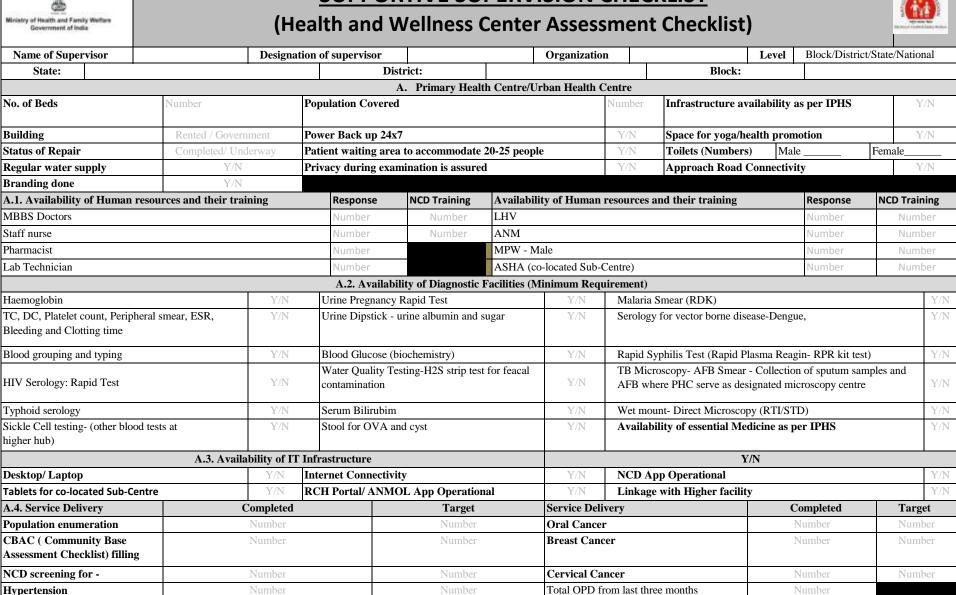


Hypertension

Number

Diabetes

## SUPPORTIVE SUPERVISION CHECKLIST



Average OPD per day

Number

Number

			Н	ealth ar	nd Wellness Center assess	sment Che	cklist					
					B. Sub	Health Co	entre					
No. of Beds (If delivery point)	Number Popu		Population Co	opulation Covered				Number	Infrastructure availability as per IPHS Y/N			
Building	Rented / Government Pow		Power Back u	ower Back up 24x7				Y/N	Any Space for yoga	Any Space for yoga/health promotion Y/N		
Status of Repair	Completed/ Underway Patie		Patient waitin	atient waiting area to accommodate 20-25 people				Y/N	Toilets (Numbers)	Male	Female_	
Regular water supply	I I		Privacy during examination is assured				Y/N	Residential Facility	ANM	MLHP	MLHP	
Branding done			Approach Ro	Approach Road Connectivity				Y/N				
B.1. Availability of Human resources and their training			Respo	Response Certificate Program in Community F			ty Healt	h	NCD training	IT application (NCD-CPHC)		2)
СНО			Number	-	Y/N				Y/N	Y/N		
ANM			Number	-					Y/N	Y/N		
MPW Male			Number	-					Y/N	Y/N		
ASHAs			Number	-					Y/N			
			B.2. Av	ailabili	ty of Diagnostic Facilities	s (Minimur	m Requ	irement)				
Haemoglobin				rine Pregnancy Rapid Test			Y/N	Urine D	pstick - urine albumin and sugar Y/N			
Blood Glucose (Glucometer)		Y/N	Side prepa	e preparation for Malaria Smear (RDK)			Y/N	RDK fo	r dengue Y/N			
Sickle Cell rapid test	kle Cell rapid test Y/N C				Collection of sputum samples				ility of essential Medicine + At least as per IPHS ypertensive+Antidiabetics+Anti-epileptic			
	B.3. Ava	ilabilty of I	T Infrastructu	re					<u> </u>	7/N		
							Y/N	NCD A	D App Operational Y/N			
Tablets	ets Y/N I		RCH Port	RCH Portal/ ANMOL App Operational			Y/N	Linkage with Higher facility Y/N				
Service Delivery		Completed		Target Sei		Servi	rvice Delivery			Completed	Tar	get
Population enumeration		Number		Number		Oral	Oral Cancer			Number	Nur	mber
CBAC filling		Number		Number			Breast Cancer			Number	Nur	mber
NCD screening for -			Number Total			d OPD from last three months			Number			
Hypertension		Number			Number Aver			ly OPD		Number		
Diabetes		Number			Number							
					Plan of Action							
		Identified	ntified Level of Intervention			Responsibility			Timeline			