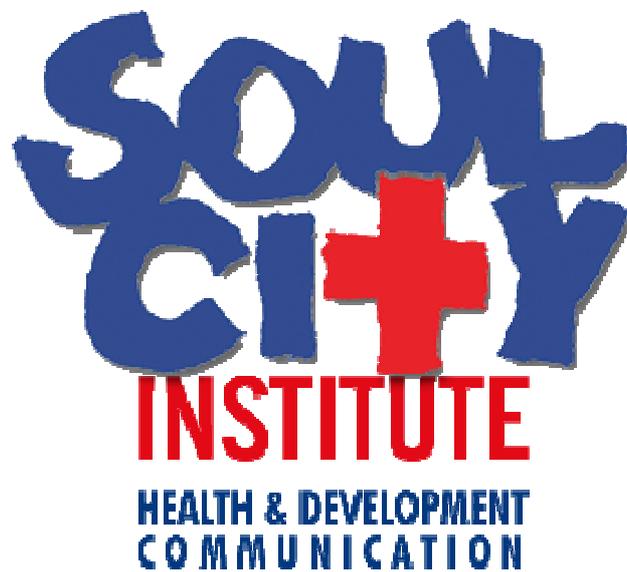


**CODE OF CONDUCT FOR
COMMUNITY BASED MONITORING TEAMS
PRIMARY HEALTH CARE SERVICES**



Who is a Community Based Monitor?

Community Based monitors are community member who were identified by Soul City and the community, received training on how to monitor and contribute towards improving the quality of health services in the health facility in their community. The objective of community based monitoring programme is to improve the quality of PHC services and promote accountability with increased public awareness of their rights and responsibilities in relation to quality health care delivery. It se

Community based monitors have a relationship with the community as well as the health facility they serve, and they are enabled to serve as a link between the health facility and the community to facilitate access to services and improve the quality of service delivery.

Purpose of this document

To provide guidance to Community Based Monitors on what their role is and how they are expected to behave towards other team members, the health facility and the community.

Community Based monitors' main role is:

- to collect data using the report cards and by conducting interviews with patients and other community members using forms provided by SC in agreement with the health facility.
- To increase community participation in health services.
- To plan and hold regular meetings to discuss their findings and then they compile reports as a team based on their observations and interviews conducted with patients about their experience of the services they receive at the facility.
- To hold meetings to discuss findings with the facility manager at least once a month.
- To provide feedback to community members about the quality of the services at the health facility, through dialogue (public hearing).

It is envisaged that the feedback provided will inform future planning at the facility.

Interactions with other stakeholders

CBM maintain professional partnerships with stakeholders, which include Soul City, staff at the health facility, clinic committee or hospital board, ward councillors, fellow team members and other ngos and CBOs working in the community.

Conduct

- They need to have a full understanding of their role as community based monitors of health services

- Every member is to abide by the rules and regulation of the clinic and familiarise themselves with *Batho pele principles*
- They attend all team meetings, meetings with Soul City and with the facility manager
- They attend to monitoring responsibilities as per agreement with the team
- They compile and prepare report card
- Contribute to team report
- Where a member has committed to volunteer his/her services to the health facility, they need to make sure they attend to those as per agreement with facility manager
- To maintain confidentiality at all times
- Respect self, fellow members, patients/ community members and staff members of the facility they serve
- Self presentation – they wear blue t-shirts and a name tag at all times 9 provided by Soul City)
- CBM are truthful and forthright in presenting their background and training to other stakeholders

On becoming a community based monitor

1. Team members are selected through a community dialogue attended by all the stakeholders
2. CBM members attend 3 day training workshop on how to monitor
3. Back in the community the CBM team meet to review the contents of the training,
To group themselves and plan a monitoring schedule
The schedule is to be sent to Soul City (before monitoring starts)
4. They meet with the facility manager to discuss their role and the indicators to be monitored (using the Report card)
They also take a walk through the facility to get an eye's view of the facility
5. They start with their monitoring activities:
Each pair to use an A3 report form for their findings.
They also get to interview a few patients who are leaving the facility to hear how they experienced the service at the clinic and a few in the community.
Once each pair has had their monitoring turn, a team meeting is held to discuss their findings and translate the findings into a report.
They also record their findings on the A0 poster that is to be mounted on a wall at the clinic.
6. A meeting is held with the facility manager to discuss the findings.
7. A record is to be kept of all the meetings held.
8. All CBM records are to be kept safe in a file by the secretary of the team .
The cycle is repeated

9. When enough data has been collected the team plans to hold a **Public Hearing** session with all the stakeholders. To provide feedback on the team's experience of the facility

Public Hearing Guidelines

To be used when preparing and running a Public Hearing session

- **What is a public Hearing?**

A Public Hearing is a process in which interested parties/ stakeholders and any other persons who may be affected by the result have the opportunity to make ask questions or register objections to a **development application** or other matter. A Public Hearing body is comprised of elected officials or citizen members, facilitators, community members and all those who are directly or indirectly involved or affected by the issue.

Why hold a public Hearing session

- To amplify the voice of the community and help in identifying critical implementation gaps
- To sensitize the community to demand quality health services in order to establish a responsive health delivery mechanism.
- To elevate critical implementation gaps in the local CHCs identified by the CBM process
- To provide a platform for communities to ask for redressal of concerns by those responsible for delivery of quality health services
- For the officials to start responding to community questions

Who will participate?

The public hearing will be attended by:

- Community leaders
- Community Based Organizations
- Service providers like doctors, Nurses, Clinic or CHC managers
- Department of Health district and provincial office • Local municipality
- Media representatives

Process:

The process will continue for 1-2 hours.

CBM team to prepare registration tables, and have 2 people to see to it that all who attend the public hearing get to register

Seating

An ideal sitting arrangement during Public Hearing will make the process more interactive

and help community members to maintain eye-to-eye contact with the stakeholders and participants.

Documentation

The documentation team will write all the process, discussions, issues raised and responses. The media and elected representatives will be welcomed to put their queries and remarks on the implementation process of MCH and gaps identified in different places

Registration

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Facilitation of the session

1. Introduction

2. Ground Rules

Before the discussion begins, help the participants establish ground rules and ensure that all participants are willing to follow them. Ground rules must emphasize respect, listening, honesty and the importance of sharing time equitably. Stress the importance of respecting different opinions and perspectives. You might post the following sample ground rules on a flip chart, or give one sample ground rule and ask the group to come up with more. You could then ask, "Are there any questions about these ground rules? Can we all agree to them before we continue?"

Make use of guidelines provided on how to run a community dialogue for your use during the dialogue session. Please tailor the dialogue to your community's needs; adjustments will be needed. You may also wish to create your own set of questions. If the group is large, the facilitator may wish to project the questions on overhead transparencies for all to see.

3 .Background

Contextualise CBM programme by discussing the following :

- Department of Health's quality improvement standards.
- Objectives of CBM
- Role of CBM team

NB : Emphasize the difference between the role of CBM from that of clinic committees

4. Purpose of the dialogue

Facilitated conversation on health services as experienced by the community members.

The public hearing will be facilitated by a CBM member and a Soul City representative with clear understanding of the CBM programme.

- The facilitator will initiate the process by giving a brief background of the CBM work at the facility.
- CBM member will give a report of the identification of problems pertaining to accessing services offered by the clinic in the district where public hearing is held.
- 2 community members give an informal report of how they experience the facility

5. Response by:

- District official
- Facility manager
- the clinic committee

The response should indicate how the district plans and the facility intends to deal with the concerns raised.

7. Closing

Give participants a chance to talk about the most important thing they gained from the discussion. You may ask them to share any new ideas or thoughts they've had as a result of the discussion. Ask them to think about what worked and what didn't.

The facilitator should then thank the group for taking the time to share ideas and personal values. The group recorder may give a summary of the dialogue.