximum number of households for whom they are responsible for visiting as determined by the volunteers, community members and staff.  Refresher trainings are available to remind volunteers on the principles of PD/Hearth and how to counsel families to overcome obstacles in practicing behaviours learnt in Hearth.  Supervisors are available for volunteers to turn to for help with counselling families or overcoming specific barriers to behaviour change for families.  Volunteers visit PDH participant households at 30 days, 3 months, 6 months, and up to 1 year if possible  For countries measuring MUAC, volunteers pay special visits to household with children who have MUAC ‘yellow’ and for children ‘red’/severely underweight to check weight of child and provide counselling as needed for children  **Optional, exceeding expectations:**  Volunteers visit PDH participant households monthly for up to a year (exceeds expectations) |  |
| 5. **If a child doesn’t gain weight after two sessions, refer the child to the health centre.** | Children are referred to the health centre if they don’t gain any weight or lose weight on Day 12 of Hearth.  Children with ‘Red’ MUAC or severely acutely malnourished are referred to the Health Centre  Children are referred to the health centre if they don’t gain 400g or more weight after two rounds of Hearth sessions on Day 30.  Children are referred to the health centre if they are sick during Hearth sessions or during follow-up visits. |  |
| 6. **Limit the number of participants in each Hearth session 6-10 caregivers.** | Approximately 6-10 children participate in Hearth sessions.  A maximum of ten caregivers participate in Hearth sessions.  Caregivers who are absent more than 2 days are dropped from the PDH program and are included in the next round of Hearth sessions  All caregivers perform all the activities at least once in the 10-12 days of Hearth. The rotation of activities is even across the caregivers.  Caregivers can all recite the two key Hearth menus  Caregivers can all recite the six key Hearth messages  **Optional, exceeding expectations:**  Caregivers are aware of the food substitutes for various seasons for the ingredients in the menu |  |
| 7. **Monitor and evaluate progress.** | The admission and graduation criteria are clear to the community volunteers, MoH staff and WV staff, especially the support of nutrition technical staff.  Supervisors check the data from the volunteers to ensure quality and that programme changes happen if PD/Hearth does not rehabilitate children.  Technical support is provided to supervisors so that they could adequately support volunteers in their work.  Supervision of volunteers is ongoing with higher frequency of contact during the preparation of Hearth and the first month of hearth.  Exit strategy is in place by ADP for when there is less than 6 underweight children in a community  **Optional, exceeding expectations:**  The graduation criteria is clear to the community leaders and members  Supervisors report monitoring data to higher levels within the Ministry of Health and World Vision  Results of PDH data is shared with the community and a graduation ceremony is conducted regularly with the community |  |
| 8. **An exit strategy exists for when there are less than 6 underweight children in the community.** | An excellent strategy exists that will sustain and prevent future malnutrition in the community and integrates PDH with other sectors such as livelihoods, agriculture, WASH, economic development, etc. |  |
| **OVERALL IQA** | |  |

Instructions: Feel free to note any variances and the data source used in the IQA assessment of the essential elements. Document recommendations and next steps in the space below.

|  |  |  |
| --- | --- | --- |
| **EE** | **Notes** | **Data source** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| **Recommendations and next steps:** | | |