**Name of TFM:** **District:**

**Duration of Monitoring:** \_\_­­­\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_/2021 **Batch No:**

**Section-A**

**Checklist of monitoring/observation: Before Training**

|  |  |  |  |
| --- | --- | --- | --- |
| **SL** | **Area of monitoring/observation** | **Update status** | **Recommendation/Remarks** |
| i) | Online training preparation |  |  |
| ii) | Training materials shared with trainees |  |  |
| iii) | Trainees’ availabilities in the online platform |  |  |
| iv) | Trainers availabilities in the online platform |  |  |
| v) | Internet data availability to trainees’ |  |  |
| vi) | Internet data availability to trainer |  |  |
| vii) | Others (pls. specify) |  |  |
| Overall monitoring/observation comments with follow up action: | | | |

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**Section-B**

**Checklist of monitoring/observation: During Training**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Basic information of the event:** | | | | | | | |
| **Duration** | **# of days** |  | **Starting date** | |  | **Ending date** |  |
| Name of Online Platform (Venue) |  | | | | | | |
| Type of participants | C grade Pharmacy Technician (Dispenser) | | | | | | |
| Intended Attendance | Total: (Male: Female: ) | | | # of Actual Attendees: | | Total: (Male: Female: ) | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Event Environment:** | | | | | |
| **Area of Observation** | **Excellent** | **Good** | **Moderate** | **Poor** | **Remarks/Comments** |
| Internet connection status |  |  |  |  |  |
| Availability of device to participants |  |  |  |  |
| Other facilities |  |  |  |  |

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| --- | --- | --- | --- | --- |
| 1. **Event Contents:** | | | | |
| *In the context of training, content refers to the subject matter being presented. For example, handouts may have an outdated format, but the information presented should be current.* | | | | |
| **Area of Observation** | **Yes** | **No** | **N/A** | **If No, pls. explain why?** |
| Event schedule (starting and end time) |  |  |  |  |
| Content was relevant to the learning objectives |  |  |  |
| Please provide any additional observations/comments about the training content: | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Pre & Post Test:** | | | | | | |
| **Area of Observation** | **Pre Testing** | | | **Post Testing** | | |
| **Y** | **N** | If No, Why? | **Y** | **N** | If No, Why? |
| Planned |  |  |  |  |  |  |
| Conducted |  |  |  |  |  |  |
| Observation/Comments: | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Equipments** | | | | | | | |
| **Items** | **Available?** | | | **Used?** | | | **If No, Why?** |
| Y | N | N/A | Y | N | N/A |
| Capture event picture |  |  |  |  |  |  |  |
| Other facilities |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Maintaining Schedule** (**🗸**) | Accurate |  | Ahead of time |  | Behind time |  |  |
| 1. **Time Allocation** (**🗸**) | Proper |  | Excess |  | Less |  |  |
| 1. **Methods Followed** (**🗸**) | Lecture |  | Group work |  | Role Play |  | Other |
| 1. **Participation** (**🗸**) | Excellent |  | Good |  | Poor |  |  |

|  |
| --- |
| 1. **Participants opinion/comments:** |
| *Before or after each day training pls. interact with 3-5 participants to know their opinion/comments about overall training (timing, content/subject of the course, facilitation, using online training modality, logistics etc.). Please note down in bullet points* |
|  |

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| --- | --- | --- |
| 1. **Overall Comments of the monitor:** | | |
| Strength(s) | Limitation(s) | Recommendation(s) |
|  |  |  |

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**Section-C**

**Checklist of monitoring/observation: After Training**

| **SL** | **Area of monitoring/observation** | **Update status** | **Recommendation/Remarks** |
| --- | --- | --- | --- |
| i) | Pre and post test Result summery |  |  |
| ii) | Training certificate distribution |  |  |
| iii) | Attendance sheet |  |  |
| iv) | Others (pls. specify) |  |  |
| Overall monitoring/observation comments with follow up action: | | | |

|  |  |  |
| --- | --- | --- |
| **Monitor/observer Information:** | | |
| *This tool will be used for training monitoring/observation purpose and is applicable for all level of staff of BHB Project/Partner Organization* | | |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Name & Designation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | | |