

The Community Health
Worker (CHW) and
Suspected Adverse Drug Reaction
(ADR) Reporting

Training Manual for Facilitators

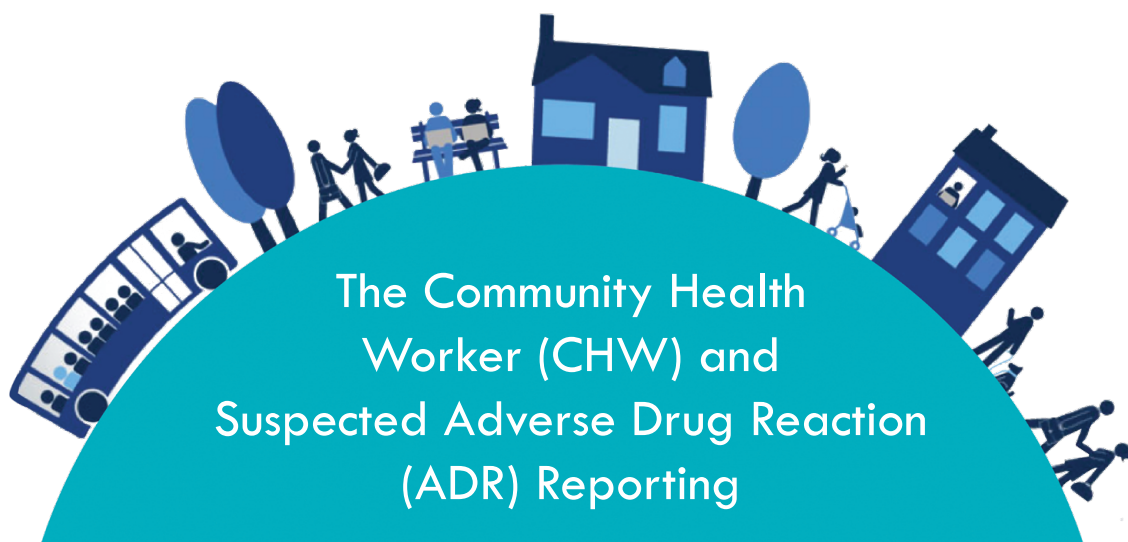
October 2023



SPaRCS
Strengthening Pharmacovigilance
and Regulatory Capacities
in four Southern African countries



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THE COMMUNITY HEALTH WORKER (CHW) AND SUSPECTED ADVERSE DRUG REACTION (ADR) REPORTING TRAINING MANUAL

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ACKNOWLEDGEMENTS

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This training material was developed as a collaborative effort between the SPaRCS members - Prof Michelle Viljoen, Dr Mukesh Dheda and Dr Hazel Bradley - and TB HIV Care, a registered non-profit organization based in Cape Town.

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1. INTRODUCTION

The scope and role of a community health worker (CHW) has evolved globally over the years and may differ from country to country. The World Health Organization (WHO) promotes task-shifting of primary health care roles to CHWs to help alleviate overstretched health systems¹⁻². In southern African health systems, CHWs play crucial roles in health promotion, supporting primary health care services and as vehicles of community participation within their own settings^{1,3}. However, despite the important monitoring roles CHWs play with patients, they have almost no training in adverse drug reactions (ADRs) and little material is available on this topic for this level of health worker.

The Department of Health in South Africa⁴ has set out some core components of the proposed integrated service delivery that can be strengthened by CHWs. The role and involvement of CHWs in providing information, raising awareness, and monitoring ADRs can be reinforced. These core components include the following:

- Promotion of overall health and well-being within their respective communities;
- Provision of information, health education and the promotion of healthy behaviour and disease prevention;
- Facilitation of appropriate referral for health, rehabilitation and social support as per the individual or household needs;
- Provision of adherence support and counselling to clients on medication, support follow-up and the delivery of chronic medication, when appropriate;
- Facilitation of community awareness on health diseases and mobilization around specific community needs;
- Promotion of overall health.

2. PURPOSE OF THIS TRAINING MANUAL

Why this training manual?

The training presentation, *[The Community Health Workers \(CHW\) and Suspected Adverse Drug Reaction \(ADR\) Reporting](#)* aims to heighten the awareness of CHWs about adverse drug reactions and how and when to report these. The purpose of this manual is to assist the facilitator to plan and prepare for this training presentation, so as to successfully achieve the aims and objectives.

Who is this manual for?

The facilitator of this material should ideally be a pharmacist or a registered nurse. There are health definitions as well as local knowledge that is required to understand each respective country's health referral system for ADR reporting from a community perspective. As the facilitator, a pharmacist or registered nurse have the necessary knowledge and experience to be able to adapt the training presentation to reflect their country's local context.

3. PRE-, DURING, AND POST-PLANNING FOR THE PRESENTATION

We suggest that you, the facilitator, divide your planning and preparation for the training presentation into the following phases – pre-training, while training, and post-training.

Pre-training session planning (before the training)

Before the training presentation, it is advisable that you do the following:

- Schedule a pre-training session meeting and gather a small team together that can go through all the training material. This will assist you to check for relevance to your country and community setting in terms of terminology and referral pathways.
- Ensure that the correct date, time and venue is communicated to the targeted audience who will be attending the training session.
- Know your training venue. Check that there will be electricity, a computer, a projector, desks and chairs, and anything else you might need, for example for tea and lunch.
- Make enough copies of the documentation for the number of people attending. A checklist is included below:

- Schedule for the training presentation
- Attendance register (Appendix I)
- Training material (PowerPoint slides) – do not include the slide notes when you send it for printing. This is provided as a separate electronic file.
- Ice-breaker (Appendix II)
- Pre- and post-presentation tests (Appendix III)
- Role play scenario example (Appendix IV)
- Evaluation and feedback form (Appendix V)
- Consent form for photo / video clip (Appendix VI)

Training session planning (on the day of training)

On the training day, we suggest that you do the following:

- Assign each trainee attendee a number, starting from 1, to use for the various written activities they will do during the training. Explain that using a number rather than their name, will ensure that the trainee attendees feel safe and can anonymously respond to the written activities. They should not forget this number as they use it for all written tasks.
- Follow a specific time schedule and divide the various activities into sessions. A suggested structure with timeframes is provided below.

3.1 Suggested structure of a typical training session

To help you plan and prepare for the training presentation, we suggest that you develop a specific schedule for the day. This will assist you to stay focused on the goals and objectives of the training. Below is a suggested schedule that you can adapt to your needs.

ACTIVITY	TIME	DESCRIPTION	RESPONSIBLE PERSON
Arrival & tea	9:00 – 10:00	Name tags and signing of the attendance register	
Welcome & Introduction	10:00 – 11:00	Welcome & Introduction Share programme for the day Provide numbers (1–10, etc) to each attendee Ice-Breaker (10 minutes) and voluntary feedback if trainee attendees are willing to share their experience Pre-presentation test (20 – 25 minutes) Slides 1–2	
Pre-presentation test			
PowerPoint Presentation Part 1	11:00 – 12:00	Slides 3 –12	
	12:00 – 12:15	Body break	
Role play	12:15 – 12:45	Role play: exercise in pairs (15 – 30 minutes)	
Lunch	12:45	Lunch break (45 minutes)	
PowerPoint Presentation Part 2	13:30 – 14:30	Slides 13 – 21	
Q & A	14:30 – 15:00	Question session from the trainee attendees (30 minutes)	
Post-presentation test	15:00 – 15:45	Post-presentation test (20 – 25 minutes) Discussions on post-test	
Evaluation and feedback	15:45 – 16:00	Filling in of the evaluation and feedback form by the trainee attendees	
Closing	16:00 – 16:15	Thanks and acknowledgements	

Post-training session planning (after the training session)

After the training session is completed, it is advisable that you do the following:

- Collect, secure and safely store the pre- and the post-presentation tests of each trainee attendee. This should be for internal use by the facilitator to establish if there has been an improvement or not due to the training exposure.
- Collect, secure and safely store the evaluation and feedback form from each trainee attendee. This can be used internally to improve on the training presentation for future sessions.
- Collect, secure and safely store the completed attendance register for your own internal records of training facilitated.

4. MATERIAL TO BE PROVIDED TO THE FACILITATOR

You will be provided with the following:

An [electronic PowerPoint Presentation \(PPP\)](#) that you can edit to include additional information as and where needed. The notes section in the PPP explain where to make the changes. Here is an example:



The presenter(s) of the session must complete this slide with the relevant details that are applicable.

It is suggested that you do the following activities before you commence with the presentation:

1. Have the trainee attendees sign the attendance register – Appendix I
2. **Ice-Breaker:** An example is provided (Appendix II), but you can replace it with your own ice-breaker topics.
3. **Pre-presentation test questions (Appendix III):** Allocate each trainee attendee with a specific number – they must use this instead of their name on the pre- and post-test. This is to ensure that they feel safe as their responses in the test will remain anonymous.

A copy of the pre–presentation test is provided. Print out adequate copies for your session.

9. Training manual.
10. Attendance register (see **Appendix I**).
11. An example of an ice-breaker activity (see **Appendix II**).
12. A pre- and post-presentation test (electronic) that you need to photocopy for the actual day (see **Appendix III**).
13. Role play scenario example (see **Appendix IV**).
14. Evaluation and feedback form, *Evaluation from CHWs on the presentation & material* (see **Appendix V**). Each trainee attendee should complete this form after the training session.
15. Consent form for photo / video clip (see **Appendix VI**) if required..

5. TRAINING TIPS

Terminology

Some of the terminology and definitions used in this training material may be new to the trainee attendees – community health workers (CHWs) - so you need to be patient and explain these concepts to them more than once.

Terminology used by different countries may also vary:

- Community health worker (CHW) is commonly used in South Africa and Namibia, but other countries may use the terms Health Extension Worker, Village Worker, or Environmental Health Technician.
- Outreach team leader (OTL) is the person to whom the CHWs reports in South Africa. However, in some cases CHWs may need to report to a supervisor or nurse within their communities.

Pre- and post-presentation test

It is necessary to assure the trainee attendees that the pre- and post-presentation tests are not punitive. Their aim is for you to see if the training day and material was useful and made a difference. Explain that the tests are done anonymously by using the number you have given them. They must use the same number on both tests and must therefore make sure that they do not forget this number.

The pre- and the post-presentation tests are identical.

Evaluation and feedback form

It is also very important that the trainee attendees provide feedback on how they experienced the training material, the content. This feedback can then be used to change and improve the material where it is lacking or where it is possibly not pitched at the right level.

Time management

The suggested time schedule provided under *Structure of a Typical Training Session* above, is only a guide. The timing was tested in a pilot and may be dependent on the trainee attendees attending. For example, some trainee attendees may need a longer time to read and understand the questions in the pre- and post-presentation tests and the evaluation and feedback form. It is important that you walk among the trainee attendees while they are completing the pre- and post-presentation tests and the evaluation and feedback form so that they can ask you questions should they need any clarification on any of the aspects.

Number of trainee attendees

It is recommended that there are no more than 20 trainee attendees in a session. It appears that between 10–20 trainee attendees is a good number. This will allow for a small group to hopefully engage and share their own experiences and challenges with each other. If groups are too big, some trainee attendees may hold back.

Notes to the facilitators at bottom of the slides

Some useful notes have been added to the bottom of some slides.

Various activities, such as the ice-breaker, pre-presentation test, role play, break, lunch, post-presentation test and evaluation and feedback form, are also noted, where these activities would be applicable.

6. GLOSSARY OF KEY DEFINITIONS

Adverse drug reaction (ADR): harmful, unpleasant, and unintended responses to a medicine that occur at normal dose when it is used to diagnose, prevent or treat a disease.

Adverse event (AE): any negative (unfavourable /unintended) occurrence after use of medication. Often stated in context or circumstances prior to the occurrence. Not always related to the medicine.

Side effect (SE): any unintended effect that occurs at normal dose. It is related to how this medicine works in the body and can be expected.

Adverse event following immunisation (AEFI): any negative occurrence experienced after immunisation (vaccination) took place.

7. REFERENCES

1. Mhlongo EM, Lutge E. (2019). The roles, responsibilities and perceptions of community health workers and ward-based primary health care outreach teams (WBPHCOTs) in South Africa: a scoping review protocol. *Systematic Reviews*, 8:193.
2. Mukherjee JS, Eustache FE. (2007). Community health workers as a cornerstone for integrating HIV and primary healthcare. *AIDS Care*,19:S73-82.
3. Tsolekile LP, Schneider H, Puoane T. (2018). The roles, training and knowledge of community health workers about diabetes and hypertension in Khayelitsha, Cape Town. *Curationis*, 26;41(1):e1-e8.
4. Department of Health, South Africa. Ward Based Primary Healthcare Outreach Team In-Service Skills Development Package. *CHW In-service Skills Development. Facilitator Manual*. January 2019.

Hyperlinks

SPaRCS Project Page: <https://soph.uwc.ac.za/project-item/strengthening-pharmacovigilance-and-regulatory-capacities-in-four-southern-african-countries-sparcs/>

Training Materials on The Community Health Workers (CHW) and Suspected Adverse Drug Reaction (ADR) Reporting: <https://soph.uwc.ac.za/project-item/chw-training-material/>

8. APPENDICES

Appendix I



ATTENDANCE REGISTER

Project Title: The Community Health Worker and Adverse Drug Reaction (ADR) Reporting

Date: _____ Venue: _____ Country: _____

Facilitator: _____

Name and Surname	Affiliation	Signature
1.		
2.		
3.		
4.		
5.		
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24.		

Appendix II



SUGGESTED ICE-BREAKER QUESTIONS

Project Title: The Community Health Worker and Adverse Drug Reaction (ADR) Reporting

The presenter of the training sessions can decide if they want to ask the questions (in plenary) OR if they would like trainee attendees to complete this sheet and then follow with a brief discussion about their answers.

1. Have you ever been in a situation where one of your home care patients experienced a possible side effect (adverse drug reaction) due to medication?
 - a) Yes
 - b) No
 - c) Do not know

2. How many times have any of your home care patients experienced a side effect (adverse drug reaction)?
 - a) Once
 - b) Twice
 - c) More than 5 times

3. Was your patient taking more than one medicine?
 - a) Yes
 - b) No
 - c) Do not know

4. What made you suspect the medicine was causing the side effect (adverse drug reaction)?

Appendix III



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PRE-PRESENTATION TEST

Project Title: The Community Health Worker and Adverse Drug Reaction (ADR) Reporting

Date: _____ Venue: _____ Country: _____

Write your allocated number here: _____

1. Which of the following statements is the correct definition of an **adverse drug reaction**?
Choose one option.
 - a) All registered medicines are safe and they do not have bad side effects (adverse drug reactions).
 - b) An **adverse drug reaction** is an intended effect at a normal dose.
 - c) An **adverse drug reaction** is a harmful, unpleasant and unintended effect in response to a medicine at a normal dose.
 - d) Do not know.

2. Is it important to always report a suspected **adverse drug reaction**? Choose one option.
 - a) Yes
 - b) No
 - c) Do not know

3. Which **adverse drug reaction** should be reported? Choose one or more options
 - a) Mild adverse drug reaction
 - b) Serious side effect
 - c) Side effect causing discomfort
 - d) Side effect causing severe discomfort
 - e) All of the above

4. Who is responsible for reporting an **adverse drug reaction**? Choose one or more options.
 - a) Nurse
 - b) Doctor
 - c) Community Health Worker (CHW)
 - d) Pharmacist
 - e) Patient
 - f) All of the above

5. All medicines have the potential to cause harm. Choose one option.
- a) True
 - b) False
 - c) Don't know
6. The reporting of a suspected **adverse drug reaction** is important as it can contribute to gathering more safety information about a specific medicine. Choose one option.
- a) True
 - b) False
 - c) Don't know
7. You should report a suspected **adverse drug reaction** even if you are unsure about it. Choose one option.
- a) True
 - b) False
 - c) Don't know
8. How long does it take for an **adverse drug reaction** to occur? Choose one option.
- a) Within minutes
 - b) Within hours
 - c) Within days
 - d) Within years
 - e) All of the above are correct
 - f) Don't know



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POST-PRESENTATION TEST

Project Title: The Community Health Worker and Adverse Drug Reaction (ADR) Reporting

Date: _____ Venue: _____ Country: _____

Write your allocated number here: _____

1. Which of the following statement is the correct definition of an **adverse drug reaction**?
Choose one option.
 - a) All registered medicines are safe and they do not have bad side effects (adverse drug reactions)
 - b) An **adverse drug reaction** is an intended effect at a normal dose
 - c) An **adverse drug reaction** is a harmful, unpleasant and unintended effect in response to a medicine at a normal dose
 - d) Do not know

2. Is it important to always report a suspected **adverse drug reaction**? Choose one option.
 - a) Yes
 - b) No
 - c) Do not know

3. Which **adverse drug reaction** should be reported? Choose one or more options.
 - a) Mild adverse drug reaction
 - b) Serious side effect
 - c) Side effect causing discomfort
 - d) Side effect causing severe discomfort
 - e) All of the above

4. Who is responsible for reporting an **adverse drug reaction**? Choose one or more options.
 - a) Nurse
 - b) Doctor
 - c) Community Health Worker (CHW)
 - d) Pharmacist
 - e) Patient
 - f) All of the above

5. All medicines have the potential to cause harm. Choose one option.
- a) True
 - b) False
 - c) Don't know
6. The reporting of a suspected **adverse drug reaction** is important as it can contribute to gathering more safety information about a specific medicine. Choose one option.
- a) True
 - b) False
 - c) Don't know
7. You should report a suspected **adverse drug reaction** even if you are unsure about it. Choose one option.
- a) True
 - b) False
 - c) Don't know
8. How long does it take for an **adverse drug reaction** to occur? Choose one option.
- a) Within minutes
 - b) Within hours
 - c) Within days
 - d) Within years
 - e) All of the above is correct
 - f) Don't know

Appendix IV



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SUGGESTED ROLE PLAY

Project Title: The Community Health Worker and Adverse Drug Reaction (ADR) Reporting

The aim of the role play is for the CHWs to practice identifying a suspected ADR.

It is suggested that a role play takes place during the middle of the presentation after you have presented the slide: How to recognise a suspected ADR (shown below). This slide is number 12 of the PowerPoint slides provided to each trainee attendee.

HOW TO RECOGNISE A SUSPECTED ADR?

1. CLIENT

- Ask about specific signs, symptoms and severity
- Ask about the client's history of previous ADRs / allergies
- Ask about medical history other illnesses (deterioration/worsening)

2. MEDICINE

- Review current / recent medication (over the counter & traditional medicine, drug use)
- Ask when suspected reaction first appeared (date?)
- Which medicines were started and when (date/timeline)?
- If suspected medicine was stopped, did it result in improvement of the suspected ADR?

12

OTL – Outreach Team leader in South Africa. Supervisor of the respective CHW.

For the role play it is suggested that the trainee attendees form pairs. Each pair should decide who will be the patient and who will be the CHW. The patient has to present with some kind of suspected ADR. The CHW must engage with the patient and use the information on the slide, *How to recognise a suspected ADR?*, to obtain relevant information from the patient to decide if there is a possible suspected ADR that needs to be referred / reported.

The presenter / facilitator can walk around and join the pairs to see how they are enacting the scenario and assist where required with some pointers. A brief closing discussion can be held afterwards with the entire group.

Appendix V



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EVALUATION FROM CHWs ON THE PRESENTATION & MATERIAL

Project Title: The Community Health Worker and Adverse Drug Reaction (ADR) Reporting

Date: _____ Venue: _____ Country: _____

Write your allocated number here: _____

A. PowerPoint Slides

1. Do you think the objectives (outcomes) of the presentation were achieved?
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

2. Which one of the following statements is applicable to the information on the slides?
 - a) Too much information (too much writing)
 - b) Adequate information (right amount)

3. Which one of the following statements is applicable to the information on the slides?
 - a) Too difficult to understand
 - b) Easy to understand

4. Did the pictures (images) used on the slides help you to understand the information better?
 - a) Yes
 - b) No

5. Were there too many slides (n=18)?
 - a) Yes
 - b) No
 - c) Don't know

6. Which topic(s) did you like the best and learnt the most from? Say why you liked it.

7. Which topic(s) did you like the least? Say why you liked it the least.

8. Is there any additional information that you would like to be included on the slides?

B. Presenters

1. The presenters presented the information in a manner that I could understand.
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

2. The presenters spoke in a manner that I could clearly hear what they said.
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

3. The presenters knew what they were talking about.
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

4. The presenters asked too many questions.
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

5. The presenters answered our questions adequately.
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

C. Role play exercise

1. The role play was a useful exercise.
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

2. More role play exercises should be included
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

D. Pre- and post-presentation questions

1. The questions were relevant to me as a community health worker.
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

2. The questions were at the right level for me as a community health worker.
 - a) Yes, I fully agree
 - b) Partly, I partially agree
 - c) No, I do not agree at all

Appendix VI



CONSENT FORM

Project Title: The Community Health Worker and Adverse Drug Reaction (ADR) Reporting

Date: _____ Venue: _____ Country: _____

You have agreed to attend this training session on Adverse Drug Reaction (ADR) Reporting as you are a community health care worker or trainer.

We are kindly asking your permission to take a group photo of everyone who attended today's pilot training session. We would also like to take a few short video clips with audio (sound) while the presenters are presenting. The video clips will not focus on you but mainly on the presenters and the screen.

Consent

I understand that I do not have to give my permission for the group photo as it is entirely voluntary. I understand that I do not have to give a reason without fear of negative consequences or loss of benefits. I understand that my name and surname will not be disclosed to anyone.

- I agree to be part of the group photo.
- I do not agree to be part of the group photo.
- I agree to short video clips with audio (sound) to be taken during the presentation which will focus on the two presenters and the screen where the slides will be shown.

Community Health Worker or trainer's name: _____

Community Health Worker or trainer's signature: _____

Date: _____

