**Tool 3.2.2 Monitoring and Quality Checklist for Different Stages of DAPS Centre Set-up[[1]](#footnote-1)**

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| --- | --- | --- | --- | --- |
| **Planning and Site location** | **Yes** | **No** | **Person responsible** | **Remarks/Action** |
| A needs assessment has been carried out together with the community prior to decide whether the community would benefit from the DAPS Centre  |  |  |  |  |
| Existing facilities have been mapped and it has been determined that such space is needed |  |  |  |  |
| *Types of available spaces for DAPS centres:* |
| Existing government structure |  |  |  |  |
| Government land |  |  |  |  |
| Existing privately owned structure |  |  |  |  |
| Existing privately owned land |  |  |  |  |
| If private, who owns the land? |  |  |  |  |
| Has any agreement been signed with the owner? |  |  |  |  |
| *Identified area is safe:* |
| Free rom hazardous materials and toxic substances |  |  |  |  |
| Safe from flood zone, landslide zone, landmines/unexploded ordinance (UXO) |  |  |  |  |
| No risk of armed conflict |  |  |  |  |
| Not near military barracks |  |  |  |  |
| Structure certified as safe by municipal engineer |  |  |  |  |
| Safe distance from traffic |  |  |  |  |
| *Space is accessible to:* |
| To women and girls |  |  |  |  |
| To men and boys |  |  |  |  |
| To gender and sexual minorities |  |  |  |  |
| To persons with disabilities |  |  |  |  |
| To the elderly |  |  |  |  |
| To religious and ethnic minorities |  |  |  |  |
| To indigenous persons |  |  |  |  |
| Close to complementary services (health, psychosocial, legal, education, livelihoods) |  |  |  |  |
| Size of the identified space sufficient for the number of people projected to participate in DAPS Centre |  |  |  |  |
| If the space is also a CFS, there is a shaded area for outdoor activity and sports |  |  |  |  |
| Community agreement to selected site location (can be through participatory mapping process) |  |  |  |  |
| Women, girls, men and boys have been consulted about the types of activities they would like to partake in at the DAPS Centre. Their needs and ideas are reflected in the activity plan and daily schedule |  |  |  |  |
| Agreement with local/community officials about their accountability towards DAPS Centre implementation |  |  |  |  |
| A phase-out or transition plan has been developed early on, in consultation with the community and other interested parties, to hand over the activities and link with broader recovery planning |  |  |  |  |
| **Logistics and Shelter** |
| Costing and implementation timeframe collected from logistics department |  |  |  |  |
| Based on implementation timeframe, decision for structure has been taken (permanent site/tent/temporary structure) – please specify which one |  |  |  |  |
| Sufficient budget for procurement of DAPS Centre materials |  |  |  |  |
| *If using tents for site structure:* |
| Sourcing of appropriate quality tents |  |  |  |  |
| International freight, storage and transportation implications have been considered |  |  |  |  |
| Tents can withstand different climates and changing seasons, including temperature, flooding or snow |  |  |  |  |
| Tents are protected with shade netting, raised flooring and plastic sheeting |  |  |  |  |
| ***If building temporary structure:*** |
| Design drawings and bill of quantities in coordination with shelter officer and logistics officer |  |  |  |  |
| Plan and budget for procurement and delivery of suitable quality materials to site |  |  |  |  |
| Follow donor, IFRC and National Society procurement processes and tendering requirements as required |  |  |  |  |
| Coordinate site clearing and building of structure with shelter officer |  |  |  |  |
| Availability of external fencing if a CFS |  |  |  |  |
| **Policies and Procedures** |
| All staff and volunteers have signed the Child Protection Policy and Code of Conduct |  |  |  |  |
| All staff and volunteer members are subject to a background check (criminal check is required for both and references are required for staff), including for site guards |  |  |  |  |
| All staff and volunteers received a training on the Centre Code of Conduct, the Child Protection Policy and the PSEA Policy |  |  |  |  |
| The Code of Conduct is printed out and on display in relevant languages and in a child/youth friendly way |  |  |  |  |
| Information related to other services and facilities is available and staff and volunteer are aware on how to refer individuals to other services if required |  |  |  |  |
| **Staff and Volunteers** |
| There is a gender balance of staff and volunteers |  |  |  |  |
| Staff and volunteers are at least 18 years of age (though 15 – 18 years old children can facilitate certain activities for younger children, only if supervised by an adult) |  |  |  |  |
| There are staff / volunteers at each space on a permanent basis who have supervisory responsibilities for other volunteers and for reporting the daily activities |  |  |  |  |
| Staff and volunteers have written agreements stating the hours they work and the salary or stipend they receive |  |  |  |  |
| Staff and volunteers take breaks during the day but not all together. The breaks do not hinder the smooth operation of the activities |  |  |  |  |
| Staff / volunteers know how to provide safe referrals including for both CP and GBV as well as medical cases |  |  |  |  |
| Staff and volunteers are periodically reviewed, supervised, encouraged, looked well after and have access to training opportunities |  |  |  |  |
| A volunteer / staff capacity building plan is in place |  |  |  |  |
| Staff and volunteers receive sessions by the officers on self-care at least once a month |  |  |  |  |
| A clear grievance structure for staff and volunteers is in place and all staff and volunteers are aware of this |  |  |  |  |
| **Coordination** |
| Programme activities are contextually appropriate and relevant to needs of children, adults and communities |  |  |  |  |
| The creation of safe spaces (DAPS Centre) has been communicated to protection and PSS working group and relevant forums |  |  |  |  |
| The services provided in the DAPS centre are part of the referral pathway in the community/camp |  |  |  |  |
| Weekly meetings take place between the DAPS Centre coordinator, PGI and PSS officer (CEA and RFL when relevant). PGI and PSS delegates should attend these meetings once a month |  |  |  |  |
| There is a debriefing by the PGI or PSS officer with staff and volunteers at the end of each day |  |  |  |  |
| There is a weekly PSS, PGI and CEA meeting (with all relevant staff) where challenges, needs, best practices and action points are discussed |  |  |  |  |
| Community and child needs are re-assessed every 3-6 months (depending on the nature of the emergency and the pace at which it is changing) to ensure that spaces are suitable and appropriate |  |  |  |  |
| The PGI/PSS officer remains alert related to support outside the movement and shares with delegates info that would potentially lead to joint interventions or partnerships (external actors might have the expertise and skills the local NS could benefit from) |  |  |  |  |
| **Community Engagement and Children’s/Youth participation** |
| Volunteers (or facilitators with experience) have been recruited and trained to run select activities in the DAPS Centre |  |  |  |  |
| Children are included in rule settings, activity selection and development of events whenever possible and can choose where they want to participate if more than one option is provided |  |  |  |  |
| Children actively participate in the DAPS Centre activities |  |  |  |  |
| Women and men actively participate in group sessions (PGI modules, parenting skills, psychoeducation, awareness raising sessions etc.) |  |  |  |  |
| Women, girls, men and boys know who to report to if they experience a safety and/or security issue (inappropriate behaviour, threats, sexual exploitation, abuse, etc.) |  |  |  |  |
| All staff and volunteers are aware of the importance of building trust relationships particularly when it comes to children, so the latter can feel safe to report a protection concern to a staff or volunteer. This is something that the PGI/PSS officer and space supervisor reinforces frequently. |  |  |  |  |
| **Facilities and Equipment (including water, sanitation and hygiene)** |
| The temperature in the space is appropriate and fans or air conditioning, shaded area, heating system – (depending on the weather conditions) are installed |  |  |  |  |
| Indoor and outdoor spaces are used effectively for the number of children (and adults) attending sessions to do the full range of activities scheduled |  |  |  |  |
| Measures have been taken to ensure physical access for adults and children with physical disabilities |  |  |  |  |
| WASH facilities are accessible and near the space. If latrines are not in proximity, a mechanism is in place to monitor/accompany children |  |  |  |  |
| There are separate toilets for boys and girls if there is a CFS space |  |  |  |  |
| There are separate toilets for men and women if the space is a DAPS Centre and at least one toilet for children |  |  |  |  |
| Clean drinking water is available |  |  |  |  |
| Water and soap are available for hand washing |  |  |  |  |
| There is access to a space for the treatment of any injury or minor illness and the staff/volunteers know where to refer a person needing this type of support |  |  |  |  |
| At least one first aid box is available, and any medicine is safely stored away from children |  |  |  |  |
| Proper facilities of waste disposal (rubbish bins / trash cans) are provided) |  |  |  |  |
| At least one fire extinguisher is available |  |  |  |  |
| Cleaning materials for site and toys are available |  |  |  |  |
| Safe lighting and electricity supply (if available) or solar lighting |  |  |  |  |
| Equipment and materials are procured on time and are suitable for activities for children (both girls and boys) and adults |  |  |  |  |
| Children’s and Adult’s artwork and handcrafts are on display |  |  |  |  |
| There is no broken equipment, completely broken or dirty toys, or sharp edges on equipment |  |  |  |  |
| Lockable storage is available |  |  |  |  |
| **Activities** |
| The weekly activity schedule is agreed on with the PGI/PSS officers and is communicated with all staff and volunteers on time |  |  |  |  |
| The activity schedule includes psychosocial support activities, recreational activities (games, crafts and art, sports), non-formal education, CEA activities (radio-listening, group sessions) for children and adults etc |  |  |  |  |
| The Activity Plan is always communicated to individuals coming to the centre and is on display and translated in their language, including illustrations (due to low literacy level), when possible |  |  |  |  |
| Children are taught life skills suitable to their age group, stage of development, ability and gender at least once per week |  |  |  |  |
| Activities are adapted for children and adults with disabilities where possible |  |  |  |  |
| Structured activities are delivered for different age groups according to the needs of each age group (and gender when needed). Particularly for children see suggested Ratio below:Ratio of Child to Caregiver/Volunteer/Staff per Age group of ChildrenUnder 2 y.o: Should not be attending the space without their caregiver.2-4 y.o: 15 children to at least two volunteers/staff5-9 y.o.: 20 children to two volunteers/staff10-12 y.o.: 25 children to two volunteers/staff13-18 y.o.: 30 children to two volunteers/staff |  |  |  |  |
| Water, sanitation and public health awareness activities are being carried out on a monthly basis. Children receive awareness sessions in a tailored, child friendly manner |  |  |  |  |
| Safe hygiene practices (hand washing) is part of daily activity plan |  |  |  |  |
| Sexual and reproductive health messages are shared to adults and to youth (which are suitable to their age developed on youth friendly manner) |  |  |  |  |
| **Inclusion and Outreach** |
| Outreach activities take place frequently and volunteers are approaching the age groups that they are assigned for when possible |  |  |  |  |
| Outreach activities target people with disabilities where the latter provide their opinion on how we can enable their access in the space |  |  |  |  |
| Staff/Volunteers working in a CFS are doing outreach in the community to identify vulnerable children currently unable to attend CFS (may include children with disabilities, UASC, child/teenage mothers, etc). Likewise, for DAPS centres staff/volunteers target through outreach vulnerable adults (survivors of GBV, trafficking etc.) |  |  |  |  |
| Activities through mobile teams are organised in remote and under-serviced communities when possible |  |  |  |  |
| Key messaging is shared to the community monthly (ex. reaching out to parents with messages related to children’s participation in the CFS, safety during monsoon etc.) |  |  |  |  |
| **Administration** |
| Records are kept for each person attending a space. These records include information including age, gender, name and HH number if it is a child or a PWD |  |  |  |  |
| Daily records of attendance noting newcomers, are kept in a lockable cabinet |  |  |  |  |
| The safe space supervisor keeps records of any incidents such as injury, fire, breakages, damages caused by natural disaster etc. noting details of the incident, children or adults involved and actions taken and shares with the officer. They are both aware that they need to fill the Incident Reporting Form and share it with the Programme Delegate and Security. |  |  |  |  |
| **Monitoring, Evaluation, Accountability and Learning** |
| Feedback methods are in place to ensure adults can give inputs on problems, challenges and successes |  |  |  |  |
| A child friendly feedback mechanism is set-up and being used by children |  |  |  |  |
| Monitoring and evaluation systems are in place, and the quality checklist is used once a month (action points are to be addressed by the next inspection). The PGI or PSS officer has clear understanding on the follow up actions as per the checklist. |  |  |  |  |
| Feedback on the outcomes monitoring and evaluation processes (ex. Quality checklist) are shared with staff/volunteers and the latter inform the communities for relevant changes in programming |  |  |  |  |

1. Based on the checklist developed by the PGI team in Cox’s Bazar, Bangladesh. Content has been added from the “Philippine National Implementation Guidelines for Child Friendly Spaces In Emergencies” and IFRC/World “Operational Guidance for Child Friendly Spaces in Humanitarian Settings.” [↑](#footnote-ref-1)