





## ACKNOWLEDGEMENTS

This document was prepared with significant input from the USAID NTD team, Emily Wainwright, Joe Shott, Rob Henry, and Emily Toubali; from Act to End NTDs | East team, Molly Adams, Stella Agunyo, Sharone Backers, Margaret Baker, Molly Brady, Endri Budiwan, Mawo Fall, Diana Lu, Belete Mengistu, Upendo Mwingira, Betty Nabatte, Benjamin Nwobi, Ukam Oyene, and Elizabeth Sutherland; and from the Act to End NTDs| West team, Achille Kabore, Ernest Mensah, Stephanie Palmer, and Kisito Ogoussan.

We would also like to acknowledge the detailed review and feedback provided by others on the Act to End NTDs | East and Act to End NTDs | West teams.

Please send any feedback about this guidance document or recommendations for future versions to [acteast@rti.org](mailto:acteast@rti.org).



**TABLE OF CONTENTS**

Acknowledgements..... 2

List of Exhibits ..... 4

List of Abbreviations ..... 5

Rationale and Background ..... 6

1. Coordination ..... 6

    1.1 Coordination with COVID-19 Response Teams..... 6

    1.2 Coordination within MoH ..... 6

    1.3 Coordination with other partners actors ..... 7

2. Communication..... 7

    2.1 Before and during survey: Communication with authorities ..... 7

    2.2 Before and during surveys: communication with the community ..... 8

    2.3 After survey: communication with the community ..... 9

    2.4 Addressing rumors and misinformation ..... 9

3. Training ..... 9

    3.1 Virtual training ..... 9

    3.2 In-person training venues ..... 10

    3.3 Additional COVID-19 curriculum ..... 11

    3.4 Practical training sessions ..... 12

4. Field Work ..... 12

    4.1 Transportation – Getting to and from survey sites..... 12

        4.1.1 Before entering the vehicle..... 12

        4.1.2 While inside the vehicle ..... 12

        4.1.3 After exiting the vehicle ..... 13

    4.2 General survey team precautions..... 13

    4.3 Conducting LF surveys..... 15

        4.3.1 Household LF Survey ..... 15

        4.3.2 Static point LF survey ..... 17

        4.3.3 School-based LF survey ..... 19



5. Survey Supervision ..... 21

    5.1 COVID-19 safety measures related to supervisors ..... 21

    5.2 Ensuring COVID-19 SoPs are being followed ..... 21

    5.3 Monitor COVID-19 cases ..... 21

    5.4 Virtual supervision ..... 21

    5.5 Documentation, learning, and adapting ..... 22

Appendix A. Checklist to use During Training ..... 24

Appendix B. Supervision Checklist ..... 26

**LIST OF EXHIBITS**

Exhibit 1. Vehicle seating diagram ..... 13

Exhibit 2. Survey at households ..... 16

Exhibit 3. Survey at community/static point..... 18

Exhibit 4. Survey at school (outside)..... 20



## LIST OF ABBREVIATIONS

COVID-19	Coronavirus Disease 2019
FTS	Filaria Test Strips
LF	Lymphatic Filariasis
MOH	Ministry of Health
NTD	Neglected Tropical Disease
PPE	Personal Protective Equipment
SOP	Standard Operating Procedure
TAS	Transmission Assessment Surveys
WHO	World Health Organization



## RATIONALE AND BACKGROUND

Pre-transmission assessment surveys (pre-TAS) and transmission assessment surveys (TAS) are key surveys of lymphatic filariasis (LF) treatment programs, used to monitor progress, decide when to stop treatment and to inform declaration of interruption of transmission.

During this unprecedented time of coronavirus disease 2019 (COVID-19), national program staff and implementing agencies must make adjustments to ensure safe programming. This resource document complements the World Health Organization's (WHO's) guidance for NTD programs released on July 27, 2020. It provides ideas and practical examples on operationalizing the guidance so that it can be applied to field activities. **It is designed as a resource that national NTD programs can use as they develop their own country-specific standard operating procedures (SOPs), training materials, and supervision checklists. It should be adapted to country-specific contexts and environments.**

The guidance and examples presented in this document were led by in country staff and are based on lessons learned from experience with Ministry of Health-led NTD programs supported by Act to End NTDs | East and Act to End NTDs | West. This document also builds on materials developed by other partners, including Ministries of Health.

## 1. COORDINATION

Effective communication and coordination with other programs and sectors, including COVID-19 task forces or their equivalent, will be very important to ensure coordinated messaging and responses.

### 1.1 COORDINATION WITH COVID-19 RESPONSE TEAMS

- Liaise with relevant COVID-19 task forces at all levels of program implementation. Where possible, have NTD coordinator representation in national COVID-19 task force.
- Advocate for provision of guidelines, protocols, and resources for safe implementation of health care services that include NTDs.
- Tap into resources that might support survey implementation, such as provision of handwashing facilities, masks, human resources for monitoring implementation, and SOPs.
- Look for opportunities to promote COVID-19 testing at the local level. Can also coordinate with mobile COVID-19 labs to attend survey times.

### 1.2 COORDINATION WITHIN MOH

- Liaise with the relevant health authorities to ensure that suspected COVID-19 cases are referred to the appropriate COVID-19 structure during the planned NTD activity.
- Review recent experiences of working in the community with other public health programs; e.g., malaria and immunizations. What went well? What difficulties did they encounter? Consider reading other program





- Emphasize the heightened chance of rumors and misinformation during COVID-19. Communicate with authorities and collaborate/brainstorm community-based approaches to address misinformation and rumors.

## 2.2 BEFORE AND DURING SURVEYS: COMMUNICATION WITH THE COMMUNITY

*Communication on where and when the survey is to be held, why it is being done, eligibility criteria, contact persons, etc. still need to be communicated. Additional information on COVID-19, and on changes to reduce infection risk, will need to be incorporated in the messaging. Channels of communication will need to be reviewed to suit the current situation and to build trust with the message recipients. Understanding the community before going in to do surveys is important. As always, trusted local leaders should be included in planning several weeks before surveys are to begin.*

### New communication messages

- *It is safe to conduct the survey because safety measures have been put in place.*
- *Community members aged 60 years and older and those with pre-existing health conditions (including diabetes, high blood pressure, cancer, heart diseases, and respiratory infections) are most at risk of having severe forms of COVID-19. Additional measures should be taken to reduce their exposure to potentially infected persons.*
  - For surveys conducted at a fixed site, consider excluding all persons at high risk.
- *People with a higher risk of transmitting infection should not participate. This includes anyone experiencing COVID-19 symptoms, persons in close contact with known COVID-19 cases (e.g., living in the same house), and anyone who have arrived in the last 14 days from areas with known higher infection.*
- Messages explaining how the survey will be different this year. This will vary between activities, survey strategy, and locations. Examples include the following:
  - Information on how to queue in a line and maintain social distancing (2 meters between each person/households).
  - The need for households to provide water for themselves and for survey team to wash hands where applicable.
  - Surveys will preferably be conducted outdoors.
  - Assurance that all survey teams will wear a mask.
  - Need for participants to use face coverings per local guidance.
- Emphasize that this survey is testing for LF (not COVID-19).
- Emphasize that protective measures should be applied during surveys and other events to prevent spread of COVID-19 in the community.
- Any information obtained on suspected and/or new COVID-19 cases in the community where surveys are taking place should be communicated per advice of the COVID-19 task force (or equivalent) in the area/district. Decisions will be made on whether to continue or stop surveys during NTD program through coordination between the program and local COVID-19 task force.





### Means of communication

Radio, TV, use of town announcers and megaphones remain safe modes of communication. However, face-to-face communication with households and large gatherings should be avoided initially.

When communicating in person with community leaders and teachers, wear masks and stand 2 meters apart. If the leader/teacher does not have their own mask, they should be given one.

### 2.3 AFTER SURVEY: COMMUNICATION WITH THE COMMUNITY

- Hold feedback sessions between community leaders and supervisors – keep group numbers small, maintain safe distancing, meet outside where possible, and ensure use of cloth masks. Feedback sessions should be held as frequently as survey team bandwidth allows.
- Listen to their comments and opinions about the survey, commend them for their active participation.
- Emphasize the need for continual adherence on prevention of COVID-19.
- Discuss and agree on follow-up actions.

### 2.4 ADDRESSING RUMORS AND MISINFORMATION

Misinformation about the pandemic can be problematic. Negative rumors could harm the survey if not addressed. A system should be put in place to identify and manage rumors and misinformation before, during, and after completion of survey.

- Report any rumors related to COVID-19 during drug distribution to appropriate authorities in the community, including the COVID-19 task force, local MOH authorities, and NTD program manager.
- Appoint a staff member at state/district level to conduct news media monitoring (including social media if relevant), analyze and disseminate timely information for necessary action to be taken.
- Listen to the community to better understand rumors and empower the community to make informed choices.
- Enlist trusted community members to help dispel rumors.

## 3. TRAINING

The LF survey team is usually trained/oriented on the protocol and standard procedures prior the actual survey. This section addresses additional precautions to be taught.

### 3.1 VIRTUAL TRAINING

Virtual training is the preferred method of training during the pandemic, especially when trainers live in different parts of the country. Live web-based training can be used where internet connection is good. Other options include sharing recorded trainings and frequently asked questions via a CD or USB and holding training via mobile application for those



who have access to smart phone internet connection. Virtual training has not been the norm and some experimentation will be needed to find methods that work.

### 3.2 IN-PERSON TRAINING VENUES

If in-person training must take place, the following guidelines and procedures should be observed.

#### Additional equipment list

- Masks (cloth or medical) for all participants and trainers
- Disinfectant to wipe surfaces (use 70%–90% ethanol/ethyl alcohol for equipment and sodium hypochlorite at 0.1%/1,000 ppm for surfaces)
- Handwashing water and soap or hand sanitizer
- Disposable paper towels
- Dust bin
- Signs and symptom checklist for screening of all participants
- Gloves
- Lab coat/gowns

#### Conducting training

- The head trainer or a supervisor should screen (see Box 1) the trainers and trainees every day when they arrive to the site. Should someone have symptoms or been exposed to risk, the supervisor should ensure they do not participate in the training.
- Consider excluding from training, and subsequent surveys, anyone who is at an increased risk of contracting COVID-19, including those aged 60 years and older and those with pre-existing medical conditions.
- Avoid (or minimize) delays between training and field implementation. Activities should start shortly after the training (preferably within a day) to avoid additional travel to and from the field which provides additional opportunity for COVID-19 transmission.
  - Therefore, have ready all materials needed for surveys (e.g., drugs, diagnostic tests, job aides), cloth masks and personal protective equipment (PPE) before commencing training.
- Trainers and trainees should always wear masks and practice social distancing.
- The space must be able to accommodate everyone with 2 meters in between, outdoors is preferred. If indoors, ensure that the area is well ventilated. Consider spacing chairs out in advance or marking the floor to identify preferred seating placement.
- Wash stations should be available at every training. Trainers should explain how to wash hands thoroughly and all attendees should wash their hands upon arrival and whenever appropriate during the training (i.e., when touching a contaminated surface, when returning to the training venue from another location, after eating or coffee break).



- Eating should be avoided in the training room if possible.
- Equipment and surfaces should be disinfected at least twice a day.

**Box 1. Conducting surveys in a COVID-19 context requires screening individuals for signs and symptoms of the virus. This table summarizes WHO’s guidance about restarting mass treatment for NTDs during COVID-19 item 3.6.<sup>1</sup>**

<b>COVID-19 Screening</b>	
<b>1</b>	Symptoms suggestive of COVID-19: <ul style="list-style-type: none"> <li>• fever (if not measurable, consider self-check)</li> <li>• visibly apparent symptoms such as cough, shortness of breath, nasal congestion, and red eyes</li> </ul>
<b>2</b>	Exposure to risk: <ul style="list-style-type: none"> <li>• contacts of COVID-19 cases and of people with symptoms suggestive of COVID-19 (e.g., those living in [the] same household)</li> <li>• in the case of activities implemented in areas without known/suspected community transmission, also people coming from countries or areas with known/suspected community transmission of COVID-19 less than 14 days before may be added</li> </ul>
<b>3</b>	If screening is positive: <ul style="list-style-type: none"> <li>• exclude the individual from the NTD activity</li> <li>• offer a medical mask</li> <li>• advise [individual(s)] to follow relevant national guidance on COVID-19</li> <li>• consider identifying an isolation space or room at the activity site for people screening positive who cannot leave the site immediately</li> </ul>

### 3.3 ADDITIONAL COVID-19 CURRICULUM

- All members of the survey team should be trained on the COVID-19 safety measures during the survey training. Training should cover all aspects of the NTD surveys being targeted in specific areas as well as training on how to protect themselves and their community against becoming infected with COVID-19
  - Specific instructions should be given on how to wash hands, wear a mask, practice social distancing, report cases, and communicate with community members.
  - Participants should also be given the opportunity to practice proper hand washing techniques, mask wearing safety precautions and ensuring social distancing during training.
- The survey team should be trained to identify the common signs and symptoms of COVID-19 and how to make referrals to health care system if they identify a suspected case of COVID-19 during screening.

<sup>1</sup> WHO. Considerations for implementing mass treatment, active case-finding and population-based surveys for neglected tropical diseases in the context of COVID-19 pandemic. Interim Guidance. July 27, 2020. <https://apps.who.int/iris/handle/10665/333499>



### 3.4 PRACTICAL TRAINING SESSIONS

Trainers should ensure that participants have adequate time to practice skills and engage in role playing during training. Set up as you would for the survey and practice walking through survey scenarios from arrival to departure, including testing participants. Consider adding scenarios to practice role playing such as “you observe that one of the participants has symptoms suggestive of COVID-19.”

Assign some group members to use checklists (see below Appendix. A) and report back to the group on what COVID-19 prevention practices were followed well and what was not. Practice again as needed.

## 4. FIELD WORK

LF survey teams will need to take additional precautions when conducting the survey in the field. The following precautions should be taken when administering surveys.

### 4.1 TRANSPORTATION: GETTING TO AND FROM SURVEY SITES

To minimize risks, avoid engaging trainees who do not live in or near the targeted communities. Instead, it is preferred to engage people with required skills closest to community only. Consider excluding trainees who live in areas with known COVID-19 community infection (engage local authorities about community infection rates) or testing them before travel (as per local guidance).

#### 4.1.1 BEFORE ENTERING THE VEHICLE

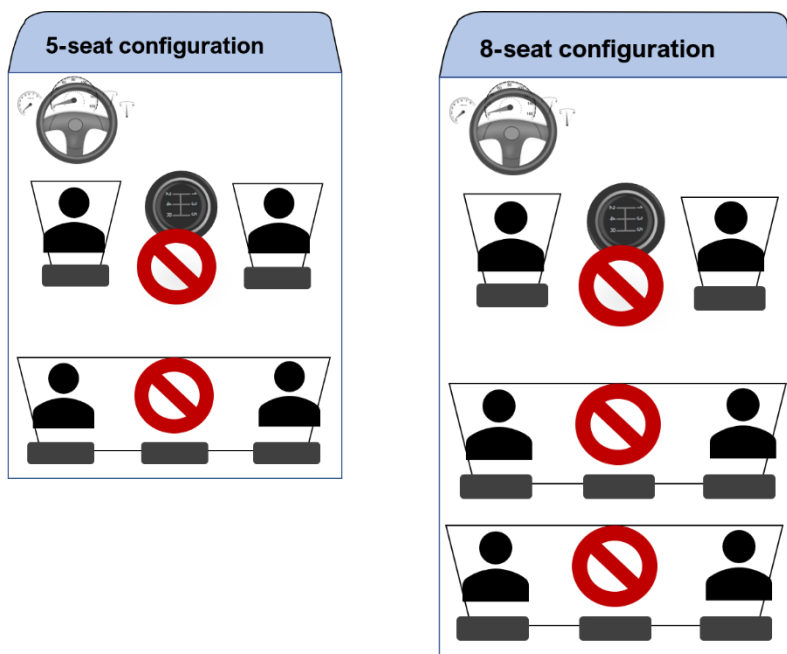
- An initial screening should identify and exclude anyone who has come into contact with possible COVID-19 cases in the last 14 days or who are experiencing symptoms associated with COVID-19 from traveling.
- Driver and passengers must wash their hands.

#### 4.1.2 WHILE INSIDE THE VEHICLE

- Driver and passengers must wear face masks at all times during the trip.
  - Limit the amount of water and food consumed during car ride to avoid contaminating surfaces.
  - Do not share water or food during car ride unless packaged.
- When conditions permit, vehicle windows should remain open.
- Consider limiting the number of people in cars and buses; specifically, there should be at least one empty seat between passengers (Exhibit 1). This may vary based on local guidelines.
  - For vehicles that seat 5 passengers, only 3 passengers should be permitted.
  - For vehicles that seat 8 passengers, only 5 passengers should be permitted.
  - For 12-seater minibuses, only 07 passengers should be permitted on board.
  - For vehicles or buses with a large capacity, passengers’ seating will be arranged by the survey supervisor and the head of the medical district or region.



**Exhibit 1. Vehicle seating diagram**



#### 4.1.3 AFTER EXITING THE VEHICLE

- Drivers and passengers should do the following before meeting with local leaders and representatives.
  - Remove face mask if it is notably soiled, moist, or wet and put on new mask. If disposable, place in designated waste bag.
  - Wash or sanitize hands.
- All survey team members (including driver and supervisor) will be screened for COVID-19 (fever and symptoms) twice daily: once in the morning before field work and once in the afternoon/evening after field work.

#### 4.2 GENERAL SURVEY TEAM PRECAUTIONS

Minimum Additional Requirements: Staff will need to respect the prevention measures and have in their work bag/vehicles the following supplies (in addition to normal disease-specific requirements such as filariasis test strips [FTS], etc.).

##### Minimum additional materials

- Masks: at a minimum, cloth masks should be available for each survey team member. Local guidance about the use of face coverings and masks should be followed for survey team and participants
- Disinfectant: alcohol or a bleach solution (use 70%–90% ethanol/ethyl alcohol for equipment and sodium hypochlorite at 0.1%/1,000 ppm for surfaces)



- Handwashing supplies (water and soap) or hand sanitizer (60%–80% alcohol)
- Checklists for COVID-19 symptoms
- Supplies like tape, chalk or sticks to mark required separation distance between community members
- Gloves for surveyors
- Pens (should not be shared)
- Plastic bags to collect PPE waste
- 2-meter stick to measure distances between community members
- Consider bringing your own folding table and chairs (when possible)

### General protocols

- All survey team members (from the local community or ministry-level) should be aware of the signs and symptoms of COVID-19 and if anyone feels unwell at any time during the survey, they should inform their supervisor, stop work immediately, and seek medical care. The supervisor should follow up and if the staff member tests positive for COVID-19 this should be reported immediately.
- Team members who are identified as coming into contact with COVID-19 cases in the last 14 days should not report for work.
- Additional personnel (i.e., a volunteer or additional survey team member) should be the designated focal point to ensure compliance with SOPs (i.e., social distance, PPE, and hand washing).
- Before starting the survey, the team leader should introduce and discuss the purpose, methodology and timing of the survey to the community leaders (chief of village, religious leaders, guides). The survey team should be accompanied by a representative from the health district or health facility.
- Survey team members should always wear masks. If masks must be removed temporarily to speak clearly, team members should make sure to extend their distance from community members.
- The survey team members should avoid eating or drinking while conducting the survey.
- During planning, the number of persons in a team and the number of persons to be tested in a day should be reevaluated to consider these new safety measures which could be more time consuming.
- As much as practicable, surveys should be conducted outdoors, when the weather allows.
- All equipment and surfaces should be disinfected twice a day. Consider using a surface or covering that can be easily wiped down.
- Consider excluding from field work activities people who have an increased risk of contracting COVID-19, including those with pre-existing medical conditions and those who are aged 60 years and older.
- Maintain regular contact with field locations and understand cultural issues and political situations.



### 4.3 CONDUCTING LF SURVEYS

Pre-TAS targets individuals age 5 and older and are conducted at the community level. If possible and resources allow, conduct house-to-house as this poses less infection risk. However, static points can also be used, with additional prevention measures in place.

TAS target children aged 6-7 years and are usually conducted in schools. Ideally, these surveys should be conducted once schools are open, following the protocols established for managing COVID-19, with the support of teachers. They can also be done at fixed points in the community or at the household level.

#### 4.3.1 HOUSEHOLD LF SURVEY

##### Standard protocol upon arrival

- Set up survey outdoors to minimize risk of COVID-19 transmission, which is much higher indoors.
- Upon arrival at a home, the team leader should introduce themselves and explain the purpose of the visit. In addition to routine messages given on NTDs, the team leader should explain to the household head the COVID-19 safety precautionary measures that should be followed, including
  - common signs and symptoms of COVID-19 and enquire whether any of the household’s members has experienced the symptoms. If yes, then ask what action has been taken. In case no action has been taken, the survey team leader should notify their supervisor so that action can be taken.
  - importance of maintaining physical distance; specifically, to minimize their risk of infection. Household members should remain at least 2 meters apart from the survey team. Exhibit 2 presents a sample set up.
  - proper hand washing hygiene. Everyone should wash their hands with soap and water for at least 20 seconds. Depending on how water will be provided, households may have been asked in advance to provide hand washing water.

##### Conducting the examination

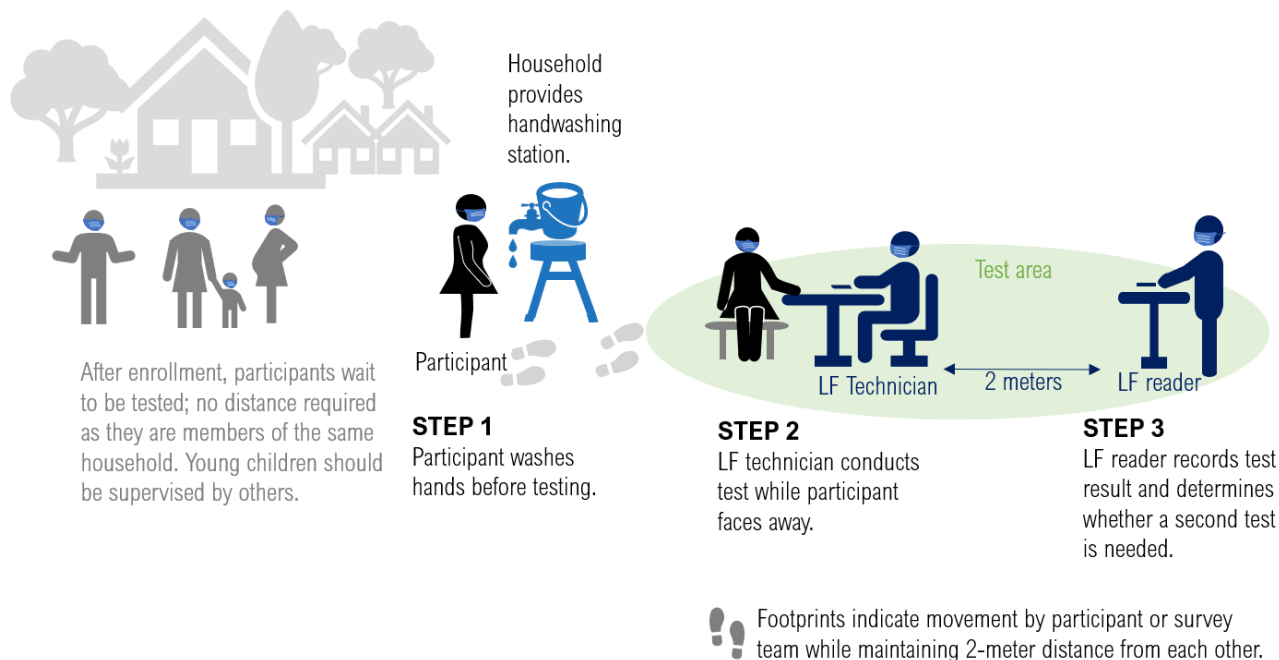
- The survey team leader should request that everybody in the household wash their hands with clean water and soap, ensuring that the 2-meter distance between them and the survey team is maintained. The survey team should also wash their hands.
  - If there is no readily available water for handwashing at the home, hand sanitizer should be distributed by the survey team to participants before they enter the test area.
- If tables are provided, the survey team should disinfect them upon arrival.
- Household members will maintain a 2-meter distance from the survey team, except when being examined.
- Enrollment and registration:
  - If the consent form will be shared between participants for reading, the consent form should be laminated to allow sanitizing between participants.
  - Everyone should sanitize their hands before and after touching a pen and the laminated consent form.
- The technician should call everyone one by one to avoid crowding in the testing area.



- Participant should place one arm on the testing surface (best if a surface that can be easily and quickly disinfected) while facing away from the technician.
- The technician will conduct FTS as normal while wearing a pair of new gloves.
- The reader will sit two meters away and record the results.
- Repeat steps above for everyone in the household.
- The survey team and local organizers must designate staff/volunteer to ensure that household members and neighbors not participating in the survey stay outside of the survey and waiting area. Consider how crowd control will handle curious children crowding to look at the survey process.

## Exhibit 2. Survey at households

### Household LF Survey







#### 4.3.2 STATIC POINT LF SURVEY

##### Standard protocol before day of survey

- A static site survey requires additional preparation to ensure that preventive measures will be practiced. The survey team should arrive at the survey location one day before the scheduled start of the survey to coordinate with local organizers/volunteers.
- The day before the survey starts, the survey team leader should evaluate the selected survey location and ensure that it allows for good ventilation (preferably outdoors) and that it has enough space to accommodate expected participants with social distancing.
- Consider assigning timeslots to community members to reduce the potential of overcrowding.
- Set up the following stations: waiting area, welcome table, handwashing, testing, and recording. Designate one person from the local organizers (such as village/community health volunteer) to manage each station.
- Identify the waiting area and the maximum number of participants allowed in the waiting area. If necessary, identify a secondary waiting area. Set up with markings on the ground (with chalk or tape) to designate spaces 2 meters apart.
- Set up welcome working space to register participants.
- Survey team and local organizers must designate staff/volunteer to ensure household members and neighbors not participating in the survey stay out of the survey and waiting areas. Consider how to handle curious children crowding around to look at the survey process.
- Post signs at the entrance providing information on COVID-19.
- Ensure that waste is disposed properly daily.

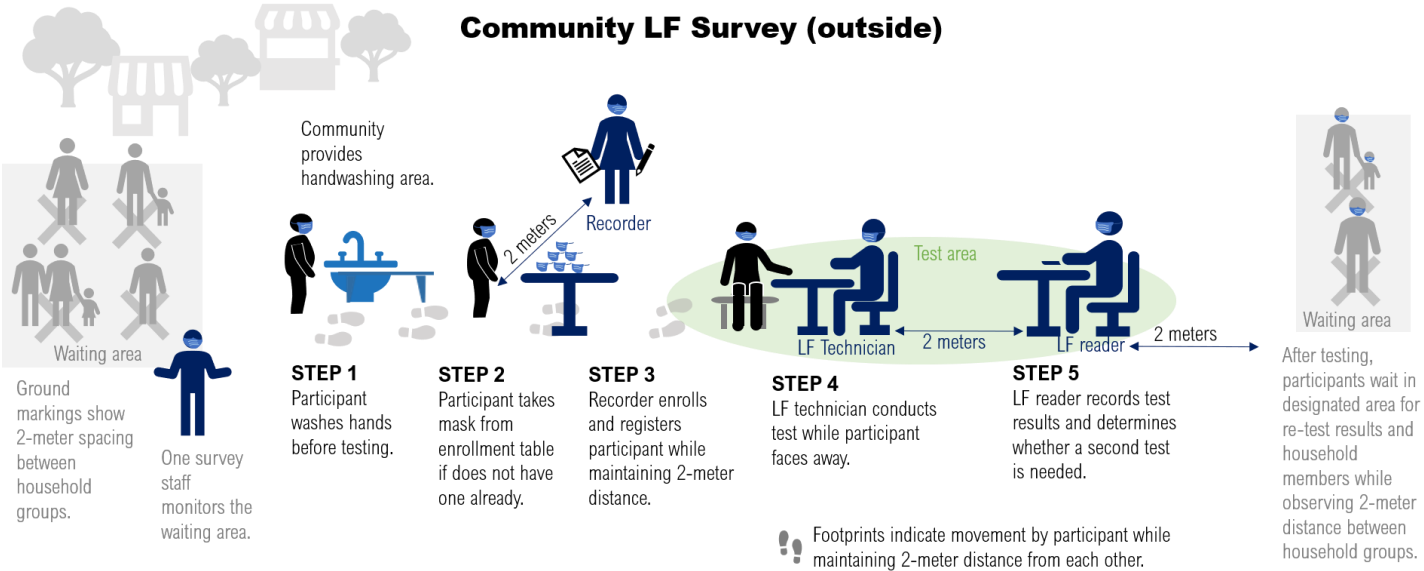
##### Conducting the examination

- Use megaphones to ensure that community members hear and are aware of the COVID-19 precautionary measures.
- Community members should maintain distance of 2 meters from the survey team, except when being examined. Everyone should wash their hands.
- Enrollment and registration:
  - If the consent form will be shared between participants for reading, the consent form should be laminated to allow sanitizing between participants.
  - Everyone should sanitize their hands before and after touching a pen and laminated consent form.
- Station managers will call people to come forward. Family groups can stay together. Station managers will ensure that the maximum number of people allowed at each station is adhered to and that distance between family groups is maintained.



- At the hand washing station, the station manager should ensure that everyone washes their hands with soap and water for at least 20 seconds.
- At the testing station:
  - The surface of the working space should be easily disinfected or covered with something that can be easily disinfected.
  - Participant should place one arm on the testing surface while facing away from the technician.
  - The technicians will add blood to FTS, write the participant ID and time to be read on it, and hand the test to the recorder.
  - Participants will move and wait at a safe distance from the recorder and from other participants.
  - The technician should change gloves between each participant and dispose gloves into the waste bag (sharps will be disposed in sharps container per safety protocol).
  - The technician will wipe the arm rest surface with a sanitizing solution and paper towel between testing participants.
- At the recording station:
  - The reader reads results at the appropriate time and records the results.
  - When called, participants step forward, and while still maintaining social distance, receive their results. Ensure confidentiality is observed when sharing the results.
  - If the test is positive or invalid, the participant is asked to return for a second test and shown where to wait.

**Exhibit 3. Survey at community/static point**





### 4.3.3 SCHOOL-BASED LF SURVEY

#### Standard protocol upon arrival

- Before testing begins, the survey team should work with school and health post staff to set up the testing site to ensure that the additional safety precautions are made.
- In addition to routine messages discussed about NTD surveys, they should explain the COVID-19 safety precautionary measures that should be followed.
- Risk of infection is significantly lower outdoors, so this is highly preferred.
  - If test will be conducted inside a classroom: ensure that windows are open, move desks and chairs against the wall to provide an open space, use chalk or other marking devices to designate locations where students will stand while waiting, always maintaining 2-meter distance from the survey team, except for the person being examined.
- Set up so that a 2-meter distance is maintained between survey team and the children and teachers. See Exhibit 3 for a sample set up (e.g., use chalk or tape to designate locations where students will stand while waiting that are 2 meters apart from each other).
- Determine the maximum number of spots available for waiting and coordinate with each classroom’s teacher to determine the number of students that should be brought at one time. There should be enough school personnel present to manage the number of students in the waiting area. If space allows, an additional nearby space can be used as secondary waiting area for large groups of students.
  - The survey team should work with the school to designate someone who will ensure that individuals not participating in the survey stay out of the survey and waiting areas. They should also ensure crowd control, keeping a minimum of 2-meter distance between people.
- Set up (if not already in place) handwashing stations.
- For surveys requiring systematic selection, a prior selection can be done to select participants to separate them from non-selected individuals.
- Ensure that waste is disposed properly daily.

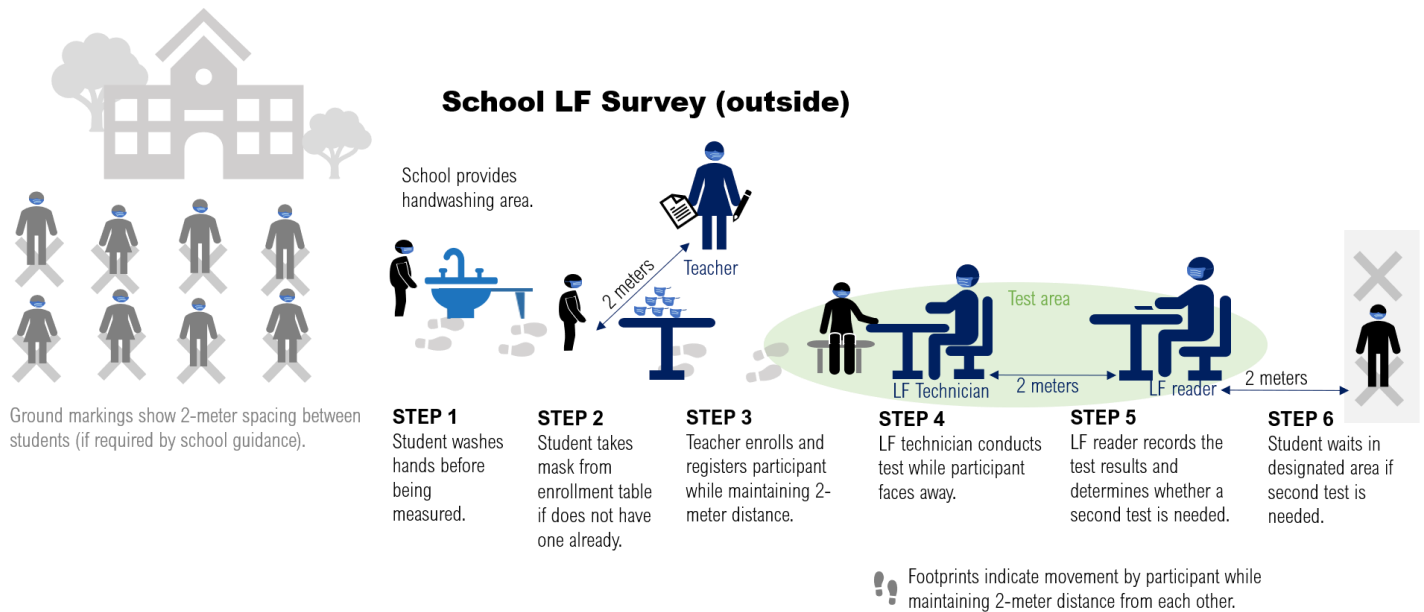
#### Conducting the examination

- Before examination, everyone must wash their hands. The teacher should allow students to move one by one to the handwashing point after their name has been called out to ensure social distancing. All children should wash their hands for at least 20 seconds.
- Everyone should maintain a 2-meter distance from the survey team, except when being examined; ensure participants wash hands thoroughly and abide by school guidelines on mask wearing.
- A teacher should call everyone, one by one, to avoid crowding around the testing area and record their details.
- At testing station:
  - The selected student/participant should place one arm on the testing surface (best if a plastic surface that can be easily and quickly disinfected) while facing away from the technician.



- The technicians will add blood to FTS, write the participant ID and time to be read on it, and hand the test to the reader.
- Students will move and wait at a safe distance from the reader and from other participants.
- The technician should change gloves between each student and dispose gloves into the waste bag (sharps will be disposed in sharps container as usual).
- The technician will wipe the arm rest surface with a sanitizing solution and paper towel between tests.
- At the recording station:
  - Recorder reads results at appropriate time and records the result.
  - If the test is positive or invalid, the student is asked to return for a second test and shown where to wait.

#### Exhibit 4. Survey at school (outside)





## 5. SURVEY SUPERVISION

In addition to routine survey supervision, supervisors should ensure that COVID-19 preventative measures are followed from start to the end. A dedicated person from the survey team should observe the measures adherence and provide immediate feedback to allow for supportive supervision.

### 5.1 COVID-19 SAFETY MEASURES RELATED TO SUPERVISORS

- Supervisors should follow the same infection control measures as surveyors (see section 4.2 above).
- In-person survey supervision should be delegated to local supervisors as much as possible. If district- or national-level supervisors must be brought in, they should not come from areas with higher COVID-19 infection rates and risk control measures should be taken during travel (see section 4.1 above).

### 5.2 ENSURING COVID-19 SOPS ARE BEING FOLLOWED

- Supervisors should ensure that SOPs related to COVID-19 are being followed. See Appendix A for items that can be added to a supervision checklist.
  - **When the supervisor observes something that is not correct, they should provide immediate feedback to the surveyors so that the issue can be corrected.**
  - They should also summarize issues being addressed as part of regular feedback to their LF program manager during survey, highlighting any high priority concerns for district- and central-level staff.

### 5.3 MONITOR COVID-19 CASES

- NTD program managers should receive daily updates on new COVID-19 cases while the team is in the field and for up to 2–3 weeks after they leave.
  - If cases start to increase in the activity area while the team is in the field, the program manager will need to coordinate with the COVID-19 task force to decide whether the team needs to withdraw. Consider testing staff for COVID-19 as soon as they return from the field.
  - Also record and document reported cases for 2–3 weeks after the team has left.

### 5.4 VIRTUAL SUPERVISION

- District- and national-level supervision may be virtual. Virtual supervision methods include
  - Group chats like WhatsApp can be used during surveys to share observations and advise during surveys between survey teams and supervisors.
  - Field-based staff can share photos and videos (of ongoing training and field work) taken with phones. Supervisors can check for adherence to correct mask wearing and social distancing.



- Frequent (e.g., daily) calls to field-based supervisors can be made to check in on coverage, whether SOPs are being followed, and discuss any issues that arose that day. Supervisors should follow up on actions arising as needed.
- When electronic data capture methods are used, remote supervisors should check data daily and call teams when inconsistencies are noted.

### 5.5 DOCUMENTATION, LEARNING, AND ADAPTING

*As the whole world looks to adapt surveys to the new COVID-19 environment, the rapid sharing of key lessons learned, and recommendations should be prioritized.*

In addition to the immediate sharing of information that allows real-time changes to be made during LF surveys (see supervision section 5 above), it will be helpful to document and share more widely lessons learned. There are a few ways that this can be done:

- **Post-survey review meetings.**
  - These review meetings are usually held after surveys are finished and should be adapted to include capturing COVID-19-related learning. What worked well? What new challenges arose? How were these managed? How did costs differ compared with pre-COVID-19 operations? Notes taken during the meeting should be included in post-survey field work reports and made available for future learning and adapting exercises.
  - These may be held virtually. If held in person, the same infection control measures outlined under training (see section 3) should be followed.
- **Supervisor reports.**
  - Supervisors should submit a short end-of-survey report that includes observations and lessons learned on operating under COVID-19, including during meetings with leaders, planning, training, survey field work, and post-survey activities. Observations can include documenting the changes made as well as any challenges faced, solutions found, and recommendations made. See Appendix B for a sample form that can be combined with TAS supervision checklists or modified.
  - Completed forms can be summarized and synthesized at the district and again at the regional/national level with key learnings and recommendations for planning and future activities shared in post-survey review and other meetings and saved for future access.
- **Program-level synthesis and sharing of learning.** National programs will want to synthesize, document, and share lessons learned. This includes the following best practices
  - Quick sharing of photos and stories (e.g., via Twitter, Instagram, on websites, and in blogs) from the field that illustrate adaptations being made.
  - Post-survey reports that include a section on learning from COVID-19. Under this section material documented in supervisors' reports, post-survey review meetings, and from other sources can be brought together and summarized.



- Reports at district and/or national level should include recommendations for future SOPs, training, planning, etc.
- Materials from reports can be further shared in review and other meetings, group chats, blogs, tweets, publications, etc.

If you have any feedback on this document or recommendations for future versions, please email [acteast@rti.org](mailto:acteast@rti.org).



**APPENDIX A. CHECKLIST TO USE DURING TRAINING**

<b>Survey Training Checklists during COVID-19</b>		<b>Yes/No</b>	<b>Comments</b>
<b>Pre-training checklist</b>			
1	Is the venue large enough to accommodate the intended number of participants with a 2-meter distance between them?		
2	Are seats, benches, or desks arranged 2-meter apart?		
3	Is the venue well ventilated? Are windows and doors functioning well and are open?		
4	Is the venue marked to limit access of unauthorized personnel?		
5	Is the venue cleaned and disinfected with standard cleaning and disinfectant before participants arrive?		
6	Is the shared bathroom cleaned and disinfected at the beginning of the day and again at midday?		
7	Is there a washing area set up and equipped with an adequate supply of water and soap at the beginning of the training?		
8	Is there a focal person assigned to monitor all hygiene and sanitation supplies and activities during the event?		
9	Is adequate alcohol-based sanitizer available in areas where water is scarce?		
10	Is every attendant wearing a face mask? Is the mask worn properly (covering nose and chin)?		
11	Is there a focal point assigned to manage screening? Do they have a COVID-19 signs and symptoms checklist available to them (see Box 1)?		
<b>Post-training checklist</b>			
1	Was the venue cleaned and disinfected with standard cleaning and disinfectants at the end of the day?		
2	Was the shared bathroom cleaned and disinfected at the beginning and end of the day?		





<b>Survey Training Checklists during COVID-19</b>		<b>Yes/No</b>	<b>Comments</b>
3	Were all materials and equipment disinfected after each use?		
4	Did participants wash their hands with soap or use hand sanitizer properly as they exited and returned to the venue for any reason?		
5	Were disposable masks properly disposed of in the waste bin after the training?		
6	Was every participant screened for signs and symptoms of COVID-19 using a checklist and thermometer before entering the venue?		
7	If a participant reported COVID-19 symptoms, were they managed according to local guidelines?		



**APPENDIX B. SUPERVISION CHECKLIST**

Pre-TAS and TAS already have a comprehensive supervision checklist. An additional checklist should be used during the COVID-19 pandemic. This checklist should be distributed to all supervisors before the survey begins.

<u>Survey Supervision Checklist for COVID-19</u>		<u>Yes/No</u>	<u>Comments</u>
1	All survey team members were screened for COVID-19 before beginning the survey. If team members had a positive screening result, were surveyors asked to stop working and sent home to isolate.		
2	Survey team followed local guidelines regarding traveling to the survey site.		
3	Survey was done outside. If this was not possible, describe the extra precautions taken.		
4	Appropriate communication was given to participants before survey, including information on COVID-19 safety precautionary measures and how those would be applied during this visit.		
3	Survey team members washed hands thoroughly before interacting with community members.		
4	Participants washed hands before and after their blood sample was taken.		
5	Survey team members always wore face masks. Surveyors wore gloves when conducting FTS.		
6	Two-meter distance was maintained between survey team members and participants at all times except during blood sample.		
8	Survey equipment was disinfected with alcohol-based solution before each participant and after contact with participants.		
9	Survey results were accurately recorded and communicated.		



Documentation of learning	
Time period	Description of relevant learning and adapting
Pre-survey (including planning and training)	
During survey implementation	
Post-survey	
Provide your top 1-2 recommendations for future activities	