

Guidance for the Assessment of CHW HH Registration		Date:
PHC Team Leader Name:	CHW Name:	Mark 1= yes Mark 0 =no
1. Appropriate presentation/ follows dress code		
2. Introduces self to household and explains nature of visit		
3. Establishes a friendly relationship with household members		
4. Explains purpose and procedure of registration visit		
5. Communicated clearly, using appropriate language		
6. Ensures client of confidentiality of information discussed		
7. Contact details of HH completed accurately (i.e. contact name, telephone number, household location)		
8. Determines biological profile of HH members (name, date of birth, age, gender)		
9. Determines economic profile of HH (grants, employment, education)		
10. Correctly identifies dwelling characteristics (water, toilet, electricity)		
11. Accurately completes general household screening questions (section 4)		
12. Demonstrates active listening with clients		
13. Provides referrals to relevant service for all cases that answer yes to screening questions (page 1 and 2)		
14. Provides accurate and clear information to client regarding relevant referrals		
15. Discusses next date for follow up visit with all households		/ 15
Vulnerable households only	16. Correctly identifies vulnerable household through use of further screening questions (section 5)	
	17. Checks relevant records for vulnerable household screening questions; i.e. RTHC, Antenatal card. (section 6)	
	18. Completes recommended action appropriately	
	19. Completes individual health record for all relevant vulnerable household clients	
	20. Discusses vulnerable household with team leader	
Sum up column for score and comment on overall performance		/20
Comments:		