

### **VISIT INSTRUCTIONS TO ASSESS FUNCTIONALITY OF PROGRAM AT COMMUNITY LEVEL**

The district level monitor (DLM) would visit at least **two Village Health and Nutrition Days (VHND) session, one Middle- school** and **at least five household** in the vicinity of the L1 delivery point **in a month**. The DLM would also interact with at least 1-2 ASHA and AWW each during the community visit. He/ She would accompany the ASHA for household visits in her catchment area. A minimum of 5 household to be visited, selection of house-hold to be prioritised as follows:

1. Household with a pregnant woman
2. Household of lactating mother with 0-6mths baby
3. Household with a child of 6mths- 2 years
4. Household with an Adolescent girl/ boy
5. Household where home delivery occurred in the last one year

Even if the nearest sub-center to the village visited is not a L1 deliver point, the DLM should meet the SHC to interact with the ANM.

During the school visit the DLM should interact with nodal WIFS teacher and children in at-least two eligible classrooms

In case of a VHND visit the take a stock of essential drugs, supplies, commodities and vaccines available at the site. Review the service delivery for ANC, PNC, Growth Monitoring and Immunization. Ask the community for health messages they received from ASHA/ANM

Supervisor need to fill code as 1, 2, 3 and 4 in box adjacent to questions (1: **Yes**, 2: **No**, 3: **Not applicable**, 4: **don't know**)

1. Questions during visit to Village Health & Nutrition day		
1.1	Whether ANM provides following services during a VHND?	
a	Routine Immunization	
b	Family planning services and counselling	
c	Ante-natal care	
d	Post-natal care	
e	Nutrition and Health promotion to children and Adolescents	
1.2	Is Growth monitoring done at Anganwadi center/ VHNDs?	
1.3	Is Routine Immunization (RI) micro-plan available at VHND session?	
1.4	Is Due list for Routine Immunization (RI) available with ASHA/ANM	
1.5	As per due list did 75% of the beneficiaries attend the VHND session?	

2. Questions for ANM		
2.1	Is Community distribution of Misoprostol for home deliveries done?	
2.2	Are high risk pregnancies line-listed at the health facility?	
2.3	Were maternal/child deaths reported from the area of the sub-center in last 1 year?	
2.4	If death reviewed, were corrective actions taken for the probable community causes?	
2.5	Number of SAM children identified in the community (Data can be collected from AWW/ANM)	
2.5.1	Whether SAM children are screened and referred to Nutritional Rehabilitation Centre (NRCs)?	
2.6	Has the ANM been trained on RKSK (including Peer educator component)?	
2.7	Have the ASHA been trained on RKSK (including Peer educator component)?	

3. Questions for ASHA		
3.1	Incentives to ASHA	
a	Was ASHA paid incentives for ANC services & accompanying mother for Institutional delivery?	
b	Was ASHA paid incentives for delaying and spacing of births?	
c	Was ASHA paid incentives for escorting clients for PPIUCD insertions?	
d	Was ASHA paid incentives for immunization below 1 year and 1 to 2 year?	
3.1.1	Is there any delay in last six months in payments to ASHA?	
3.2	Is the ASHA trained on module 6 & 7 for HBNC?	
3.2.1	If yes does she perform HH visits for HBNC?	
3.3	Number sick new-born or newborns with danger signs identified by ASHA	
3.3.1	Whether sick new-born or newborns with danger signs referred to Higher facilities?	
3.4	Whether follow-up visit to LBW Babies & SNCU discharged babies done by ASHA?	
3.5	Is ASHA aware about incentive given under RKSK	
3.6	Has ASHA referred any Adolescents to the nearest AFHC last month?	

3. Questions for ASHA				
3.7 Availability of essential commodities with ASHA				
a	Pregnancy testing kit		H	MBI kit to test iodine level in salt.
b	Mala N		I	MUAC tape
c	Centchroman		J	ORS and Zinc
d	ECP		K	HBNC Kit
e	Condoms		I	Sanitary napkins
f	<b>Availability of IFA with ASHA</b>			
i	6 month – 5yrs – IFA syrup (Bi-weekly)			
ii	Pregnant women and Lactating mothers – Red IFA Tab.			
g	<b>Availability of IFA at school/AWCs</b>			
i	5-10yrs – Tab. IFA (Pink colored sugar coated) WIFS Junior.			
ii	10-19yrs – Tab. IFA (Blue colored – Enteric coated)			

4. Questions for beneficiaries (Household visits)		
4.1	Household with Pregnant woman	
4.1.1	Was the woman registered in the first trimester?	
4.1.2	Did the PW receive all services under Antenatal care?	
4.1.3	Is the PW counseled for Post-partum FP choices including PPIUCD by ASHA/ANM during ANC?	
4.2	Household with Lactating mother	
4.2.1	Did she deliver at Public Health facility	
4.2.2	If yes; Did she receive entitlements under JSY and JSSK?	
4.2.3	(Free drugs/Free Diet/Free diagnostics/Free referral transport to mothers and sick new born)	

4.2.4	Ask about services at the delivery point she visited (based on recall)
a	Was the privacy during delivery maintained?
b	Was staff at the health facility well behaved during stay?
c	Was the new-born dried with clean and sterile sheets/towels just after delivery?
d	Was the new-born weighed at birth?
e	Was breast feeding initiated within one hour after delivery?
f	Was the new-born given zero dose immunization in the health facility within 24hrs of birth?
g	Has she exclusively breast-fed the infant for 6 months?
h	Was she advised about maternal & newborn danger signs before discharge from the facility?
i	Check the MCP card for completeness.
j	Was she satisfied with all the services provided during ANC, delivery and PNC? (if any grievance, please describe on last page )

4.3 Questions to mother with a child of 6m - 2 years			
4.3.1	Was ORS and Zinc was used when child had last diarrhea episode?	4.3.6	Was Family planning commodities (Condoms/OCP and ECP) provided by ASHA?
a	Is mother aware about ORS preparation and use?	4.3.7	Did any IEC/BCC/IPC activity initiate or enhance family's health seeking behavior? (if yes, any of the below?)
b	If yes did ASHA replenish ORS/Zinc during her visit?	a	IPC by ASHA/ANM or other health staff
4.3.2	Was Syp. IFA available at Household?	b	Hand out/Booklets
4.3.3	Did ASHA perform home visits during first six weeks of life?	c	Audio visual aids
4.3.4	Does mother practice Complementary feeding?	d	Hoardings/Wall paintings/Banner/Poster
4.3.5	Was Family planning counseling provided by ASHA?	e	Any other IEC/BCC activity

4.4 Questions to beneficiaries (Pregnant women & Mothers) pertaining to MCTFC			
4.4.1	Did you receive a call from Mother and Child Tracking Facilitation Centre, Govt of India, Delhi		4.4.6 Whether the information provided to you was helpful to you (Select Option from following)
4.4.2	Was the caller courteous to you during the call?	a	During your pregnancy
4.4.3	Whether the caller was clear in her communication with you	b	Taking care of your child
4.4.4	Are you satisfied by the resolution on your query provided by the caller?	c	Family planning
4.4.5	Whether a doctor spoke with you to resolve your query?	4.4.7	Have you received recorded voice messages over phone related to maternal health, Child care, immunization and family planning?

4.7 School visit- Questions to WIFS Nodal teacher		
4.7.1	Are IFA tabs under WIFS currently available?	
a	Stock-outs in last 6 months?	
4.7.2	Was deworming done in the last six month?	
4.7.3	Whether WIFS report submitted for last month?	
4.7.4	Whether screening of children under RBSK done?	
a	Are appropriate referrals of children done?	

Questions during school visit to eligible students in at least two classrooms		
4.7.5	Are they given IFA tab every week?	
4.7.6	Has RBSK screening done by health team in last one year?	

4.5 Questions to family with Adolescents	
4.5.1	Did the Adolescent in the family receive IFA supplementation?
4.5.2	Was the mother/adolescent girl counseled on Menstrual hygiene?
4.5.3	Has the adolescent ever visited AFHC?

4.6 Questions to Household with Home delivery	
4.6.1	Reason for Home delivery?
a	Traditional attitude
b	Accessibility issues
c	Economic reasons
d	Benefits of institutional delivery unknown
e	Any other causes
4.6.2	Who conducted Home delivery?
a	Skilled Birth Attendant (i.e. assisted by doctor/ nurse/ ANM)
b	Traditional Birth Attendant (TBA)
c	Family or Relatives
4.6.3	Is mother/child availing any post-natal services from a health facility?

Plan of Action				
Major findings from this visit	Intervention/ Activities identified	Level of intervention	Responsibility	Timeline

Type of Grievance (qualitatively describe the incident)	Level (ASHA/ANM/MO/Health facility)	Probable intervention/activities. Current status of the Grievance

Supervisor Signature \_\_\_\_\_