### The Sphere field school: preparation

**The feasibility and preparation of this module is key and should be considered in advance of any decision to conduct it.**

##### Feasibility

* Either the training venue should be very near to the chosen project location, or extra time should be factored into the exercise to account for necessary travel time. Remember to plan time for all phases of the exercise, including briefing and preparation, travel time, project visit, and the preparation and delivery of the presentations.
* The context should allow for a safe field visit.
* The group should be respectful and committed to respecting the exercise rules.

##### Preparation

* Identify the project you want to visit.
* Get agreement from the project managers and local authorities/ leaders as appropriate.
* Ensure the community has been informed of the visit and ensure the visit does not raise expectations.
* Organise the practical details for your project visit. Make sure that project staff can brief the group on location. Ideally, one project staff person accompanies each group during the visit.
* Design the ‘Brief’ for the participants with the project staff (there is an example on the next page from a previous field visit).

### Instructions to be completed, printed out and distributed to the participants at various stages of the field visit

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| Instructions to be distributed to start the module | **Rules**   * Respect the culture * Get agreement before taking any pictures * Respect the environment * Respect timing * Respect the security rules (see handout) * Remain (organised) in teams * If you have any questions or issues, find and ask the facilitator   **Contact details**   * Project staff: xxx * Facilitator: xxx * Emergencies: xxx |
| Instructions to be distributed before the visit | **Group preparation**  This stage is as important as the project/field visit.   * Review the information about the project * If necessary, select and adapt the indicators for your assigned standard(s) you will monitor, and review the associated key actions and guidance notes * Prepare a list of data needed and questions you would like to ask project stakeholders * Review other standards or principles which should be considered to complement your findings, such as the Core Humanitarian Standard (CHS) (which replaces Sphere Core Standards’ Chapter), humanitarian principles, Protection Principles, cross-cutting themes or minimum standards from another technical chapter * Organise your teams with clear roles and responsibilities, i.e. who is running interviews, who is taking notes, etc. |
| Distribute after the group preparation | **Coordination**   * Meet for 10’ to coordinate with other groups, and refer to the CHS Commitment 6 |
| Distribute after the visit, for the preparation of the presentation | **Presentation**  Each group will prepare a 5’ presentation to include:   * The minimum standard assigned to your group * The key indicators studied in your group * The methodologies you used on your visit (why did you choose these methodologies?) * Describe whether the minimum standard was met * What, if any, action could be taken to meet the standard?   Remember the following:   * Use the training materials available, such as flip charts, markers, sticky paper, etc. * All group members should contribute to the presentation * A time limit of 5’ for each group presentation will be strictly followed |

### The Sphere field school: project brief

Possible template for the project brief and suggestions on how to complete it.

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| Background | To understand the type of disaster/risk |
| Project objective | From the logframe |
| Project beneficiaries | Numbers, description, selection process |
| Implementing agency | Name/history of interventions in the area/clarification about the implementation chain (i.e. is the project part of a programme funded by a donor, through a UN agency, or partnering with an INGO which in turn partners with a local CBO, for instance) |
| Project target and rationale/ logframe | Key outputs and indicators for the sector of intervention focused on during the visit |
| Degree of project completion | Is the project still ongoing or already achieved |
| Budget | To capture the size of the intervention |
| Complementary interventions by other stakeholders | Especially if the achievements of the projects depend specifically on achievements by other agencies |
| Project planned exit strategy | To be able to answer respondent queries about what comes next when carrying out the interviews |

### A ‘real life’ example of project brief

##### Project background

In 2019, ONG identified a gap in the provision of health facilities in WHERE, an area where they had been working on implementing earlier initiatives. Many local health facilities were damaged or destroyed as a result of the floods leaving a marked gap in services available for affected communities, particularly the most vulnerable. Over WHERE COUNTRY as a whole, 452 of the 2,957 health centres in the 33 flood-affected districts were damaged or destroyed during the floods. ONG has earlier been working in WHERE District, as well as in other parts of the country, implementing health services in areas which were previously affected by conflict and then now by the flooding there.

The health infrastructure in this area was badly affected by the conflict and subsequently the flooding, and there have been insufficient advances made in rendering these health facilities fully operational again, even though some were only mildly damaged. There were 250 reported deaths in WHERE with hundreds injured and/or disabled. A number of health facilities in WHERE have been washed away by the floods including the civil hospital. Some of these areas were previously areas where militancy existed and a military presence remains in some cases. ONG has already been carrying out provision of health services in this area using other sources of funding, which are coming to an end in mid-January 2020, and recognise that the gap will still remain.

##### Project Purpose

To improve the health of flood-affected communities through preventative and curative health service provision and by improving the capacity of three Static Health Units (SHUs) for 18 months in WHERE District.

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| Planned outputs | Sector | Indicators |
| * 3 SHUs provide healthcare services to flood-affected communities in WHERE District * Repair and capacity building provided to government-run SHUs | **Health** | * A health facility utilisation rate of 75 patients per day is achieved * 85% of the registered antenatal women receive antenatal care * 85% of the registered antenatal women receive at least 2TT doses * Over 70% availability of health staff needed to run the health units at full strength * 80% referral system for patients against acute illness * 3 SHUs will receive relevant maintenance and repair to be fully functional after project end * 3 SHUs fully equipped with medical equipment to continue to function beyond the project period * SHUs staffing and support secured for 3 SHUs beyond project period |

*Source: Training materials developed by Kelly Wooster, Wooster Consulting*