**3F. Observation checklist for community activities**

(To be used for observing CHWs while weighing, referring babies to KMC facilities and counseling)

**Weighing**

(**Worker will be accompanied during home visit**)

* Baby suspended without touching any surface
* Weight read at eye level
* Weight recorded correctly

**Referral**

**(When home birth <2000g reported)**

* Advised referral
* Reasons explained for referral
* Mention referral facility
* Facilitated referral, arranged referral transport
* If family refused, counseled on the importance of referral and required action taken (sought assistance from supervisors)

**Counseling**

**(post discharge from health facility)**

* Advice given

 Benefits of KMC explained

Encouraged mothers to do KMC at least for 8 hours/day

Counseled and demonstrated KMC technique

How did worker counsel?

Was worker confident? Was mother/other family members convinced?

* What did the worker demonstrate?

 Breast Feeding

 Skin to skin contact

 Correct KMC position

 Was she confident and demonstrated appropriately?