The I-TECH Levels of Training Framework is adapted from the US AIDS Education and Training Centers (AETCs). It outlines a six-level framework for ensuring that training programs result in the transfer of learning from classroom to jobsite. The first five levels reflect a progressive degree of independence, responsibility, and mastery among learners in relation to a particular set of skills, knowledge, and attitudes. Levels 1 and 2 trainings typically occur in a classroom setting, and are used to impart large bodies of knowledge to learners. Levels 3 and 4 trainings focus on the application of new skills and knowledge to a learner’s own work setting or one similar. Level 5 training involves establishing systems to support learners who primarily work independently, but may occasionally require assistance with complex situations. The sixth level refers to systems strengthening, which encompasses efforts to improve or streamline organizational systems, processes, and routines to ensure a supportive environment in which transfer of learning can occur.

**LEVEL 1**

**DIDACTIC TRAINING**

**LOCATION:** Classroom setting in any location (training facility, health care facility, etc.).

**METHODS:** One-way communication from trainer to learner, though might include Q&A from participants; includes specific learning objectives.

**ROLE OF LEARNER:** Learners in passive role.

**EXAMPLES:** Lectures, presentations.

**LEVEL 2**

**SKILLS-BUILDING WORKSHOPS**

**LOCATION:** Classroom setting in any location (training facility, health care facility, etc.).

**METHODS:** Participatory training methods (must include a method other than lecture plus Q&A); includes specific learning objectives.

**ROLE OF LEARNER:** Trainer leads sessions, but learners are actively involved; two-way knowledge exchanges between trainers and learners.

**EXAMPLES:** Case presentations, role plays, small group work, simulated patients.

**LEVEL 3**

**PRACTICUM**

**LOCATION:** Work setting similar to that in which the learner will apply new skills and knowledge (but not learner’s work site); trainer and learner are in same location (i.e., not communicating via phone or email).

**METHODS:** May include discussion, case presentations, demonstrations, grand rounds; patients may be present; includes real-life resources, constraints, challenges; training can be one-on-one or in small groups (eight people or under); must include exchange of information and knowledge from trainer to learner that is related to topic of training (i.e., learner is not just observing at the site); includes specific learning objectives.
**LEVEL 3 CONTINUED**

**ROLE OF LEARNER:** Trainer leads sessions, but learners are actively involved; two-way knowledge exchanges between trainers and learners.

**EXAMPLES:** Preceptorship, clinical practicum, mini-residencies.

**LEVEL 4**

**ON-SITE MENTORING**

**LOCATION:** Learner’s work site; trainer and learner are in same location (i.e., not communicating via phone or email).

**METHODS:** May include discussion, case presentations, demonstrations, grand rounds, clinical vignettes; patients may be present; includes real-life resources, constraints, and challenges; training can be one-on-one or in small groups (eight people or under); must include exchange of information and knowledge between trainer and learner; includes learning objectives.

**ROLE OF LEARNER:** Learner is an active participant (not just recipient of information); learner is actively engaged in the work with the trainer present and/or observing; learning may be initiated by learner or by trainer.

**EXAMPLES:** Clinical mentoring, supportive supervision, on-site training in using new EMR system.

**LEVEL 5**

**DISTANCE CONSULTATION**

**LOCATION:** Trainer and learner are not in same location.

**METHODS:** Consultation with expert via telephone, email, instant messaging, video conferencing, etc.

**ROLE OF LEARNER:** Interaction is typically initiated by learner and is usually related to a specific patient, situation, or challenge faced by the learner.

**EXAMPLES:** Warmline, telephone, or email consultations, video-conferencing case discussion.

**LEVEL 6**

**SYSTEMS STRENGTHENING**

**LOCATION:** Usually at the facility, organization, or site receiving assistance.

**METHODS:** In contrast to the previous levels, assistance is provided to address organizational and/or system issues versus helping an individual master new skills and knowledge.

**EXAMPLES:** Strengthening national training networks; curricula enhancement in pre-service training institutions; strengthening health care facility record-keeping systems; addressing patient flow issues; developing systems to track medication defaulters; introducing systems to avoid pharmacy stock-outs.