

Supportive Supervisory visits (Pre CRM) report under Family Planning, Meerut district

Date	Facility name	Issues	Actions taken	Recommendations	Responsibility	Timeline
10/3/2019	CHC Sardhana	Non availability of Condom pieces in condom boxes installed at CHC Sardhana	Discussed MOIC for the same, DPM shared that CMSD has sufficient quantities, so MOIC was asked to get the supply from the district and get the boxes replenished with condom pieces		MOIC	10/6/2019
		Bed sheets in wards (Post OP) not been replaced since 26/09/19	Discussed issue with Sister incharge, she informed that today they have received the clean sheets, so shall be changing tomorrow for all beds.	Regular change of sheets is required as per the guidelines	Sister incharge	10/5/2019
		Non functional boiler in Labor room, Poor IP practices observed in LR	MOIC made aware about non functionality of Boiler, No spare boiler is available in store, this needs to be repaired urgent.	Regular checking is required for all the electric equipments for functionality	LR incharge	10/6/2019
		No PPF services provided to PNC clients [Spoken 6 post CS Clients]	Discussed issue with Operating doctor she shared that she is not confident for PPIUCD acceptance (Intrauterine), so explained the procedure and discussed her role in supporting the clients for providing PPF services	All clients needs to be counselled for PPF services, Counsellor needs to be pro active for counselling all clients during ANC as well as PNC period at facility	Service providers & FWC	
		No PPS during NVD but only during CS	During 58 CS at facility since Apr'19, Till date 5 PPS were done during CS	Clients needs to be counselled for PPS if they have completed their families and wish for terminal method then PPS during NVD can also be started	Service providers	
		Local Purchase of Cannula 20 G by patient from outside nearby Medical Store as being asked by hospital staff	Issue discussed with MOIC & OT Staff, as there is sufficient supply of the cannulas, still it was OOP burden on Clients, MOIC strictly instructed the staff that it should not be repeated otherwise serious actions shall be taken against the defaulters.	Staff need to ensure that there is no OOP expenditure for patients admitted for CS & for other procedures	Staff	
		Poor follow up clients post PPIUCD insertions	Only few follow ups being done, poor efforts of the providers and FWC on improvising the PPIUCD follow up observed, Staff explained the procedure of Follow up and explained how they can improve the FUs through respective ASHAs, Register components explained in details to all staff and FWCs	Regular follow up is required of PPIUCD cases, each cluster meeting needs to be attended by the FWC and trained provider and mobile ASHAs for improving the Follow up more over now clients incentive is also available which also needs to be improved	All providers & FWC	Immediate
		Poor counselling effort, as FWC is judgemental and not providing all the information to clients for FP method selection	Explained the counselling methodology and approach to FWC, Discussed in details the ways of effective counselling (General, Method specific, Follow up counselling), Explained MEC and re emphasised on the completeness and correctness of the Counselling registers, IEC provided at the facility on PPF	FWC need not to be judgemental and provide the Basket of choice to all ANC & PNC Clients and ensure that clients have chosen the method as per their wish		Immediate
		Non availability of Utility gloves for the preparation of 0.5% Chlorine solution, Poor knowledge on IP of LR support staff	Asked the store incharge to issue the Utility gloves, Demonstrated the preparation of 0.5% Chlorine solution to staff available in LR, Discussed the role of Ward aya in IP Practices.	Daily Chlorine solution is to be made adequately in Tub so that Trays are submerged after use and LR incharge needs to supervise daily and support the staff	LR incharge & LR Support staff	
		Curtains between Labor tables not available in LR	MOIC shared that order already placed, shall be displayed in 2 days	Curtains between the LR tables are required to ensure the privacy	LR incharge	10/6/2019
		No FP IEC in ANC room	Provided IEC on FP for the display in ANC ward	Need to display FP IEC in ANC as well as PNC rooms	BPM/LR incharge	10/7/2019
		NCD: CBAC not been started by ASHAs as facility received the CBAC forms on 01/10/19	Asked the BCMP to initiate the process of CBAC by the trained ASHAs	All Family folders & CBAC to be tracked and to be digitalized ASAP by the ANMs on Tablets after NCD App training at district	BCPM/MOIC	
		NCD: No NCD app training for ANMs so far	ANMs NCD App to be completed as soon as possible	All the CBAC forms needs to be digitalized	BCMP	
Poor coordination between the Sampoorna & NCD Clinic	MO & NCD Counsellor sensitized on NPCDCS component of NCD, Briefed the program about their role in screening of NCDs	MO NCD needs to co ordinate with the MO Sampoorna clinic and follow the cases for the referral to higher centre for confirmation of diagnosis.	MO Sampoorna & MO NCD			
10/3/2019	CHC Suroorpur	Non availability of Chhaaya tablets and Chhaaya register at the facility, District shared that register was issued but not being used so far by the facility	Issue discussed with MOIC Telephonically and he assured tomorrow onwards it will be used by the staff	Register should be initiated for record keeping and should be kept unlocked and should be updated as soon as staff dispense the Chhaaya	MOIC and related staff	Immediate
		Poor follow up of PPIUCD Clients and no incentives dispersal started for Beneficiaries on PPIUCD follow ups	Explained the process of Follow up, explained the content of the register for the recording and asked the 2nd MO to address all the ASHAs for the mobilization of clients for follow up at the facility as Beneficiary incentive also needs to be dispersed accordingly	Increase the follow up by mobilizing the ASHAs for PPIUCD Follow up	Staff nurses & BCMP	Immediate

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Poor IP Practices at the facility	Explained the IP practices to the staff and demonstrated the Bleaching solution preparation. Checked the condition of Boiler and asked the staff for the procurement of Utility gloves for the preparation of the bleaching solution.	Daily Bleaching solution to be prepared by the support staff and daily SN need to check the status of IP practices in LR.	LR Staff	Immediate
No Condom boxes installed at CHC Suroorpur	Discussed with 2nd MD regarding the installation of Condom boxes at strategic location.	Condom boxes needs to be installed in OPD area with in the reach of Clients not only at CHC but also at all other units (PHCs/SCs etc)	BPM/MOIC	Immediate

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		Poor knowledge of facility health staff on FP Programmes (FP Incentives/Schemes/MPV strategies/FPLMIS/FPIS)	Spot orientation on different FP programmes and schemes to all the staff of the facility along with Medical officer, versed them about the revised compensation on FP services and indemnity			Immediate
		No 7 trays at LR as per MNH Toolkit	Explained the content of all 7 trays with the LR staff and asked 2nd MO to get the logistics (SIMS Speculum/Sterile bowl/Ring forceps) tomorrow from the store		Pharmacist/BPM	10/5/2019
		Poor PPIUCD Acceptance in August 2019, only 11% (25 insertions/229 Normal deliveries)	Discussed with MOIC the poor PPIUCD Acceptance at the facility, asked incharge for tracking of the trained staff performance and also asked for timely dispersal of PPIUCD incentives to the providers	Regular tracking of PPIUCD insertions performance by the trained staff and handholding of the staff by the LMOs		
		Poor IEC on FP	IEC on PPIUCD insertion handed to the BPM & LR Staff for display	IEC on Family planning to be displayed in ANC /PNC / OPD area		
10/4/2019	CHC Bhawanpur	Poor record keeping of FP services at the facility	Explained the content of the registers and formats and asked the staff to check for the completeness and the correctness of the data filled.	Regular data to be reviewed by the data validation committee and to be minuted the proceedings	BPM & HEO	Immediate
		No condom pieces available in Condom box installed at the CHC	Discussed issue with MOIC for replenishment Condoms in the boxes	Regularly condoms to be replenished so that there is no shortage of supply for the condoms to clients	BPM	Immediate
		Less IEC on FP displayed	Discussed with MOIC for displaying the FP IEC at the CHC in OPD area so as to have more visibility of the program			
		Non availability of 7 trays in LR as per MNH Tool kit	Explained the content of all 7 trays with the LR staff and asked 2nd MO to get the logistics (SIMS Speculum/Sterile bowl/Ring forceps) tomorrow from the store		LR Staff/ BPM	Immediate
		Non indenting of FP commodities through FPLMIS by ASHAs	As district has received the ASHAs mapped list on FPLMIS Portal so in this context 126 ASHAs have been oriented and briefed about the indenting exercise for raising the demand using their mobile phones			
10/5/2019	DWH Meerut	Poor record keeping of FP services, incomplete sterilization case sheet booklet, inadequate entries on PPIUCD register, No follow up cases entry in PPIUCD follow up register at Labor room)	Discussed the issue with the LR incharge, explained the process of Follow up and asked all the staff of LR to document the follow ups post OPD clients		LR Staff/ HM	Immediate
		Poor dispersal of PPIUCD follow up incentives only 20% incentives being dispersed, Poor dispersal of Antara incentives also to beneficiaries only 1% payment is made against the total doses of Antara in FY 2019-20	Discussed with Hospital Manager, DWH about poor dispersal of incentives and asked for timely dispersal of the incentives to the beneficiaries as per the receiving of the required documents		LR Staff/ HM	Immediate
		Condom boxes not installed at DWH	Discussed with SIC and she ensured that by tomorrow condom boxes will be installed tomorrow		LR Staff/ HM	Immediate
		No client exit interview post sterilization cases by the beneficiaries taken at DWH	Client exit interview format shared with the Hospital Mgr and asked to make them available for beneficiaries		LR Staff/ HM	Immediate
		Poor reporting of Condom dispersal on HMIS	Discussed with Hospital Manager for the correction of the report and ensure that the quantity distributed should math as per HMIS		LR Staff/ HM	Immediate
		Less IEC on FP at DWH	Discussed with SIC/Hospital Manager for displaying the FP IEC at DH in OPD area so as to have more visibility of the program		LR Staff/ HM	Immediate
10/3/2019	CHC Kharkhuda	Not installed Condom Box	Discussed about this from MOIC. He told that the order of condom box has been ordered which will be completed soon.	The process of making a condom box should be expedited and by filling the condom in it, it should be applied to the sub center level as soon as possible.	MOIC	43744
		Record keeping, Availability, & Updation	Labor room incharge sister will have all the registers but those registers have not been filled properly or have been filled in a hurry due to which the correct column is not fill properly and the ones that have been filled have been made incorrect. In the Antara card, the client history columns are blanks.	Explained the mistakes in filling the register and show us how to fill it correctly. After giving service to the client in the Antara card, it should be filled immediately so that the correct information of his history is saved in the card.	Sister incharge	43744
		IEC Of Family Planning (wall painting, poster, sinege etc. FDS Calander				43745
			BPM and ARO have no information about this, while the CMO office has already e-mailed it.	Regular cheking is required for all the electric equipments for functionality, so poor IP practices observed in LR	MOIC, BPM, ARO	43744

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MPV Activity	When asked by the BCPM, She told that in Kharkhoda block, 20 Saas Bahu Sammelan are to be held, but not a single one is being held due to unavailability of Nayi Pahal Kit no Asha was distributed.	This should be taken cognizance immediately from the district level and start all Saas Bahu sammelan by the block and distribute it immediately after getting Nayi Pahal kit.	ACMO- FP,MOIC,BPMU	43746
FPLMIS and NOT availability of family planing Stock	Incharge pharmacist said that the family planning stock with him has run out in the store.The stock register is well maintained but not working on FPLMIS portal and there is a lot of difference in stock on the physical and portal.	CHC Kharkhoda urgently needs family planning Commodities.Handholding was done on the Chief Pharmacist at FPLMIS Portal and it was fixed on the physical and portal, it was corrected and further advised to work on the hotel itself.	District Chief Pharmacist,MOIC,CHC Pharmacist	43746
FPLMIS pendency/non issuing/non indenting/ideal frequency at DISTRICT CMSD STORE.	There are 94 Issue Pending and 3 acknowledge Pending Shows on the District Portal.Neither is being indented from the ideal frequency nor is it being done, which makes the entire system shaky.	District Chief Pharmacist and Computer Operator need to be activated immediately on the portal.Indent the division by ideal frequency from district CMSD Store /issuing commodities should register registered facility and update the portal regularly and correct physical and portal stock immediately.	ACMO-PP,district Chief Pharmacist,Computer opretor	43747
Curtains between Labor tables not available in LR	MOIC shared that order already placed , shall be displayed in 2 days	Curtains between the LR tables are required to ensure the privacy	LR Incharge	43744

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Other activities done in the district Pre CRM are as follows:

- Orientation of all mapped ASHAs on FPLMIS indenting through their mobile phones in all blocks of Meerut, around 1400 ASHAs have been oriented by 6 teams with the support of FP TSU, Jhpiego in the district
- All mapped ASHAs were oriented on FP Schemes, Basics of newer contraceptions, clear their doubts related to FP methods and their incentives for various FP programmes activities
- Total 76 Urban ANMs were oriented on FPLMIS indenting followed by exercise on raising demand for FP commodities through their mobile phones
- Capacity building orientation session was done for Pharmacist of 11 Planning units (Except Mawana block) on improvising the correctness for Physical vs FPLMIS portal of FP Commodities followed by spot correction of the mismatches found in the portal
- Jhpiego supported the facilities by providing the PFP IEC, Kellys forceps at some facilities and supported in improving the competency of trained providers on PPIUCD insertions.
- Total 11 BCPM were oriented on FPLMIS.



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