# **Trainer’s Facilitation Guide**

## July 2012

This is a step-by-step facilitation guide for CommCare trainers to facilitate training delivery of the CommCare application to ASHAs in the project area.

**The aim of the guide is to equip trainers with the relevant tools and methods, which they can effectively utilize to deliver training to ASHAs on the use of mobile phones and the Commcare application.**

**Objectives of the Training:**

**1.** ASHAs are well versed with the Commcare application including any glitches that can occur during its use  
2. Support ASHAs learning so that they are able and motivated to use Commcare on their mobile phones to support their work

**Anticipated Results:**

1. ASHAs understand the structure of the CommCare application including modules and forms.
2. ASHAs understand navigation within CommCare modules, forms, case lists, and case detail screens.
3. ASHAs know the purpose of each form and understand the questions in each form. ASHAs also understand key logic and constraint logic within the forms.
4. ASHAs know how they can leverage the case management features (including case lists and case detail screens, sorting and filtering) to support their field work.
5. ASHAs are able to navigate the relevant phone menus that will support their use of CommCare.
6. ASHAs understand how the application communicates with the server (CommCareHQ) using GPRS connection/network and what they should and shouldn’t do to ensure the communication to the server/internet is not disturbed.
7. ASHAs understand the policies and contracts governing the use of the phones, and Commcare. Repercussions of forbidden practices with respect to the use and sharing of their phone, especially as it relates to application deletions, media deletions, and recharge policy is well understood.
8. ASHAs understand the role of Sector Facilitators, Project Officer, Program Officer, and Program Coordinator associated with the project and the supportive roles of ANMs and government authorities as it relates to the project.

**Participants**

# Representatives from Dimagi, and partner organization will be present to support training. There may be a lead trainer and co-trainers depending on the size of the group. It is also possible to include a pilot ASHA if any in order to support the training.

1. *List the participants here.*

**Required Materials for the Training**

1. Nokia C2-01 mobile phone with CommCare application and multimedia installed
2. Nokia charger
3. Optional – Mobile phone audio amplifier
4. Flip charts and markers

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**Day One**

1. **Welcome and Introduction**

**Session Objectives**

By the end of the session, participants

* Recognize the major stakeholders in the project, namely ASHAs themselves, Dimagi, the partner organization, and any other entity
* Understand the background of the CommCare project, including previous pilot work with the partner if any, and CommCare projects across India.
* Understand the data flow from CommCare via the internet to CommCareHQ and the partner organization
* Understand the learning goals of the training as outlined in the ASHA training checklist.

**Components**:

1. Introduction of ASHAs
2. Introduction of Trainer and Partners
3. Background of the Project
4. Commcare use across India
5. Review of Agenda and learning goals of the training

**Estimated time:** 25 minutes

**Trainer’s Notes (Introduction and Background)**

* Give a general background of Commcare and how the particular project came into existence.

*Commcare Background*

CommCare is being used by ASHAs, Anganwadi Workers, and ANMs in approximately 15 states across India. Dimagi has developed this mobile software, and they have supported ASHAs in Maharasthra, Uttar Pradesh, Rajasthan, Jharkhand and Bihar. These ASHAs are using CommCare for counseling pregnant women and mothers of children aged 0-2 years. There are health workers that work with Anganwadi Workers in five districts in Madhya Pradesh who are using CommCare to monitor malnourished children and refer them to the NRC. Link workers in the slums of Mumbai are using CommCare to give counseling about nutrition to pregnant women and mothers with infants.

ASHAs register pregnant women and infants into the CommCare mobile application. In the application, ASHAs will fill out various forms to ensure the pregnant woman has completed all of her ANC check-ups, received immunizations and prepared for institutional delivery. ASHAs can also use a counseling form that displays images and has educational audio messages that she can play for the pregnant woman during a home visit.

*Specific Project Background*

Explain why these ASHAs were targeted to use mobile phone-based job aids to support their counseling home visits to pregnant and postpartum women and newborns.

Give a brief description about the partner organization, how the particular project came into existence, and what it hopes to accomplish.

* Explain the data flow, from the ASHA’s phone, to Commcare HQ, and government authorities.

The data recorded in the application will automatically be sent to government authorities and the partner organization, and Dimagi using internet if the network connection in your area is good. If it not good, it will stay saved on your phone, until the network improves, after which the forms will be sent to these groups.

**Trainer’s Notes (Agenda and learning goals)**

* The purpose of this training is to orient ASHAs on the CommCare application.
* Training on the mobile application will take two days.
* On Day one training will be focused on application structure, navigation, menus and form logic. On Day two training will primarily focus on free form entry, including text in Hindi, numeric, date and time entry.
* On Day two we will reinforce the concept of case management and orient ASHAs on general mobile phone navigation and maintenance.
* It is beneficial to include a section that orients the ASHAs on strategies for effective communication. Since their primary task is to communicate information to the Pregnant women and their famalies including a few exercises on effective communication is helpful and will aid in their work.

**Materials**

* Laptop to play videos of ASHAs from across India using CommCare

| **Component** | **Method** | **Facilitation notes: Welcome and Introduction** |
| --- | --- | --- |
| **Introduction of the ASHAs**      **Introduction of Trainer and Partners   Commcare use across India**  **Review of Agenda and learning goals** | Group discussion  Presentation  Presentation  Presentation | Trainer may ask some ice breaker questions to judge mobile phone experience of ASHAs. Ask the following questions and ask ASHAs to raise hands if any apply to them:   * How many ASHAs own and use mobile phones? How many do not use a mobile phone? How many share someone else’s phone? * Of those that own mobile phones, how many have camera phones? * How many listen to music on their phones? (Often they listen to Bollywood songs or prayer songs). * How many have viewed videos on their phones? (Often they have viewed film songs or clips of movies). * Who puts the music on your phones? (You will come back to this point later on during training when we ask the ASHAs not to give their memory cards to mobile shop owners to load music). * How many know what a memory card is? (You will come back to this point when you distribute the phones. You show the ASHAs the memory card later).   Trainer introduces themselves and gives background of the project, the partner, and CommCare use across India. (*See trainer’s notes*)  *Prep:*  If the resources are available, Co-trainer can set up three videos showing ASHAs using CommCare across India.  Show videos of three ASHAs from different states using CommCare to counsel pregnant women in their villages:   * 1. **ASHA Seema in Kishangarh, Rajasthan:** * Q: Ask the ASHAs to observe how she holds the phone. * Reach a common consensus with the ASHAs that is in line with the recommended practice. * A: The recommended practice is ASHAs show play the audio message, then show the image to the beneficiary. The ASHA should try not to cover the speaker or else the volume of the audio will be too low for the beneficiary to hear.   1. **ASHA Gangai in Chikhaldhara, Maharasthra:** * Q: Ask the ASHAs to observe her method of counseling. * Reach a consensus with the ASHAs that is in line with the recommended practice. * A: ASHAs should use the audio message to prompt counseling and to remind them of the information they should provide. After playing the audio, ASHAs should repeat the information, and elaborate on the information and ask questions to the beneficiary to determine whether she in fact, understood what was said.   1. **ASHA Sushila in Kaushambi, Uttar Pradesh** * Sushila is doing an excellent job counseling this woman from her village. Let’s observe. * Q: What are the good things Sushila is doing as uses CommCare to counsel this woman? * A: Sushila is showing the images to the pregnant woman. The woman is looking at the images and understanding them. Sushila is asking if she understands the information, repeating it and elaborating. Sushila is not covering the speakers on her phone. She is doing a very good job.   Present the agenda and the learning goals for the next two days. Give ASHAs the opportunity to ask questions about the learning goals |

1. **Pre-Knowledge Assessment Test**

**Session Objectives**

By the end of the session, participants will:

* Explain the purpose of the pre knowledge assessment test to the ASHAs, disseminate the test, and review the answers

**Estimated Time:** 30 minutes

**Trainer’s Notes**

* Trainers should dictate the questions in the pre knowledge assessment test to ASHAs and coordinate the administration of this test. The test will gauge the knowledge level of the ASHAs regarding the best practices relating to pregnancy care.
* Trainers should not give away the answers to the questions. They should support them so that they understand the questions clearly and can answer them clearly.
* After disseminating the test, the Trainer or Co-Trainer should scan through the tests for completeness. The trainer must review for any unclear responses and promptly take them up with the ASHA.

**Materials**

* Handout: Pre and Post Knowledge Assessment Test

| **Component** | **Method** | **Facilitation notes: Pre-Knowledge Assessment Test** |
| --- | --- | --- |
| **Administering the Test** | Presentation | Review all questions in the pre knowledge assessment test.  Ask ASHAs to fill out the test. |

1. **Phone distribution**

# 

**Session Objectives**

By the end of the session, participants will

* Know which technology and related components are being provided to them through project and how to use them.
* Understand the policies and agreements the ASHAs are bound by under project with respect to phone use, recharges and processes for lost/stolen/damaged phones.
* Each ASHA present at training has received her assigned phone in an organized and well-coordinated manner.

**Components:**

1. Pre-Phone Distribution
2. Policies and Contracts
3. Phone distribution

**Estimated Time**: 30 mins (may depend on the size of the group)

**Trainer’s Notes (Pre-distribution, Policies and Contracts)**

* Each box should contain the following: Nokia C2-01 phone with a memory card, charger, SIM card pamphlet and headphones. (or the corresponding Samsung parts)

**Trainer’s Notes (Phone Distribution)**

* Ensure that all boxes are labeled with ASHA name and serial number. The trainer and co-trainer should use the inventory list to keep track of the phones they are distributing to the ASHAs to avoid any mistakes.
* At time of distribution, the trainer or co-trainer should take a signature of the ASHA on the Contract and Policy document to confirm transfer of phone and ASHA’s understanding of terms and agreements.

**Materials**

* One mobile phone box, with charger, SIM card pamphlet, and headphones for demonstration
* Copy of the ‘Agreements with ASHAs’ document (are this and the one below different documents?)
* The correct set of phones designated for this batch of ASHAs
* Contracts and Policy Document (for ASHA signatures)
* ASHA inventory list

| **Component** | **Method** | **Facilitation notes: Phone Distribution** |
| --- | --- | --- |
| **Pre-Distribution**    **Policies and Contracts**  **Phone distribution** | Presentation    Presentation  Presentation | Trainer’s opens one box first. Trainer displays all the contents in that box, one by one. All ASHAs should have these components in their phone box.  Review the following items:   1. Serial Number    * Each box should have a serial number. The same number should be labeled on each phone. ASHAs should remember their number. 2. Phone    * Point to the memory card slot.    * Demonstrate how to remove the memory card. Advise ASHAs not to remove it. Removing it too many times can corrupt the files that we put on your phone for your work. (Why to show them this if we don’t want them to do it?) 3. Charger    * Demonstrate where to plug in the charger 4. Speaker    * Show ASHAs where the speaker is on the phone. This is especially important for applications using audio. Recall the videos we watched earlier. 5. SIM card number    * Point to the SIM card pamphlet. The SIM is in the phone. The pamphlet will show the ASHA their new phone number. Advise them to note this number down. 6. Head phones    * Q: What are headphones and when do you use them?    * A: You can connect the headphone to your mobile phone. Any music or audio files you play from your phone including telephone calls can be heard from the headphones.    * We will use headphones during training to listen to all the audio messages in CommCare. If everyone plays the audio at the same time, we won’t be able to hear each other!    * Q: Does anyone know where to plug it in?    * A: The headphone plug is on the top of the phone. You must push hard to plug in the headphones correctly otherwise you not hear anything. The volume will slightly go down when you listen through headphones. This is to protect your ears.   Review the ‘Agreement with ASHAs’ document for the project. Read the agreements line by line. Give ASHAs the opportunity to ask any questions. Inform ASHAs that as they receive their phone, they will be asked to sign this document which says they understand the policies and agree.  *Prep:*   * Organize the phones by serial number * Have the inventory list, which contains the name and serial number of the ASHA ready. * Have copies of the Contract and Policy document ready to collect ASHA signatures. |

# **4. Mobile Phone Orientation**

**Session Objectives**

By the end of the session, participants will

* Know the basic navigational keys that are relevant for operating CommCare
* Be familiar with the mobile phone home screen and various features on this screen

**Components**

* 1. Navigations Keys
  2. Home Screen Orientation

**Estimated Time**: 15 minutes

**Trainer’s Notes**

* ASHAs need to know the basic mobile phone navigational keys and their functions. These keys are necessary to navigate through the phone menus and through the CommCare application.
* ASHAs should verify that the date and time on their phone is correct. They should be able to identify where the network indicator is on their phone.
* ASHAs should also be taught how to set the volume by following the media player. The volume should be loud enough to be heard by their clients.
* Develop a set of terminology for all the keys and features of the phone as a group and address the key/feature as such from here on. Make a list of the terms as they are developed while introducing them to the ASHAs.

**Materials**

* Flip chart: 1) Mobile phone with keypad, 2)Mobile phone home screen.

| **Component** | **Method** | **Facilitation notes: Mobile Phone Orientation** |
| --- | --- | --- |
| **Navigational Keys**  **Home Screen Orientation** | Group discussion & Presentation  ASHA Task,  Group Discussion & Presentation  Group discussion | *Prep:*  Draw the mobile phone on a flip chart.  Draw the mobile phone home screen menu.  Request ASHAs to put down their phones and focus on the drawing. Ask the ASHAs what they know about the various navigational keys on the phone:   * Q: What do the red and green buttons do? * A: If the phone is off and the red button is held down for a long time, it will turn on the phone. You can cancel a phone call by pressing the red call while you are receiving the call or if you are in the middle a call. The red button is an exit button, you will be taken outside of where you are if you press it and everything will close.   Ask all ASHAs to turn on phones by pushing the red call button down. Then ask ASHAs to put down their phones.   * Q: What do the directional keys do? * A: Up scrolls up a list or selects the menu that is above the one you are currently at. You will know which menu you are at because it will be highlighted in a different colour. Most of the time it will be green. If you press down, you will be taken down to the option below the one you are currently at. If you press right and left, the same thing occurs.   If you are in the volume mode, scrolling up and down will also increase or decrease volume.   * Q: What does the center key do? * A: The center key will confirm the option you have currently selected and take you to there. * Q: What does the button above the red button do? * A: The button above the red can be used as a cancel button. It can be used when you are entering a phone number and make a mistake and need to make a correction. It will also take you back to the previous menu. * Q: What does the button above the green button do? * A: Pressing the button above the green button will open up special options. We will use this button in CommCare only a few times. * Q: Do you know what the hash key is? When does a mobile user have to use the hash key? Where is the hash key? * A: The hash key is often used to check your balance. For example, you may have to type \*141# on your phone if you have a Vodafone SIM. The hash key is located below the number 9 key. The hash key will be used in CommCare to play the audio messages.   Direct ASHA to the home screen drawing on flip chart. Ask the ASHAs what they know about the symbols at the top of the home screen. Discuss each symbol briefly and clarify if there is confusion.   * Date and time (verify this is correct for all ASHAs). * Signal/Network – Do they all have good network? * Charging/Battery – Are their batteries charged? |

# **5. Application Startup**

**Session Objectives**

By the end of the session, participants will

* Learn how to open the CommCare application using the shortcut.
* Learn how to close the application in the correct way to avoid corruption of application files.
* Understand the difference between using the application in the login versus demo mode and purpose of each of the modes.

**Components**

* 1. Opening and Closing CommCare
  2. Difference between Login and Demo Mode

**Estimated Time:** 40 mins

**Trainer’s Notes**

* The CommCare application does not operate like a television set. On the contrary, it operates like a computer. For this reason, we need to understand, learn, and reinforce the correct way to open, close, and exit the application to minimize risk of corruption.
* Navigation in CommCare is designed similar to the way a mobile user navigates through the phone menus. Establishing a strong understanding of how to navigate through the application during training will enable the ASHA to fully take advantage of the information stored in the application to plan their work.
* When training to lower-literate users on navigation, trainers must be consistent about the words used during training. Refer to the standardized bank of terminologies we developed during the Mobile Phone orientation.
* The ASHA must register and complete all of her actual work in login mode. To enter login mode, she must enter her password, scroll down, select the “login” button and press the center key. The demo mode is used for practice, during training or for demonstrations. It is important that users understand the difference between demo mode and login mode, so that they avoid working in demo mode even after training. After training, they should switch to login mode. UserIDs will be provided to them on the last day of training.

**Materials**

* Flipchart: Login Screen

| **Compontents** | **Method** | **Facilitation notes: Application Startup** |
| --- | --- | --- |
| **Opening and Closing Commcare**  **Difference between Login and Demo Modes** | Group task  ASHA Task  Presentation  ASHA Task  Presentation  Presentation  ASHA Task  ASHA Participation  Presentation  ASHA Participation  ASHA Participation  Group Q/A | *Prep:*  Draw the CommCare Login Screen.  **1: Opening and Closing Commcare**  Ask ASHAs to open the CommCare application using the Shortcut key (the button above the red button). Explain that the application will take some time to load and get ready.  Ask the ASHAs how they would normally close and exit the application.   * The application files execute and load in order to display information to the user. When turning the television set off, we push the red button and when opening we also push red. Unlike the television set, we should not exit and close the CommCare application by pressing the red cancel button at any point. If we do this too often, it may corrupt the files and could damage important reports. We should always navigate backwards through the menus, until we reach the login screen and then exit the application. We should always use the right options key to exit all the way out.   Point the ASHAs to the Exit button on the login screen. This is referring to the button above the red. It is used to open CommCare and close CommCare.  Request the ASHAs to close the application from the login screen using the Exit button. Open the application using the same button/short-cut key once again.  **2: Difference between Login and Demo Modes**  Explain the difference between login and demo mode.   * The demo mode is the exact same copy of the real login mode. We practice in demo and we do our real work in login mode. ASHAs will switch to login mode after training when they start entering real work. * You may use a metaphor to describe the demo mode: Demo mode work is like when one is a young girl and learning how to cook, clean and do household work in the home at her mother’s home. In demo mode, the girl can make mistakes and learn and practice. We move into login mode after getting married, and thus at the in-laws house we cannot make mistakes. In demo mode (i.e. at our mother’s home) she can prepare so that she can perform well when she is married at her in-law’s home (login mode).   Explain that all users will have a unique ID and password.   * Reinforce that users should not share their passwords. You may use the metaphor of an ATM card or PIN to withdraw money. Similar, talk about CommCare as if it is her registry. She does not show her registry to. This is all confidential information. * At this point, ASHAs will see ‘admin’ in the name field. Explain that admin mode refers to the login any technical staff on the project will use if their phone has any problems. On the last day of training, they will see their names.   Invite ASHAs to login into demo mode. Down once, then center key.  Ask one ASHA to read the demo message out loud. Clarify the meaning of this message. Press the ‘OK’ button and stop at the modules page.  Bring to the trainers attention that the top blue header of CommCare shows the user’s name. Right now, it should say ‘demo\_user’. When are in login mode, it will display our name.  Ask one ASHA to explain the difference between demo and login mode before continuing.  Share experiences from pilot work where ASHAs started doing real work in demo mode. This data cannot be transferred—the ASHA had to go back and redo the work in login mode. Similarly, share examples when ASHAs have used demo mode to show the mobile application to health officers, family members and women who are not from their village. This is a good use of the demo mode.  Test Question:   * Q: How will I be able to tell which mode I am in? Demo or login? * A: The blue header will display the username. Or if you have entered demo mode by accident, you will receive a message before you can continue. You can correct your mistake and exit the demo mode. You can press OK, and then go back to the login screen (press the button above the red to go back). |

# **6. Application Structure**

**Session Objectives**

By the end of the session participants will

* Know the modules and forms included in the CommCare application
* Understand how to select and navigate through CommCare modules and forms
* Understand the concept of case management and opening, modifying and closing cases

**Components:**

* 1. Modules
  2. Forms

**Estimated Time:** 15 minutes

**Trainer’s Notes**

* There may be one, two, or more modules in the CommCare application; each module will consist of forms that the ASHA will have to fill out. Some of the modules maybe be sub-cases of the parent module, in which case information recorded in the parent module is carried forward into the sub-case so that the same information does not have to be entered again.
* To understand the purpose of each form, the user must also understand the concept of case management. In CommCare, registration forms open cases and add them to the case list. There are other forms which are filled for every case. There are also forms that when filled completely close a case or remove that case from your list.
* Describe modules as chapters in the application.
* Describe forms as actions a user will take for that case. (i.e. Prenatal visit or postnatal visit or editing a registration). These are all activities that we are doing to change something, or update something about a case.
* Describe cases as people or a client, such as a mother or child. We can open a case, follow-up, update and fill out different forms for a case, and then we close a case once their case is complete. As deliveries are completed, the ASHA will close the mother cases and as new pregnancies identified, new cases will be registered in CommCare.

**Materials**

* Flipchart: Modules, Forms, Case List and Case Detail Screens
* Handout: Application Modules, and Forms Guide

| **Components** | **Method** | **Facilitation notes: Application Structure** |
| --- | --- | --- |
| **Modules**  **Forms** | Presentation  ASHA Task  Presentation  Group Q/A  Group Q/A | *Prep:*  Draw the module, forms, case lists and case detail screens on the flipchart. Paste flipchart papers in the order of navigation.  Ask ASHAs to put down their phones and focus on flipcharts for now.  Introduce the modules in the application   * There may be one, two or more modules in the application. Each module contains forms that must be filled out on behalf of the mother by the ASHA. * Trainer should establish some basic definitions about case management as they speak about modules, forms, and cases. See Trainer’s Notes.   Explain how to select the modules: To select the desired module press the number next to the module’s name. Demonstrate that you can press 1 and then subsequently 2. The selected option will be colored blue. To confirm the selection, press the center key.  Invite all the ASHAs to select the first module.  Introduce the forms in the module and purpose of each form   * Q: How do I know which module I am in? * A: The blue header will display the module name.   Ask the ASHAs if they know how to go back to the previous menu. Direct them to the Back button (button above the red button).  Ask the ASHAs to open the next module. Press 2 and then the center key. Introduce the forms in the second module. More forms will be seen here.  Ask ASHAs to go back to the modules screen and open the first module. Then ask them a few test questions:   * Q: What forms are in the module? * A: * Q: If I press 1 on the modules screen and then 4 on the forms screen, which form will open? * A:      * Q: How do I know which module I am in? * A: The name of the module appears in the blue header.      * Q: If I am in the forms menu but I want to go back to the module menu, how do I go back? * A: Press the back key, which is the button above the red button.   Test questions:   * Q: What does it mean to create a case? * A: We will create cases by registering pregnant women and infants into our application. * Q: What does it mean to modify or update a case * A: When we complete visits we will update information about the pregnant women and infants that are registered on our phones. * Q: What does it mean to close a case? * A: Once the pregnancy is complete, we can close the cases from our phone, which will cause the name to disappear from our phone. |

# **7. Case Lists and Case Detail Screens**

**Session Objectives**

By the end of the session participants will

* Know how the case list and case detail views are organized.
* Know how to navigate to and between the Case List and Case Detail View.
* Understand the content displayed (i.e. the information displayed) in the case list and case detail views.

**Components**

1. Case Lists
2. Case Detail Screen

**Estimated Time**: 30 minutes

**Trainer’s Notes**

* Case list view help the ASHA to manage her workload and see key information about the client, usually the EDD
* Case detail view help to inform the ASHA about the particular client further, as there is additional information that is displayed here which isn’t displayed in the case list
* The information displayed in case detail view is like a ‘report card’ or ‘progress report’ for the mother and child. In the case detail view, we can see a lot of different information that was collected in previous visits.

**Materials**

* Flipchart : Case List and Case Detail Screens

| **Components** | **Method** | **Facilitation notes: Case List and Case Details Screens** |
| --- | --- | --- |
| **Case List**  **Case Detail** | ASHA Task  Presentation  Group Q/A  Presentation  ASHA Task  Presentation  Group Q/A  Group Discussion  Presentation  ASHA Task & Group Q/A | *Prep:*   * Drawing of case list with demo cases * Drawing of case detail view with information displayed   Ask ASHAs to open the “Case List” form. Ask ASHAs to put down their phones and follow along on the flipcharts.  Introduce the Case List:   * Q: What information is displayed on the case list?   + Name   + Any other information * Q: How many cases do I have registered in my list? * A: Direct the ASHAs to the number in brackets in the header. Explain that they will have to scroll down to view more cases in the list, as only 5 names will fit on the small mobile screen. Newly registered cases will be added to the bottom of the list, so you will have to scroll all the way down to find them.   Test questions to ask ASHAs based on flipchart for case list:   * What is the name of the pregnant woman whose delivery is approaching in the next month? * Who is delivering in the month of \_\_\_? * What is the EDD of [name]? * What was the previous menu? * How do I go back to the previous menu?   Explain navigation: To select a case, you will have to scroll down until you find the client you want. Then to confirm your selection you have to push the center key.  Ask all ASHAs to open a specific case together.  Introduce the Case Detail View. Review all the information displayed in the case detail form on the flip chart. Ask the ASHAs to put down their phones and follow along on the flip chart.   * ASHAs will be collecting information from and delivering information to beneficiaries. Some of the information they will collect will be saved on the phone so you can review it at a later date. This is saved in the case detail view. * Q: What information do you see in the case detail view? * A:   Discuss as a group some situations where case detail view can be used. Ask the following questions:   * What are the various scenarios in which the ASHA may be able to take advantage of these two features (case list and case detail) to support her field work? * How can you use the detail view to identify and distinguish between patients with the same name?   Discuss these use cases:   * If there are multiple names in the case list which are the same, but you need to differentiate the case with other information, like the husband’s name for example or the mother’s name. * If the ANM is coming to do ANC soon and you want to review which women require ANCs or Tetanus immunizations. * If you are sitting at the Anganwadi center and you want to review information about your beneficiaries. * If a doctor at the hospital asks you about the ANC history of the pregnant woman or contact information.   Explain navigation. To view more details, push the down key. To go back to the case list view, press the back key. (Do the ASHAs remember how to go back?). Pushing the center key on the detail screen will take the ASHA to the first question in the form. Ask them not to do this or raise their hand if they open the first question by accident.  Test questions: Ask the ASHAs a bunch of questions that will test their ability to navigate between the case list and case detail views to answer your questions.  Ask some questions about the details on the case details screen.  For example:   * How do I go back to the case list? * What is the husband’s name of [name]client? * What village does [name] the client live in? * Does [name] client have a mobile number? * How many ANC check-ups did [name] the client complete? |

# **8. Application Content and Forms Logic**

**8.1 Navigation Within Forms**

**Components**

1. Re-cap Navigation in CommCare Menus
2. Navigation within forms

**Estimated Time:** 15 minutes

**Session Objectives**

By the end of the session participants will

* Know how to navigate from the Login Screen to the Case Detail Screen of a specified case and back.
* Understand how to navigate between the case list and case detail view.
* Understand how to move to the previous menus and how to select and confirm desired forms
* Know how to answer single select questions and navigate to the previous and next questions.
* Know how to play the audio message for each question, and understand how to use the audio/visual components during counceling
* Know how to exit a form mid-way through.

**Trainer’s Notes**

* The forms may change depending on the specifics of the application. Make sure to guide the ASHA through all the forms in case your application has some additional components not mentioned here.
* To navigate between form menus, the ASHA will always have to select an option by pressing a number. Then, the ASHA must confirm the selected option by pressing the center key.
* Going back to a previous menu will always be the button above the red button. Ensure the ASHAs can see the button that says ‘back’ at the bottom of the screen.
* ASHAs will have to scroll up and down in the case list and case detail views.
* It is recommended not to begin training with the registration forms on day one, but rather have pre-created patient lists on the phone and introduce the registration forms on day two. On day one, we will introduce all the forms, except for the registrations forms, so that we can focus on ensuring the ASHAs understand navigation and entering simple data. On day two, we will introduce typing text after the ASHAs have built more confidence using the mobile system and demonstrate the eagerness to learn something new.
* To exit mid-way from a form, you will have to push the button above the green button and select ‘bahar nikale.’ Trainers should introduce this concept only after they feel ASHAs in their group are comfortable with above navigation. Remind ASHAs that if they exit a form mid-way their data will not be saved. They must complete the form for data to be saved.

**Materials**

* Flipcharts: Show all screens from login to case detail view.
* Flipchart: Show different question types in the checklist, counseling forms and outcome forms. Describe in order: label questions, yes/no questions, and multiple choice questions (non yes/no format).

| **Components** | **Method** | **Facilitation notes: Application Content and Forms Logic (Navigation)** |
| --- | --- | --- |
| **Recap Navigation in Commcare Menus**  **Navigation within Forms** | Presentation & Group Q/A  ASHA Task    Presentation  ASHA Task  Presentation | *Prep:*   * Ensure all the flipcharts with key CommCare menus (Login in, Modules, Forms, Case List and Case Detail) are posted on a wall in the correct order.   ***Part 1: Recap Navigation in Commcare Menus***  Demonstrate the workflow of CommCare: Module > Case List> Case detail > Forms > Inside a form. Reinforce and repeat which buttons to navigate forward and backwards. Use the flipcharts to demonstrate workflow and test understanding of ASHAs.  Give ASHA an opportunity to ask any questions they might have on what has been discussed so far about navigating CommCare menus  ***Part 2: Navigation within Forms***  Invite ASHAs to navigate to the pregnancy module, and select the pregnancy checklist and open the case of a client. \*\*\*This case should not have any previous checklists filled out.  Label questions:   * The first question in each of the forms will display the name of the client to verify the case so that the form is not filled out for the wrong case. Here, they have one more chance to confirm they have selected the correct case. * You do not have provide any answer for these questions. Only push the center key to move on to the next question.   Ask ASHAs to push the center key to see the next question. Then ask ASHAs to put down their phone and focus on the flipchart drawings.  Trainers should remember to train on the following navigation points:   * There is text above every image that describes the question. * How to select the desired option. 1 for yes, 2 for no. The color will change. * Going to the next question * Audio playback (hash key) * Entering an answer * Going back to a previous question * Exiting a form midway. Remind users their data won’t be saved.   Emphasize the recommended practice of using images and audio: 1) Play the audio message by pressing hash (#), clarify if the pregnant woman understood the question, enter the answer, elaborate or counsel, then proceed to the next question.  Demonstrate this concept with one or two questions. Then move on to the subsequent session where we will speak about skip logic. |

# **Pregnancy Checklist**

**Estimated Time:**30 minutes

# **Session Objectives**

By the end of the session, participants will:

* Understand the questions and skip logic in the pregnancy checklist form.
* Understand that information entered in the checklist gets updated on the case detail screen.
* Be able to identify the end of the form and know how to submit the form once complete.
* Know how to check the number of unsent forms.

**Trainer’s Notes**

* For ASHAs to effectively use CommCare they will have to know the contents of the form, questions in the form and the logic. They may refer to the project specific Application Guide if they have any questions.
* Data will not be saved if the ASHA exits the form mid-way. She must complete the form until she sees the CommCare logo and then push the center key twice.
* To verify if the form was sent, wait for a notification or check if there is a number next to your username in the modules screen. This will tell you the number of unsent forms from your phone.

**Materials**

* Flipchart: 1) CommCare logo that represents end of the form. 2) Connectivity symbols.
* Handout: Project Specific Application Guide

| **Component** | **Method** | **Facilitation notes: Application Content and Forms Logic (Pregnancy Checklist)** |
| --- | --- | --- |
| **Pregnancy Checklist** | Presentation  ASHA Task  Group work | Ask ASHAs to put down their phones and focus on your phone as you demonstrate the skip logic in the checklist form.  Review all questions one by one, demonstrate skip logic as you go along. Start with a demo case for which a checklist has not been filled.  Stop at the last question: Explain that the CommCare image indicates the end of the form. To submit a form, press the center button here. ASHAs will see a confirmation message. Press the center button again to submit the form.  After this, ASHAs may hear beeping from the phones to indicate money has been deducted for the form submission. This is normal.  If GPRS is activated, they will receive a notification that the data in the form was sent and a small amount of money was deducted. They may see the letters E or G in the top left hand corner of their screen at the time of submission.  On the modules screen, explain that a number next to the username on this screen indicates the number of unsent forms. When there is network the forms will be sent automatically. (The trainer’s phone may or may not have a SIM).  Go back to that case and demonstrate the saved data in the case detail view.  Proceed to opening the Checklist once again for this case. And get ASHAs to observe how the skip logic has changed and the form has remembered previous answers.  Invite ASHAs to work in groups to fill out checklist forms for each other. You may recommend that the ASHAs plug in their headphones.  Trainer should support ASHAs and be available to answer any questions.  At the end of the practice session, trainer should recall and answer all questions asked by ASHAs for the group. |

# **8.3 Pregnancy Counsel**

**Estimated Time** : 30 Minutes

# **Session Objectives**

By the end of the session, participants will:

* Understand the questions and skip logic in the pregnancy counsel form.
* Understand that information entered in the counsel form gets updated on the case detail screen.
* Be able to identify the end of the form and know how to submit the form once complete.
* Know how to check the number of unsent forms.

**Trainer’s Notes**

* The pregnancy counsel form starts by displaying the recommended counseling topics for the selected client, and asks the ASHA whether or not she wants to counsel on the topic. The topic is recommended based on the client’s checklist and the number of months she is pregnant. The ASHA can decide whether or not she will counsel on the topics that are recommended. To counsel, select yes. To skip, select no.
* If the ASHA decides to counsel on the recommended topic, various counseling messages will be displayed with an image and audio message. The ASHA can play the audio by pressing the hash key, show the image to the woman, counsel and elaborate and then proceed to the next message in that topic.

**Materials**

* Flipchart: Table that outlines which counseling topics appear at which month/trimester.
* Handout: Project specific Application Guide

| **Component** | **Method** | **Facilitation notes: Application Content and Forms Logic (Pregnancy Counsel)** |
| --- | --- | --- |
| **Pregnancy Councel** | Presentation  Group Q/A  Presentation  Group Q/A  Group work | Ask ASHAs to put down their phones and focus on your phone as you explain how the counseling form is structured. Explain the purpose of the Pregnancy Counsel form. Introduce the different counseling topics and when they will appear. Explain that the ASHAs have a choice whether they would like to counsel on a recommended topic or not.  Select a case that you have pre-set to display certain counseling topics. Demonstrate the pregnancy counsel form for this case. For some topics select no to counseling, and demonstrate the skip logic. For other topics select yes to counsel and walk through the counseling messages.  Stop at the last question/CommCare logo.   * Q: What does the CommCare image indicate? * A: End of the form.      * Q: How will the ASHA know the form was sent successfully? * A: Beeping notification or balance deduction message, E or G in the top left hand corner of the screen, and no number next to their username on the modules screen.   Go back to that case and demonstrate the saved data in the case detail view. The case detail view displays the date the ASHA counseled on this topic.   * Q: How can they use the dates that appear here to improve counseling? * A: Review the dates you counseled on each topic and if that topic displays again in the counsel form, consider discussing the messages in this topic this time.   Invite ASHAs to work in groups to fill out the counseling forms for each other. You may recommend that the ASHAs plug in their headphones, if it gets too loud, though that defeats the purpose of counseling.  Trainer should support ASHAs and be available to answer any questions.  At the end of the practice session, trainer should recall and answer all questions asked by ASHAs for the group.  After each ASHA has filled one form, trainer should navigate to the Memory Card and play all audio files in the Pregnancy Counsel folder from phone. This will give ASHAs the ability to hear all the messages together. |

# **Pregnancy Outcome**

**Estimated time:** 30 minutes

# 

**Session Objectives**

By the end of the session, participants will:

* Understand the questions and skip logic in the pregnancy outcome form.
* Know the pregnancy outcome form will close the case, and may create a sub-case for the baby.

**Trainer’s Notes**

* The Pregnancy Outcome form should be filled for every client on delivery, miscarriage, or abortion.
* Filling out this form will remove the case from the pregnancy case list.

**Materials**

* Flipchart images: Case list screen
* Handout: project specific Application Guide

| **Component** | **Method** | **Facilitation notes: Application Content and Forms Logic (Pregnancy Outcome)** |
| --- | --- | --- |
| **Pregnancy Outcome** | Presentation  Group Q/A  Presentation  Group work | Ask ASHAs to put down their phones and focus on your phone as you explain how the outcome form is structured. Explain the purpose of the Pregnancy Outcome form.  Select a case. Explain that some questions in this form do not have audio because they are sensitive. Stop at the last question/CommCare image. Remind ASHAs if they push the center key here the case will be removed from their case list and cannot be restored. If they have arrived here by accident, they can exit the form.   * Q: Does anyone remember how to exit a form? * A: Button above the green button, will open option. Select bahar nikale/exit.   Go back to the case list and demonstrate that the case has been removed from the list.  Invite ASHAs to work in groups to fill out the two outcomes forms.  Trainer should support ASHAs and be available to answer any questions.  At the end of the practice session, trainer should recall and answer all questions asked by ASHAs for the group.   * Q: Ask ASHAs if their cases have disappeared? |

**Wrap up and Feedback on Day O****ne**

Give ASHAs the opportunity to revisit the key learning of the day, and provide feedback on day one. Ask what they liked the most in the day’s workshop, and what could have been done better.

**Day Two**

Start day two with a recap of day one, and review all navigation, and key highlights from day one of training.

**Trainer’s Notes**

Questions to ask ASHAs prior to training on Day Two:

* How many ASHAs practiced last night?
* Did you practice only on the forms we worked on yesterday or explored other forms?
* What did you tell your families about the training and this new program?

Review the following Navigation points:

* Open CommCare (key above the red button)
* Login vs. Demo
* Scrolling up/down
* Selection (center key)
* Navigation between case list and case detail (center key and back key)
* Navigating from case list to forms list
* Answering questions
* Next question (center key)
* Options keys (number key pad)
* Audio key (Hash - #)
* Previous question within form (right soft key)
* Exiting within a form (left soft key, down, and center)

# **Text Entry**

**Estimated Time:** 40 Minutes

**Session Objectives**

By the end of the session, participants

* Know how to type in Hindi letters, vowels/accents and special symbols on the phone.
* Know how to use the Hindi keypad illustration tool and the tabular Hindi key pad tool as a guide for Hindi typing on mobile phones.
* Know how to switch between the various the typing modes (Hindi, English, and numeric) through the text box and through the settings menu.

**Trainer’s Notes**

* There are not many of these types of free form text entry fields in the application overall. The text entry questions are limited to the registration forms (mother and infant).
* ASHAs will likely find it easier to type in Hindi rather than English in the free form text entry fields in CommCare such as name, village, husband’s name, infant’s name etc
* It is recommended not to begin training with the registration forms on day one, but rather have pre-created patient lists on the phone and introduce the registration forms on day two.
* We recommend training Hindi typing through the text message composing window in ‘Messages’. In this way, we can train the ASHAs how to send and receive SMSs along with typing. In CommCare, the typing window is the same window that opens when the user composes a text message.
* If prediction is on, ASHAs may get confused. Turn prediction by pressing long on the hash key. Select the second option to turn prediction off.

**Materials**

* Whiteboard, flipchart, markers
* Handout: 1) Hindi keypad illustrations. 2) Hindi typing table
* Flipcharts: Draw Hindi Keypad

| **Component** | **Method** | **Facilitation notes: Text Entry** |
| --- | --- | --- |
| **Text Entry** | ASHA Task  Group Q/A  Presentation  ASHA Task  Presentation  Group discussion  Presentation  ASHA Task | *Prep:*   * Draw the Hindi keypad illustration on the flipchart   Ensure everyone closes the application correctly if open. Ask everyone to return to the homepage.  Questions to ask ASHAs:   * How many read SMSs? * How many know where the inbox is? * How many type SMSs? * How many prefer English menus on phone? Hindi? * How many would prefer to type in English vs. Hindi?   Guide ASHAs to open the Messages menu and the SMS composition window. Center key for Menu> Messages > Create a Message > Message.  Ask everyone to enter a mobile number they know of a family member, husband or friend in the first field. Then ask ASHAs to put down their phones and focus on the Hindi keypad drawing.  Review the Hindi keypad illustration. Distribute the handouts.   * Several letters can be found under each number. * All the vowels can be found in 2 and 3 and some in 1. * You have to press the number a specific number of times to get the letter you want. * Explain how to type half letters. Press star key after the first letter, then enter second letter. They will be joined.   Trainer facilitates group discussion:   * Ask the group for common names in the region. Write these names down on the flipchart. * Based on the Hindi keypad guide, ask the ASHAs which key contains the necessary letters and how many times they will have to push those keys. * Write the number and the number of times they have to push the key to get the desired letter under each letter of the name.   Trainer should demo typing a name in their phone:   * Demonstrate the speed at which the keys should be pressed (not too slow, but not fast either, even pace). * Explain that the 0 key adds a space. * Pressing the Hash key changes the typing mode (numeric, English, Hindi). * Holding down the Hash key changes prediction. (Talk about turning prediction off). * Explain how to find special symbols. (Press and hold star key).   **TASK for each ASHA: Type the number of the recipient, type her name in Hindi and send the message.**  Emphasize that with practice it will take less time. This has happened with all the ASHAs that we’ve worked with. At first, they take 10 min to write a name, and then they take half as much time or even less. |

# **Registration Forms**

**Estimated Time:** 1.5 Hours

# **Session Objectives**

By the end of the session, participants will:

* Understand how to fill free form text entry field, date fields and time fields in the Pregnancy Registration and Baby Registration forms.
* Understand that the registration forms create a case and add the clients name to the case list.

**Trainer’s Notes**

* Notice that when you open this form, you don’t see a case list. This is because we are creating a name here. If we fill this form, a new name will be generated in all of your case lists
* For text entry questions in CommCare, it is recommended to make it mandatory for ASHAs to push the ‘hash’(*#)* key. This will prompt the text entry window to open and then the ASHA may start typing text. If they do not press the ‘hash’ key, the very first letter they start typing will only prompt the text entry window to open but will not itself appear in the text box. The user then will have to enter that letter again.
* Some questions are required and others not. Some questions have specific limits, so you have to answer within the correct range. If you try to skip a required question, or enter data that is outside of the range, the application will display a warning. Read the warning message. Understand your mistake. Press the center key to confirm that you understand and then make the correction.
* For date entry questions, the ASHA must enter 0 for single digit months and dates. For example, January 1, 2012, must be entered as 01-01-2012. Instruct the ASHA to enter the full year. In total, the ASHA should type 8 digits consecutively. Demonstrate any validation with date questions in this form.
* Mention the importance of data that affects skip logic in pregnancy counsel form.
* All new registrations will be added at the bottom of the list by default. ASHA will have to scroll down to view the newly registered case.

**Materials**

* Flipchart: Text entry questions, date entry question type, numeric question type, and constraints
* Handout: Project Specific Application Guide

| **Component** | **Method** | **Facilitation notes: Registration Forms** |
| --- | --- | --- |
| **Registration Forms**  **Text Input**  **Date Input**  **Creating Cases**  **Baby Registration**  **Time Input**  **Create a Baby Case** | Presentation  Group Q/A  ASHA Task, Group Work  Presentation  ASHA Task, Group Work  Group Q/A | Ask ASHAs to put down their phones and focus on trainer’s phone. Trainer reviews each question in the Pregnancy Registration form including the skip logic, required questions and key constraints. Follow the project specific Application Guide.  Focus on the following input types:   * Text input:   + To start typing, press the hash key. This will play the audio clip and also open the composition window, where you can start to type. Encourage ASHAs to get in the habit of pushing hash for all text fields.   + As you demonstrate typing a name, recall all of the tips you shared in the previous session. Ask ASHAs to tell you where to find the letters. * Date input:   + ASHA must enter 0 for single digit months and dates. For example, January 1, 2012, must be entered as 01-01-2012. Instruct the ASHA to enter the full year. In total, the ASHA should type 8 digits consecutively.   Test questions:   * Q: What should we do if we receive a warning message? * A: Read the warning message. Understand your mistake. Press the center key to confirm that you understand and then make the correction.   Task for ASHAs: **Create two pregnancy cases in the Pregnancy Module.** Work in pairs.  Trainer should support ASHAs and be available to answer any questions. If trainer sees ASHAs who are learning very quickly, request them to help peers who are sitting next to them. At the end of the practice session, trainer should recall and answer all questions asked by ASHAs for the group.  Ask ASHAs to put down their phones and focus on trainer’s phone. Trainer reviews each question in the Baby Registration form including the skip logic, required questions and key constraints.  Focus on the following input types:   * Time input:   + Enter the time in hours and minutes. To select AM/PM, you have to press the button above the green.   Task for ASHAs: **Create two baby cases in the Baby Module.**  Trainer should support ASHAs and be available to answer any questions. If trainer sees ASHAs who are learning very quickly, request them to help peers who are sitting next to them. At the end of the practice session, trainer should recall and answer all questions asked by ASHAs for the group.  Question to all ASHAs at the end of the exercise:   * Who registered the most pregnancy cases? * Who registered the most baby cases? |

# **Edit Forms**

**Estimated Time:** 75 Minutes

# **Session Objectives**

By the end of the session, participants will:

* Understand when and how to use the edit forms.
* Know the information displayed in the Baby case detail view.

**Trainer’s notes**

* Remember, for text entry questions in CommCare, it is recommended to make it mandatory for ASHAs to push the ‘hash’(*#)* key.
* The edit forms should be filled out only if the ASHA needs to change the details of the pregnant woman or baby. They may edit dates (i.e. EDD, or DOB) or correct spelling of names if there are errors or if the baby is finally named.
* For any text updates, the cursor will be at the left hand side of the text, so to delete the ASHAs will have to use the left scroll pad to bring the cursor to the right hand side of the text. Then she can proceed to deleting the text and re-entering.
* ASHAs can also delete any incorrect cases. Share some use cases, but warn that if this option is selected the case cannot be restored.

**Materials**

* Flipchart images: Text entry question: Draw the cursor on the left hand side of the text.
* Handout: Project Specific Application Guide

| **Component** | **Method** | **Facilitation notes: Edit Forms** |
| --- | --- | --- |
| **Edit Pregnancy Registration Form**  **Edit Baby Registration Form** | Presentation  ASHA Task  Group Work  ASHA Task  Group Q/A  Presentation  Group Q/A  ASHA Task | Ask ASHAs to put down their phones and focus on your phone as you demonstrate how to use the Pregnancy Registration Edit Form on your phone.  Go back to the case detail and/or case list screens for this case and show the ASHAs the updated fields.  Invite ASHAs to work in groups to fill out edit forms for cases in their pregnancy list.  Trainer should support ASHAs and be available to answer any questions.  At the end of the practice session, trainer should recall and answer all questions asked by ASHAs for the group.  Ask ASHAs to open the Baby Edit form. Review the information displayed in the case lists and case details view, and ask questions for understanding.  Baby case list:   * Name * DOB – dd/mm/yyyy format * How many names are displayed on your case list? * How many total names are there? Point to the brackets in the blue header (see number in brackets on blue header)   Baby case detail view: (in general will have these components)   * शिशु का नाम, जन्म की तारीख, माँ का नाम,  *नम्बर,*  *गांव का नाम ,* *शिशु का लिंग,*  वजन, *प्रसव का समय (pre-term):*  "कम समय" (premature) or "सामान्य समय" (normal).   Test questions:   * What is the name of the infant who was born this month? * Who was born in the month of \_\_\_? * What is the DOB of [name]? * What was the previous menu? * Which baby was pre-term? * How do I go back?   Invite ASHAs to try to update fields in the Baby Registration Edit form. |

# **Receiving SMS from CommCareHQ**

**Estimated Time: 15 Minutes**

**Session Objectives**

By the end of the session, participants will:

* Know how to identify and open received SMSs from CommCareHQ.
* Know how to navigate to the Inbox to read previously sent messages from CommCareHQ.

**Trainer’s notes**

* ASHAs may receive text messages from the project team. All messages sent from the project will appear as ‘COMCAR’. Read these messages. Note that ASHAs cannot reply to these messages.

**Materials**

* Flip charts: Draw out the process of accessing the Inbox

| **Component** | **Method** | **Facilitation notes: Send and Receive SMS from CommCareHQ** |
| --- | --- | --- |
| **SMS from Commcare HQ** | Presentation  ASHA Task  Group Discussion | *Prep:*   * During installation, the technical team will send out messages to all phones. If this has not been completed and trainer has access to internet and a laptop, they may send out an SMS to the training group from CommCareHQ.   Demonstrate using images drawn on the flip chart how to navigate to the Inbox.  Ask ASHAs to navigate to the Inbox. Q: How many received an SMS from COMCAR?  If they did not receive a message from CommCare, verify that we have the correct phone number in our inventory list. Note the correction.  If the number is correct, verify that the SIM is registered and working.  If the SIM is working, verify that the user has opted in to receive messages from Dimagi.  Note any unresolved issues and share with the project team after training. |

# **Advanced Orientation**

**Components**

1. Advanced Phone Menus
2. Sorting and Filtering

**Estimated Time:** 30 Minutes

**Session Objectives**

By the end of the session, participants will:

* Understand relevant phone menus that they may need to use for the smooth operation of CommCare.
* Know where the CommCare application and multimedia folders are stored.
* Know how to use the sort and filter feature in the case lists.

**Trainer’s notes**

* ASHAs should have a basic orientation for various phone menus. Some of this is detailed in the ASHA FAQ guide. The order and arrangement of menus may be different on the ASHA’s phones. At the very least, it is important for the ASHA to recognize the menu images.
* ASHAs should understand how to use the sort and filter features as they will help them find their clients faster and easier.
* Sorting by date re-orders the case list chronologically. The closest, upcoming date will be displayed at the top of the list and followed by later dates.
* Sorting by name will order the case list alphabetically.
* There is an option for sorting the case list by ID. The ID represents CommCare’s internal ID that is generated for each registration. If you sort the case list by ID, it will sort by the list based on the order the clients were registered. The first pregnant woman the ASHA registered in CommCare will be listed first, and the most recent one at the bottom of the list.
* When filtering, ensure ASHAs delete any letters remaining in the search box otherwise they will only see the filtered list.

**Materials**

* Handouts: FAQ Guide for ASHAs
* Flip chart: Drawing of Phone Menus, Draw the below discussed icons.

| **Component** | **Method** | **Facilitation notes: Advanced Orientation** |
| --- | --- | --- |
| **Advanced Phone Menus**  **Sorting and Filtering** | Presentation & ASHA Task  Presentation & ASHA Task  Presentation & ASHA Task  Presentation & ASHA Task | *Prep:*  Draw the menu screen in a tile view. Draw all the important menus icons as they display on your phone.  **Part 1: Advanced Phone Menus**  Describe the purpose of these menus and demonstrate how to navigate to them in the following order of importance:   * Applications > Memory Card, Games, Collections   + In the Memory Card, identify the CommCare multimedia folder. Explain that this file should never be deleted and often gets deleted when the ASHA goes to put songs on the memory card.   + In the Games folder, find the CommCare application. Emphasize that if the short-cut disappears, ASHAs can continue to work by accessing the application in Games. * Media Player   + Demonstrate how to increase the volume in Media Player. * Messages > Inbox and Create a message   + Review both menus, which have already been covered. * Silent and General Mode   + In the home screen, pressing the hash key for a long time will silence the phone. This means you won’t hear the ringtone nor will you hear the audio messages in CommCare. Draw the silent icon on the home screen. Hold down the hash key again to switch back to general mode.   + Think of the hash key as always being related to audio.   **Part 2: Sorting and Filtering Case Lists:**  Demonstrate sorting. Navigate to a case list and press the key above the green button.   * Sort by EDD * Sort alphabetically   Demonstrate search filter   * Search by ASHA name. Notice that the case list filters and the case total number in blue header also changes. * Ensure ASHAs delete any letters remaining in the search box otherwise they will only see the filtered list. |

# **14 Mobile Skills Competency Form**

Estimated Time: 25 Minutes

**Session Objectives**

By the end of the session:

* ASHAs will complete a short form in which they will highlight which mobile and CommCare operation skills they have learned during the two-day training and which they have not

**Trainer’s notes**

* Lead trainer can explain and disseminate the form. The purpose of filling out this form to record which mobile and CommCare operation skills each ASHA was able to learn in two days of training and in which areas they may require further individual support.
* The Sector Facilitator will review the information in the field and plan their visits accordingly to support each ASHA in the areas they feel they have not yet mastered.

**Materials**

* Handouts: ASHA Inventory List
* Flip charts: Login screen and Password typing screen

| **Component** | **Method** | **Facilitation notes: Session 2.7-A** |
| --- | --- | --- |
| **Mobile Skills Competency Test** | Presentation & ASHA Task | Collect all the ASHA’s mobile phones. Disseminate the mobile skills competency survey. |

# **User Login**

**Components:**

1. Restore User IDs
2. User Login

**Estimated time:** 45 Minutes

**Session Objectives**

By the end of the session:

* Trainers and additional support staff (i.e. Sector Facilitators) will have restored all ASHAs usernames to their CommCare applications.
* ASHAs will know how to log into CommCare with their password.

**Trainer’s notes**

* Co-trainers and sector facilitators should work together to restore user IDs to each ASHA’s phones. For this to work, network connectivity has to be working well. It is critical that the training team uses the ASHA Inventory list to type the correct username in the restore data field.
* To restore data, trainers may login into CommCare as admin (password: 234). Select options (left options key). Select Restore User Data. Type in username for ASHA. Match the serial number on the phone to the ASHA username on the Inventory List. Enter the Password 123. Click on Fetch Data. The application should connect to the server. The E or G symbol should appear in a box in the top left hand corner of the screen. This process may take time. You can set up multiple phones at the same time and wait for the success message. Exit back to the Login screen. The ASHA’s username should now appear in the username field.
* The data the ASHAs will collect in CommCare is confidential, just like their existing registries. We put a lock on CommCare so only the ASHA can see the data and others cannot harm the ASHA’s work. The ASHAs won’t give their registries to their children or family members to tamper with. The same applies to the use of CommCare. Do not tell anyone your password. This is a lock that keeps your work, your data safe.
* Ensure that ASHAs are able to see their username in the login screen of their phone. If it is incorrect the correct userID will need to be restored.
* Ensure that ASHAs are able to see their name display in the blue header of the module screen when they have logged in.

**Materials**

* Handouts: ASHA Inventory List
* Collect all ASHAs mobile phones
* Flip charts: Login screen and Password typing screen

| **Component** | **Method** | **Facilitation notes: User Login** |
| --- | --- | --- |
| **Restore User Login**  **User Login** | Trainers Task  Presentation & ASHA Task | Training team should restore usernames to each application. See trainer’s notes for instructions.  Note: Trainers will restore the user IDs while the ASHAs are filling out the mobile competency survey.  Demonstrate how to login into CommCare. Scroll to the password field. Press the hash key. This will open the SMS window. Start to type your password, 123. As you type these numbers will turn into stars, so people around you cannot see your code. Press the center key to confirm. Scroll down to Login (instead of Demo). Now in the header, you should see your name. You have zero cases. |

**16. Wrap up and Next Steps**

Ask if the ASHAs have any questions that need to be answered.

Outline the next steps for the ASHAs

* ASHAs must register all pregnant women in their village and all newborns as those women give birth.
* The project facilitators will be in touch with them to support them as they learn how to use CommCare.

Thank participants for their participation. Wish them well for their work ahead.