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T raining

E conomic
Empowerment

A ssistive
Technology

M edical
Rehabilitation

TEAM M&E

Monitoring Tools

TEAM Laos

World Education Laos TEAM Capacity Building Approach

As well as providing funding to 15 local and international organizations to develop and strengthen the disability and rehabilitation sector in Laos, World Education USAID-LWVF funded TEAM project works with sub-recipients to strengthen their ability to manage grants and to efficiently implement their projects. WEL-TEAM conducts an *Organizational Assessment* of all applicants for TEAM funding to look at capacity in grants management, financial management, human resources, activity implementation, and monitoring and evaluation. If the organization is approved for funding, WEL-TEAM staff work with the organization to discuss the outcomes of the assessment, including both organizational strengths and areas for improvement. TEAM and the organization then work together to create a *capacity-building plan* with specific measurable objectives. Most of the capacity-building relates to the organization's ability to successfully implement the project activities and manage the sub-award, but if there are specific areas that the organization has identified as priorities, these are included if possible.

Capacity-building is one of the core components of the TEAM project, and inputs by World Education take many forms. One approach is individual coaching, where a TEAM staff member who has the required expertise will work closely with one or several members of an organization regularly over a longer period of time, to discuss a specific issue, either by phone, email or in person, or a combination of those methods. Other times WEL-TEAM organizes formal trainings for all sub-recipients. So far, TEAM has conducted trainings on USAID Regulations, World Education TEAM Finance Procedures, and Monitoring and Evaluation. In addition, some trainings are provided on an optional basis, allowing the sub-recipient to choose topics which are most relevant or needed for their organization. So far, TEAM has offered trainings on Curriculum Development, Psychosocial Support, Training of Trainers (ToT), Project Cycle Management (PCM), and Gender Inclusion. TEAM encourages sub-recipients to send an appropriate staff member to the training, and all trainings are open to any staff member as relevant, not just project staff who are funded by TEAM. All WEL-TEAM trainings are participatory, reflective and allow as much time as possible for 'learning by doing' and practical application of skills and knowledge.

TEAM recognize the importance of reflection, goal setting, and the long-term, regular follow up needed for effective capacity building. Examples of how TEAM promoted these values are:

- Many WEL-TEAM trainings are followed up by practical sessions conducted by the trainer or TEAM staff with each sub-recipient individually or in small groups to allow opportunities for the organization to apply and practice what they learn in the training to their own situation with guidance and feedback
- Video sessions are used in the ToT training practice session to allow the participants to view themselves delivering a training as a tool for self-reflection and self-assessment
- Participants in trainings set SMART goals at the end of the sessions for future action which are followed up by the organization's management, the trainers and/or TEAM staff
- Capacity building plans with individual sub-recipients are followed up on monthly in some cases to assess and reflect on progress of specific observable behaviors to measure capacity over a long period of time

These participant handbooks were used in 8 trainings for TEAM sub-recipients, and are available in print on request from WEL TEAM (bernard_franck@la.worlded.org), or online at <https://sites.google.com/site/teamlaopdr/capacity-building>

Currently available:

1. USAID Rules and Regulation for TEAM
2. TEAM Finance Processes and Regulations
 - 3.1 Introduction to Monitoring and Evaluation
 - 3.2 TEAM M&E Monitoring Tools.
4. Curriculum and Training Design
5. Introduction to Psychosocial Impairments
6. Training of Trainers (TOT)
7. Project Cycle Management (PCM)
8. Gender Inclusive Development

Under development and available soon:

9. What to Know about Disabling Conditions
10. Understanding impairment and disability in line with UNCRPD, ICF and World Report on Disability
11. Optimizing functioning of persons with impairments by using diversified assistive technology
12. Case Management in Disability Inclusion

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1. Introduction on Monitoring tools

This part of the handbook presents the proposed TEAM monitoring tools.

Having standard forms and files facilitates the information treatment and data summary for reporting to USAID. Therefore, six monitoring excel files were designed, based on USAID monitoring requirements and specific definitions.

Each type of activity appears in a specific form as shown in the table below. Evidence in the last column corresponds to the sub-grantees monitoring plan:

TEAM indicators	Activity	Name of the excel file to fill	Evidence to be kept
Training of health professionals (all T TEAM indicators)	Training on rehabilitation services, training for doctors and nurses in general hospitals and pediatric hospitals, including training on vision and hearing screening.	Training	Training curriculum Hard copy of attendance sheets Pre-tests and post tests questionnaires and results
Economic Empowerment (E indicators)	Train/mentor/coach Gov to facilitate livelihoods	Training	Same.
	Deliver economic support to PwD*	Economic self-sufficiency	Receipts for economic support (ie transportation, accommodation necessary to access services...) signed by beneficiaries Contract with beneficiaries (<i>HI developed a model that might be found useful by other sub-grantees</i>).
	Train PwD and caregivers in financial literacy	Training	Same as other training
	Deliver grants to PwD and their care givers*	Economic self-sufficiency	To be further discussed and agreed with TEAM
	Job placement	Economic self-sufficiency	To be further discussed and agreed with TEAM
Assistive technology (A indicators)	A- Training in sign language B- Sign language dictionary update	A- Training B- Training: mentioned in "TEAM" sheet when completed.	A- Same as for other training B- Dictionary
	Delivery of eye glasses and hearing aids to children	Rehab & Assistive tech	Form for device reception signed - At least some sub-grantees use to take a picture when the equipment is given to the beneficiary (to be agreed with WEI).
	Delivery of prosthetics and orthotics	Rehab & Assistive tech	Same
	Delivery of wheelchairs and other assistive devices (included the tablets distributed by AfA)	Rehab & Assistive tech	Same

TEAM indicators	Activity	Name of the excel file to fill	Evidence to be kept
Assistive technology (A indicators)	Creation of wheelchair basketball teams	Basketball team form	A- Signed form for reception of wheelchair B- Attendance sheet to practices, per team C- Team and team players characteristics
Medical Rehabilitation (M indicators)	Delivery of psycho-social support	Rehab & Assistive tech	To be further discussed and agreed with TEAM
	Delivery of rehabilitation services	Rehab & Assistive tech	To be further discussed and agreed with TEAM
	Delivery of surgical & medical treatments	Rehab & Assistive tech (CRS designed a follow up form for children who received eye surgery)	To be further discussed and agreed with TEAM
	Screening of children for early detection of impairment	Rehab & Assistive tech	Individual detection screening forms. CRS has drafted a model of hearing screening form that other beneficiaries might find useful.
Activities not reflected in TEAM indicators	Social inclusion / Awareness raising	Social inclusion Awareness raising	- Awareness raising material (e.g. flyers, pictures, TV show or radio record, if any) - Hard copy recording awareness raising or social inclusion events. CRS has designed an awareness raising event monitoring form to assess the event dynamics that other sub-grantees might find useful.
	Vocational training	Training	Same as other training types
	The National Committee for Disabled People and Elderly (NCDE) Secretariat has increased skills to coordinate and monitor the implementation of the National Disability Decree	No excel file	To be further discussed and agreed with TEAM. (meetings' agenda and attendance sheets?)

Table 1: Correspondence between TEAM indicators, activities and files to fill

* Please note that:

- Our *TEAM indicator for economic support* will go under “Other” in the USAID summary appearing in the monitoring file 4 on economic self-sufficiency and will focus on money for accommodation and transportation, not material and equipment.
- Our *TEAM grants indicator* will usually go under monitoring file 4 in USAID "Educational/Vocational Support". See more details in this chapter.

2. Logic for recording monitoring data in excel files

Six excel files have been designed to record the project activities:

1. The "Rehab service & Assistive tech" file
2. The "Social inclusion & Awareness raising" file
3. The "Training" file
- 3a. The "Capacity building support" file
4. The "Economic self-sufficiency" file
5. The "Basketball team" file

The logic and organization of the sheets is similar for the files 2, 3 and 5:

- The first sheet(s) aim at recording information on a **hard copy** while in the field.
- The next sheet(s) are designed to **enter the data** recorded on hard copy.
- Finally, the last sheet (s) present one **data summary** based on TEAM indicators and one summary based on USAID indicators.
- When relevant, some figures are proposed as **monitoring tools** to facilitate managers' follow up of the activities based on quantitative data analysis and to support the decision making process.

3. Basic rules

The following rules apply to all activities and all forms:

- **Only** record activities that have been implemented relying on TEAM budget.
- All fields ready for data entry are highlighted in light yellow. The other cells are protected and data cannot be entered.
- On some forms, some pieces of information are linked to previous sheets and will be filled automatically based on information you already entered. There are also some graphs that will be made automatically from information that is entered. Only fill the fields that are highlighted in light yellow.

For naming the excel files:

- Please add the name of your organization at the end of the file name. For example: "Training (TEAM) Q2 LDPA".

4. Details per file

As mentioned earlier, the project activities are monitored using 6 specific excel files:

1. "Rehab service & Assistive tech"
2. "Social inclusion & Awareness raising"
3. "Training"
- 3a. "Capacity building support"
4. "Economic self-sufficiency"
5. "Basketball team"

The way to use each of these files is explained below.

1- Health Related Rehabilitation Services and/or Assistive Health Technologies ("rehab service & assistive tech") file

This file summarizes the following types of services offered to the beneficiaries:

Service category	Types of services
Health Related Rehabilitation Services	Surgery Rehabilitation nursing Serial casting Physical/Functional therapy
Assistive Health Technology Items*	Mobility devices (wheeled and walking) Positioning devices Prostheses, orthoses, and orthopedic shoes Daily living devices, including functional duty aids and household adjustments for accessibility Communication devices Vision devices Hearing devices
Psychosocial Support	Active listening, coping mechanism, conflict management, focus group discussions including nonverbal methods of enquiry.
Other	Medical treatment Children (age: 0-18 years) screened for early detection of impairment Adults (age: >18 years) screened Other services that would not correspond to any category mentioned above.

Table 2: Health Related Rehabilitation Services and/or Assistive Technologies: Types of services offered to the beneficiaries

* Further explanations and pictures/drawing of each type of device appear in annex.

Frequency and Timing of Data Acquisition: Source data is collected daily as new individuals receive services. The data is summarized and reported to World Education by each grantee together with the quarterly report (quantitative analysis).

Evidence to be documented: Each grantee keeps a record of individuals who receive a service as it is provided.

USAID/TEAM definitions

Types of impairments. In the context of TEAM projects, physical/mobility impairments are the main focus. An impairment can be classified into the following categories:

1. **Mobility/physical** – persons with difficulty moving from one place to another, or to perform activities of daily living.
2. **Hearing** (partial-complete) – persons who are Deaf or hard of hearing.
3. **Vision** (partial-complete) – persons who are blind or have low vision.
4. **Speech** – person with difficulty to articulate speech sounds.
5. **Intellectual** – person with difficulty to understand, learn and remember new things and apply that learning to new situations.
6. **Mental or psychosocial impairment** - alterations in thinking, mood, emotion or behavior associated with distress or interference with personal functions.
7. **Other** – may include other impairments not listed above.

New device or repair.

1. **New:** Is defined as an Assistive Health Technology that is provided by the USAID funded project.
2. **Repair:** Is an adjustment to or replacement of part of an Assistive Health Technology (whether the client comes with this product received through the USAID funded project, or the product comes from some other service).

How to count?

An individual is counted only *once* for *each type of service* s/he receives over the life of the project regardless of the reporting period. The number of repairs can be entered in the table but will *not* be counted towards the total number of people served.

Under counting is a potential issue as a result of repair services not being counted towards the total of number of people served. A person who receives repair services on their own device (not provided through the project) will be missing from the data.

Sub grantees (service providers) will be closely mentored on how to count beneficiaries who receive more than one service.

Service quality. This indicator does not measure the quality of services provided nor does it measure the improvement in quality of life of the individual(s) served.

Additional tools need to be used to determine quality of services and improvement in quality of life of individuals served.

2- "Social inclusion & Awareness raising file"

The excel file called "Social inclusion/Awareness raising" can include all information recorded for the whole grant duration.

The different sheets are named and used as followed:

- A. **Attendance sheet HC** (hard copy) is printed and given to the event organizer before the awareness raising or social inclusion event.

The attendance sheet is similar for awareness raising and social inclusion, so please make sure you tick how you classify the event (awareness raising or social inclusion) on top of this sheet.

The upper part of the sheet gathers general information on the date, event title and location. Examples of *locations*: school, market, ... + name of village.

Examples of *audiences*: students, village authorities, village health committees, ...

It also indicates to which type of awareness raising or social inclusion event it corresponds based on USAID definitions.

USAID definitions

Social inclusion activities. Activities/events organized with project support, which enable people with disability to participate. Example of activities that represent social inclusion:

- *Sport, recreation or cultural events*: these activities are generally for pleasure and may be one-day activities, span many months, and formal or informal.
- *Civic participation* includes events or gathering for the common good (tree planting, group meetings, public forum).

Awareness raising. Example of activities that represent awareness raising:

- *Awareness raising* - information sharing with *communities or* individuals on rights, services (including mechanisms for obtaining services).
- *Policy advocacy* - aiming to influence decisions within political, economic, education or social systems or institutions.

An awareness raising activity that uses a curriculum should be counted under USAID indicator 3 (training).

The lower part makes the inventory of the participants. In case of numerous participants, it will obviously not be possible to list their names and profiles, so this table will remain empty. If so, please try to estimate the audience and fill the estimated number of males and females in G12 and G13 respectively.

The possible use of various media is recorded for both awareness raising and social inclusion event:

- In case of press release to inform about a social inclusion activity, it will be recorded on lines 15-16 (on the right).
- The type of media used for awareness raising is recorded in lines 20-24 on the right side of the table.

How to count for awareness raising and social inclusion events? (USAID definitions)

- An activity is counted only once if it is a continuation of the same activity by the same organization; regardless of the reporting period. If the same activity is repeated for different audiences it is counted as a separate activity. (For example: a building modification to install ramps has continued beyond the reporting period will not be counted in the next reporting period).
- An individual is counted *once* for each different activity s/he benefits from over the life of the project.

Frequency and Timing of Data Acquisition: Source data is collected as activities are undertaken. The data is summarized and reported to WEI quarterly.

Tips for quality check of attendance sheet HC

Check that all fields are well filled (including the type of event up the table, awareness raising or social inclusion) and that it looks realistic.

B. Data record - Social inclusion

Fill the cells in light yellow based on the hard copy.

Tips for quality check of data record sheet

Check that the data in this sheet all correspond to what was recorded in the hard copy.

C. Data record - Awareness raising

Same.

Tips for quality check of data record sheet

Check that the data in this sheet all correspond to what was recorded in the hard copy.

D. Summary Q1 (and the following sheets: Q2 to Q8).

Just fill the dates for the current quarter. All tables summarizing the activities of this quarter and all figures will be generated automatically.

Tips for quality check of data record sheet

- Check that the quarter has been filled.
- Check that the data in tables and figures seem to make sense. If not, go back to double check original data.

3- "Training" file

The "training" file records all training related activities implemented by the sub-grantee.

Please name the file, including the quarter it is related to. For example, transform "Training (TEAM) Qx" into "Training (TEAM) Q1" for quarter 1, or "Training (TEAM) Q2" for quarter 2, etc.

It is important to note that there are major conditions for an event to be considered as a training based on USAID/TEAM definitions:

USAID/TEAM definitions

Training refers to learning, based on a curriculum, with a view toward preparing learners with specific knowledge, skills, or abilities that can be applied immediately upon completion (initial and/or continuous professional education).

Training can include but is not limited to individuals who receive professional or in-service training to improve skills and competencies so as to improve the quality of services to persons with disabilities.

Methods of providing training may include:

- Professional training of technical staff (orthopedic technicians, physical therapists);
- Participation at relevant seminars or workshops;
- On-the-job training for technical, management and administrative staff, etc. to improve current or impart new skills.
- Awareness raising – information sharing with communities or individuals on rights, services, laws and policies if a curriculum is developed and used. If an awareness raising activity does not use a curriculum, it will be counted under Indicator #2.

An event is considered as a training only if:

- (a) there is a written curriculum AND if (b) a pre and post test is organized.

Trainee. A trainee is counted as a person trained if attending minimum 50% of the course.

Organization strengthening. An organization is considered as strengthened if at least one individual trainee from the organization completes at least 50% of the course AND successfully passes a tool of measurement or post test at the end of the training.

How to count training, trainees and organizations strengthened?

- An individual/organization should only be counted at the end of the course.
- If an individual is trained for more than one curriculum, they are counted per each curriculum used.
- An organization is only counted as strengthened once (over the whole life of the project), regardless of the number of curriculums used or the number of participants.
- If the same training is used for different audiences, it is counted as a separate activity.
- An individual is counted only once per training. (For example: a technician has been sent to receive prosthetic training for 3 years – this individual is only counted once in the quarter in which the training ends).

The sub-grantees (service providers) will be closely mentored on how to count beneficiaries who benefit from more than one training activity.

Training topics include:

1. *Physical rehabilitation*: principles/methods of treatment focused on movement and function (with or without Assistive Health Technologies).
2. *Prosthetics and orthotics*: principles related to measurement, fabrication, and fitting of prostheses and orthoses.
3. *Wheelchair service*: The eight step wheelchair service as indicated by the World Health Organization.
4. *Management*: Principles related to planning, organizing, staffing, leading and directing an organization or team.
5. *Finance/Financial literacy*: Principles of financial management including but not limited to budgeting, financial reporting, and grant management and *Financial Literacy* (literacy/numeracy, personal finance, etc.)
6. *Other Vocational training*: Manual skills, etc.
7. *Vision and hearing screening*
8. *Disability & people with disability rights*
9. *Sign language*
10. *Technical training* (but not health)
11. *Social Inclusion/Awareness Raising*
12. *Other* – Anything not captured above.

More USAID definitions

Types of organizations	
Faith Based	Organizations that are religious in nature
Government	Not an organization, but part of local or national government
Disabled	Organizations OF persons with disability (constituents and management are persons with disability)
Non-Governmental	Organizations with no participation or representation of any government
Community Based	Organizations with geographic scope limited to surrounding community
Other	Any organization that does not fit into above criteria, as well as individual villagers.

Table 3: Types of organizations

Do not tick more than one box to describe an organization; select the type that best describes the organization. Please select the type of organization that is most specific. For example, if an organization is non-governmental and Faith-Based, it will be classified as Faith-based because that is more specific.

Q: How official does the registration have to be for a group to be considered as an organization? For example, a Village Health Committee is a group that is organized within a community, recognized by the Village Chief and by the Ministry of Health on a national level, but they usually don't have any sort of an official written "registration" as an organization. Can they still be considered a Community-Based organization?"

A: It doesn't need to be so official. If a group is recognized by the Village Chief and MoH, then it can be listed as CBO. Village Chiefs count as government since they are part of the overall government structure.

Data Collection Method: Each sub-grantee keeps a record of individuals trained as each new training activity is conducted. The grantee summarizes the data and sends it to World Education with the quarterly progress report.

Data will be collected as activities are undertaken, but analysis and reporting will be done on a periodic basis (quarterly).

Limitations. (1) This indicator does not measure the content of training undertaken; (2) Double counting is a potential problem when one person may benefit from more than one type of curriculum; (3) Organizations may be of more than one type.

To address the risk of not measuring the improvement in skill level of the individual(s) who were trained, a pre-test has been proposed on top of the post test, using the same questions. The pre- and post-test questionnaires might want to reflect the changes in knowledge, skills and attitudes as relevant, depending on the training topic.

The different sheets in the file named "Training " are used as followed:

A. **Attendance sheet HC** (hard copy) is printed and given to the trainer before the training.

It provides:

Information provided	When to fill it?	By whom?
<i>General information about the training itself:</i> training title, date, location	Before the training starts, except the total of participants, which is filled at the end.	Trainer
<i>Information on the trainees:</i> name, sex, status PwD or non PwD, position.	When the training starts. Update if a new trainee comes.	Trainees
<i>Trainees attendance</i> – Daily attendance – If trainee attended at least 50% of the course	– Daily during the training, at the end of the day. – End of the training	– Trainees – Trainer
<i>Pre and post-tests results.</i> <i>Passed the post-test</i> (yes if the trainee got a higher score than the minimum set by the trainer for this specific training).	After the correction of each test.	Trainer

<p><i>Organization strengthened:</i> the trainee contributed to strengthen his/her organizations if he/she:</p> <ul style="list-style-type: none"> – attended at least 50% of the course – AND successfully passed the post-test. <p>For calculating the total of organizations strengthened: each organization is counted if at least one trainee satisfies the 2 conditions above. Each organization can only be counted as strengthened <i>once</i> over the life of the project.</p>	<p>After the training course.</p>	<p>Trainer</p>
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There are **two types of attendance forms for training, to be selected according to the trainees' profile:**

- One for training delivered for villagers (first sheet).
- One for training delivered to health staff, Government staff or others (second sheet).

They are similar, except for the organization and position:

- ❖ Specific notes regarding the attendance sheet for the villagers
 - ***Villagers' status*** can be "people with disability (PwD)" or "Non People with Disability"
 - ***Organization type***. Some villagers belong to an organization. For example, a Village Chief, the representative of the Lao Women's Union or Youth Union will be recorded under "Government", because they are part of the overall Government structure at the village level. The members of the Village Health Committee will be recorded under "Community Based Organization" (CBO). CBO can also be the members an animal raising group or cooperative, for example.
 - ***Position villagers*** is either "parents/care givers of a PwD" or "other villagers". Villagers with disability are included in the second category.
 - ***Name of organization***. Only to be filled if the villagers attend this training as a member of an organization. See examples above in the description of "organization type".

- ❖ Specific notes regarding the attendance sheet for health professionals, Government staff or possibly others
 - ***Health professionals*** can be (a) doctor or nurse in a general hospital, (b) doctor or nurse in a children's hospital, (c) physical therapist, (d) occupational therapist, (e) wheelchair technician, (f) prosthetist & orthotist, (g) community health worker or (h) other.
 - ***Government staff*** can be, for example, ministry staff, staff of PAFO/DAFO, teacher, belong to an administrative service, etc. If a training is not organized at

the village level, this this form is used, Village Chiefs who attend are also considered as Government staff and counted here.

- **Other.** Any other trainee who would not belong to the first two categories (health professionals and Government staff).
- ❖ Each trainee mentions his/her mobile phone number and signs for attending the training.
- ❖ The last columns are filled by the trainer. They summarize attendance and test results:
 - Detailed attendance per day is checked to assess whether the trainee completed at least 50% of the training course. If so, the appropriate box is ticked in front of the trainee name.
 - Pre-test and post-test scores are entered in the table as soon as available.
 - Minimum requirements are set for each specific training to assess whether the trainees successfully passed the post-test. The corresponding column is ticked if the score is equal or higher than the minimum requirement.
 - The column "organization strengthened" is ticked if the trainee attended 50% of the course at least AND if he/she successfully passed the post-test.
 - When calculating the total number of organizations strengthened, make sure that you count an organization only once, even if more than one trainee is from the same organization.

Tips for quality check of attendance sheet

- All fields need to be filled.
 - The total of male and female participants (lines 13 and 14) should correspond to the total number of trainees in the list.
- B. The next sheets, entitled **T1, T2, T3, etc.** aim at providing a general overview of each training provided, based on the information collected on the hard copy: type of training, number and type of trainees and training achievements (pre and post-tests results), based on USAID requirements for reporting. This sheet is filled when back in the office after the training. A graphic illustration of key information is also automatic: trainees per gender, progress between pre and post test per trainee compared to the average score, participation of PwD...

In T1, *a table summarizes all organizations you strengthen and their type* (from line 33 - second table on the left). This is automatically linked to T2, T3, etc. You just need to select which organization has been strengthened by the training course in the corresponding sheet. In case new organizations are strengthened, please indicate their names and type *under T1 sheet*, whatever the training session might be (T2, T3, ...). This will ensure that they show up on the organization list of organizations strengthened. If you do not enter them in the T1 sheet, they will not show up.

Summary tables and graphs. From line 119, a few graphs are generated automatically, based on the tables above. Those graphs aim at providing monitoring tools for following up the types of organizations strengthened, the trainees' profiles (gender, PwD or not, profession), visualize the results of the pre- and post-tests per trainee and possibly providing a specific targeted personal support to some of them. In case the average results are not judged satisfactory, the decision might be made to organize another training (refresher training).

Tips for quality check of T1, T2, etc. You can systematically review if the information recorded on the hard copies correspond to what has been entered in the soft file.

C. The data entered for each training course in T1, T2, T3, etc. is automatically transferred to the next sheet called "**data record**", summarizing all trainings and training information for one quarter.

D. All data are then summarized per quarter into 2 different formats, in the two last sheets respectively:

→ In USAID format in the sheet called "**USAID**".

Please copy and paste from the data record information that you need for this sheet. To facilitate your work the cells to be copied have been highlighted in orange color in the "data record" sheet: training dates, description of activity (training title), number of activities, number of participants, name of organizations strengthened and number of organizations, per type.

Tips for quality check of USAID sheet

Check if the total number of trainees calculated automatically in this sheet corresponds to the number you have in the "data record" sheet.

Same check can be done for the total number of activities and organizations strengthened.

Check that the "cumulative to date" (in line 46) in the last quarterly report corresponds to the "Last period cumulative report" here (line 45).

→ According to TEAM indicators in the "**TEAM**" sheet.

The only information you need to fill is the sub-grantee objectives and cumulative achievements before this quarter in the table (from line 74) in front of each TEAM indicator.

Other information is automatically transferred there from the data record. This sheet provides monitoring tools (tables and graphs) to visualize the quarter achievements and possibly take action if needed.

Tips for quality check of TEAM sheet

Check that the data entered as "Sub-grantee cumulated achievements before this quarter" matches with the "Sub-grantee achievements for current quarter" in the previous quarterly report.

3a- "Capacity building support" file

This file summarizes organizations strengthened by capacity building activities (provision of equipment, materials, funds).

USAID/TEAM definitions

Equipment refers to items with a unit cost of over \$100 that directly improves the capacity of the organization to do work.

Materials refer to same -items with a *total* cost of \$100 or more but unit cost less than \$100”.

Funds refer to any amount of money over \$100 provided directly to the organization

How to count organizations strengthened?

An organization is counted *only once* per life of the project regardless of how many different types of support they have received.

Sub-grantees (service providers) will be closely mentored on how to count organization that benefit from more than one type of support.

Types of organizations: Same as training, see "training" file.

Do not tick more than one box to describe an organization; select the type that best describes the organization.

Frequency and Timing of Data Acquisition. Source data is collected daily, as activities are undertaken. The data is summarized and reported to World Education by each sub-grantee in their quarterly report (quantitative analysis).

Qualitative analysis. This indicator does not measure the impact of the support provided to the organization, so additional tools will be used to determine the impact of the intervention made.

Other action taken to ensure data quality. WEL staff will review data documentation during project visits.

The file is organized in 8 sheets, one per quarter.

In each, please indicate:

- **Description of support**, being specific and include:
 - (a) *What support* (what equipment, material or amount of funds) has been provided (computer, etc.),
 - (b) *How many*. In case 5 computers have been provided, you all include them in the same package, just mentioning "5 computers" in the "support description" column.
 - (c) *To whom* it has been transferred. For example "to the maternity service"
- **Type of support**: Just put 1 in the appropriate column.
- **Name of organization**: mention the name and location of this organization. For example: "children hospital in Luang Prabang".
- **Organization type**: Just indicate 1 in the appropriate category of organization. Same remark as for other files: please select one category only, choosing the one which best describes the organization. The description of each type of organization is provided in the "Training" file above.

Tips for quality check

Check that the data entered as "Last period cumulative reported" (line 32) matches with the "cumulative to date " (line 33) in the previous quarterly report.

4- "Economic self-sufficiency" file

This file summarizes all direct or indirect activities to support the economic self-sufficiency of beneficiaries: education/vocational support, Subsistence, Income Generation, Loans, Job placement, Job Creation, and Others. A definition and examples are provided for each of these terms in the table below.

USAID/TEAM definitions

Type of activity	Definition	Example
Education/Vocational Support	Education support: all experiences in which students can learn something – focus on structured actions (not professional education). Vocational support: resources afforded to beneficiaries to help them access educational services or engage in vocational activities.	- Scholarships for primary/secondary school attendance, fees. If it is a scholarship for professional or vocational training it is counted under USAID indicator 3 "training". - Provision of tools/materials, etc. to use skills learned through training (includes grants provided at the end of livelihoods training)
Subsistence	Activities intended to produce no more output per period than they can consume in that period in order to survive – no attempt to accumulate wealth	- Animal raising for family consumption - Farming for family consumption (tools, seeds)
Income Generation	Activities that result in financial gain as a result of undertaking the activity; small business	- Selling bread - Grinding mill - Animal-raising for profit
Loans	Money or goods provided to an individual or group with an expectation of repayment (with or without interest)	- Revolving loan, microcredit, animal loan requiring some sort of repayment
Job Placement	An activity that matches workers to jobs – there may or may not be incentives attached	- Assign a recent radio repair graduate to a local electronics shop; - Paid Internships
Job Creation	Program or project undertaken that result in unemployed people in getting employment	- Road construction to employ xx people
Other	Any activity related to economic independence or self-sufficiency not listed above	Economic subsidies to remove the barriers to access services, as well as the cost of the services (ie transportation costs to access medical care)

***Provision of starter funds** (grants or in-kind grants) can be counted as Education/Vocational, Subsistence, or Income Generation activities as applicable (discuss with WEL if unclear).

How to count?

An individual is counted only *once* per type of activity during the life of the project. For example: If an individual takes part in two different types of subsistence activities no matter the period, s/he is only counted once.

Sub-grantees (service providers) will be closely mentored on how to count beneficiaries who receive more than one service.

World Education will review data documentation during project visits.

Data Collection Method, Frequency and Timing of Data Acquisition

Each grantee keeps a daily record of individuals who benefit from an activity as it is provided.

The grantee summarizes the data and sends it to World Education with the quarterly progress report (quantitative analysis).

Limitations. This indicator does not measure the quality of activities provided nor does it measure the improvement in quality of life of the individual(s) served.

Evaluation. Therefore, additional tools will be used to determine quality of activities and improvement in quality of life of beneficiaries.

The file is organized in 2 sheets for each quarter:

- A. **USAID sheet.** Records, for each type of activity, the support provided: date, activity, people served (disaggregated by gender and PwD or not). If an activity is the continuation of a previous activity, you mention it in the narrative report, but not in the excel files.

Some graphs for monitoring the achievements are generated automatically under the table.

Tips for quality check of USAID sheets

Check that the data entered as "Last period cumulative reported" (line 45) matches with the "cumulative to date " (line 46) in the previous quarterly report.

- B. **TEAM sheet.** Fill the first table with number of male and female beneficiaries, respectively for economic support, grants and job placement.

Fill the second table with the sub-grantee objectives and cumulated achievements before this quarter.

Monitoring graphs will automatically be generated under the tables.

Tips for quality check of TEAM sheets

Check that the data entered as "Sub-grantee cumulated achievements before this quarter" matches with the "Sub-grantee achievements for current quarter" in the previous quarterly report.

5- "Basketball team" file

This file records the creation of wheelchair basketball teams (A5) and their activities.

When starting a new quarter, please rename the file according to the recorded quarter: "Basketball team Q1" for quarter 1, "Basketball team Q2" for quarter 2, etc.

The different sheets in the file named "Basketball team Qx " are used as followed:

A. **List of basketball players HC** (hard copy).

Please indicate the on-going quarter dates above the table.

In case a quality check of this hard copy is undertaken, please fill "checked by" and the quality check date.

This sheet provides basic information on each basketball player and on each team. This helps to make sure teams are balanced.

When a player has shown regular attendance to practices, a personal basketball wheelchair is assigned to him/her. This is recorded under "date receiving wheelchair" and "wheelchair number" since each wheelchair is numbered.

This sheet also provides contact details for all players.

Tips for quality check of list of basketball players HC sheet

Check that all required information has been collected and makes sense.

B. **Attendance sheet HC** (hard copy) is printed and given to the coach (or team leader) before the practices.

Please indicate the on-going quarter dates above the table.

In case a quality check of this hard copy is undertaken, please fill "checked by" and the quality check date.

You can then tick the team number, as set in the first sheet (list of basketball players and teams).

You can use this hard copy for 7 practices. Make sure each time that the practice is numbered (P1, P2, P3,... P8, P9, P10, etc.), the date is recorded, as well as the location of practice. Each player signs when present.

Please calculate how many players attended the practice and write the total on line 18.

If visitors came and played with the team, please record them in line 19 (visitors with impairments) or line 20 (visitors without impairment).

Tips for quality check of attendance sheet

- Check that the sheet has been totally filled: quarter indicated, team number selected, practice location, practice number and date, name of players and signature when attending practice.
- If visitors came to play, check that they have been registered.

C. List of basketball players SC (soft copy).

This file just records all data collected on the hard copy in the light yellow cells. Information on the players will come automatically from the "list of basketball players" sheet.

Don't forget to indicate when this sheet is being updated.

Tips for quality check of list of basketball players SC sheet

Check that all data entered corresponds to the data collected on hard copies (list of basketball players).

D. Data record and analysis

Fill in the table per team based on the data collected on attendance sheet HC.

Tips for quality check data record and analysis sheet

Check that all data entered correspond to the data collected on hard copies (attendance sheets).

E. Tournaments SC (soft copy)

In case tournaments are organized, they are registered in this sheet.

It indicates when the event took place, which TEAM teams and possibly visiting teams have joined and if there was a press release.

In case of press release, please check the definition of awareness raising and decide whether the press release corresponds to some kind of awareness raising. If so, please fill the social inclusion/awareness raising excel file.

Tips for quality check of tournaments sheet

Check that all recorded data seems to make sense.

F. Summary current quarter

In this sheet, most of the tables will be filled and figures will be generated automatically.

However, it will be necessary to enter (1) the sub-grantee objectives, based on TEAM indicators, as set in the project document and (2) the sub-grantee cumulated achievements before this quarter.

Tips for quality check of summary current quarter sheet

Do those tables and figures seem to reflect reality? If not, go back to source data to double check them.

G. Graph-Team 1 to 7

Figures showing attendance to practices, per basketball team are generated automatically in those 7 sheets, with the aim of giving an idea of each team dynamics.

Tips for quality check of Graph-Team 1 to 7 sheets

Do those graphs reflect reality? Is the attendance regular in each team? Do we see some trends (growing or decreasing attendance)? Do we need to communicate about attendance with the basketball players?

In case attendance corresponds to a topic which needs attention, the project manager can go back to detailed data per player in the "data record and analysis" sheet (column BD) to detect which individual players who don't come regularly.

If you have any questions about this handbook, about any of the Excel files, or about anything to do with Monitoring and Evaluation for TEAM project, please contact:

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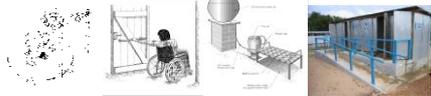
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5. Annex: Listing of types of services, including pictures of assistive devices

ANNEX – Listing of Types of Services (not exhaustive)

Type of Service	Definition	Specific condition
Health-Related Rehabilitation Services		
Surgery	Physical intervention on tissues; including cutting (amputation) or closure of a wound, corrective surgery, cataract, facial surgery	Untreated clubfoot, lower/upper limb amputation, paralysis, severe fracture, burn, secondary deformities, cataract, facial surgery for cleft lip/palate...
Rehabilitation nursing: physiotherapy & nursing for bedridden patients and pre and post-surgery	Measures that aim at preventing or mitigating complications by muscle strengthening, Passive/active mobilization, 24/24 positioning, massage 	Bedridden patients: severe fracture, burn, spinal cord injury, stroke, head trauma, amputation...
Serial casting	Progressive correction by weekly cast (POP)	Clubfoot Ponseti management, joint contracture
Physical and functional therapy	1 Physical and functional assessment 2 Muscular stretching and strengthening, cardiovascular training, 3 weight bearing exercises on orthopedic appliance 4 mobility/gait analysis/training. 5 Functional training for using the device in real activities of daily living situation	Upper and lower limb amputee, spinal cord injury, stroke, cerebral palsy, muscular dystrophy...
Mobility Devices (wheeled and walking)		
Wheelchairs		
motorized mobility aid	3 wheeled motorbike 	
Tricycles	3-wheeled mobility device propelled by pedal cranks (including clip-on pedal for wheelchair) 	
arrow walkers (saddle) and 3 wheels bike	4 wheeled arrow with saddle propelled with steps.  Bicycle with 2 wheel at the back and trunk support. 	
Crutches/walking sticks/canes		
walking frames/walkers		

Positioning Devices		
Wedges, pressure release cushion		
special seats for postural management		
Standing frames.		
Prosthetics		
Upper or/ and lower prostheses		
Orthoses, e.g. spinal braces, hand/leg splints or callipers		
Orthopaedic shoes and insole.		
Daily Living Devices		
adapted cutlery and cups and functional activities of daily living aids		
shower seats and stools		
Transfer board		
Commodes, bed-pan, toilet seats, frames and handle rails		
dressing sticks, Velcro,		
Household-environmental adjustments for accessibility		
Communication Devices		
Communication board		
Electronic or smartphone device	Exercise, stimulation, 	
Vision and Hearing Devices		
Hearing aids		
Visual systems to provide cues		
Glasses/magnifier		

JAWS (Job Access with Speech)		
White cane		
Braille systems for reading and writing		
Psychosocial Support		
Active listening, coping mechanism, conflict management, focus group discussions including nonverbal methods of enquiry.		Depression, psychosis, epilepsy, Post-Traumatic stress disorder (PTSD), dementia

Figure 1: Listing of types of services, including pictures of assistive devices.