Visit to Public health institutions in Jalaun District:

in reference to letter no. SPMU/NRHM/M&E /2013-14/4/2959-2-dated 19/9/2013 visit of Distt. Jalaun was done under leadership of Dr Madan JD-Directorate Medical Health with following team members –

1. Arvind Upadhyaya-Technical Consultant Family Planning

2.Mohd.Firoz-PC

The Health Centres which were visted by team members are as follows-L1 SHC Niyamatpur,PHC Bawai ,CHC Kalpi, FRU DWH , and Immunization session Karmer and Eklaspura The main observation of these 02 days visit of above Public health institutions are as follows:

Date of visit: 26th Sept, 2013

Name of Health Facility: CHC Kalpi (L-2 Health facility).

General information: Medical Suptd.-Dr Mulayam Singh

General information: Located at a distance of 35 KM from District Headquarter. This CHC has catchment population of 50000. Two MBBS and one AYUSH doctor with three regular & two contractual SN/GNMs and two regular ANMs, are posted to run this center. Hand pump was available. Electricity with power back up, MO, SN quarterS available and SN stays in the quarter.

| Observation | Suggestion /Action Taken |
|---|---|
| Labor Room: One labor table without Macintosh and Kelly's was found. No mattress placed on labor tables. Elbow operated tap not available. | Two Kelly's pad should be supplied in LR. Mattress must also placed on both Labor Tables. |
| Newborn Care Corner: Baby weighing tray, Ambu bag and mask and Mucus Extractor available but area was not demarcated for New Born Care Corner written on the wall. | Radiant heat warmer to be placed in NBCC and area to be demarcated . |
| BMW Management & adherence to Standard Treatment protocols: No Segregation of waste was not done. Staff has not been oriented on BMW management. | Puncture proof container should be placed in immunization room. Colour coded bins should be placed both in labor room and immunization room and each bin should be labeled as per protocol for the ease of all staff and attendant. |
| Status of Training: | Every staff posted in labor room must be given training on SBA and NSSK. |

BMW Management & adherence to Standard Treatment protocols: No Segregation of waste is being done. Staff has not been oriented on BMW management. No Puncture proof container placed in immunization room. Hub cutter was found functional.

Puncture proof container should be placed in immunization room. Colour coded bins should be placed both in labour room and immunization room and each bin should be labelled as per protocol for the ease of all staff and attendant.

| Observation – | Suggestion / Action Taken |
|---|--|
| Quality parameters: Bed Head Ticket was not present. Foot print of the new born was not been taken. IEC: CHC's Landmark placed near approaching roads, No SBA protocol posters displayed, JSY wall writing done. JSSK entitlements displayed but not in detail. IEC pertaining to colostrums feeding, exclusive breast feeding was not displayed at the entrance of labor room and in PNC wards. EDL was not displayed in Hospital Entrance. | Instructed MOIC to get basic requirement for patients. Print foot of new born on the case sheet of mother. IEC should preferably be done by placing flex boards and wall writing. Instructed to paint the EDL list. |
| Distribution of Responsibilities to available Man Power Available manpower as other MBBS and AYUSH doctors were not doing their responsibilities as they were unknown about block profile and data. Complaint and suggestion box was not available. | Other MBBS and AYUSH doctors should be oriented about their job description & responsibilities by MOIC & other higher officials. Instructed MOIC / ANM to make arrangement of suggestion/ complaint box at center. |

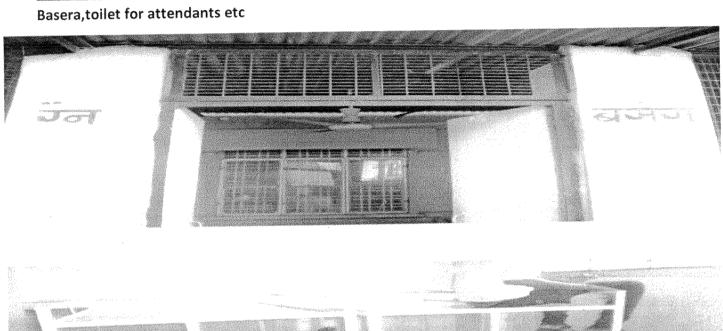
Day Second -27/09/20013

Place of Visit- FRU DWH- Jalaun.

OT and Labor Room was satisfactory. Cesarean section were being done by surgeon. There were 02 OBG,01 Anaesthetist,01 Peadiatrician,04 MOs,10 SN,02 ANM who were recently posted. Hospital was clean but colour coded bins were not present. Bio Medical waste was disposed in dumping chamber but procedure for hiring Private Agency is in progress. Laundry and food for the patients were being managed by out sourcing.

| | Instruction was given to CMS to make arrangement of Citizen Charter |
|---|--|
| IEC: No CHC's Landmark placed near approaching roads, No SBA protocol posters displayed, JSY. JSSK entitlements displayed but not in detail. | IEC should preferably be done by placing flex boards and wall writing. |

<u>Good things seen at DWH FRU</u>-MOIC used NRHM grant for sake of patients viz.Rain Basera, toilet for attendants etc



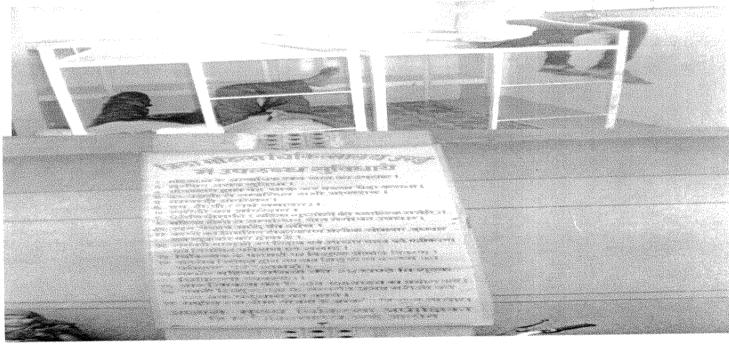


Figure –Displayed Facilities providing for patients available in FRU



Figure –New Born Care Corner available in FRU- DWH

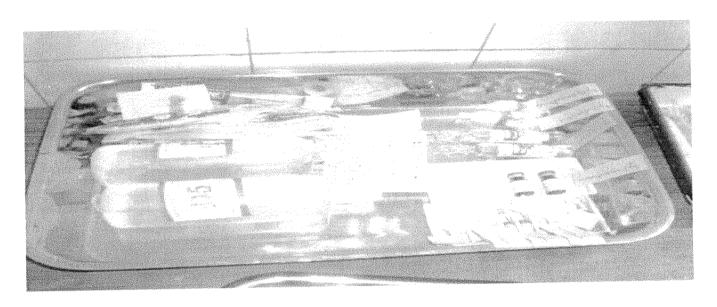


Figure - Staff Nurse of Labor Room was active. She was maintaining Emergency Drug Tray was well mannered.

Date of visit: 27th Sept, 2013

Name of Health Facility: Sub Centre Niyamatpur (L-1 Health facility).

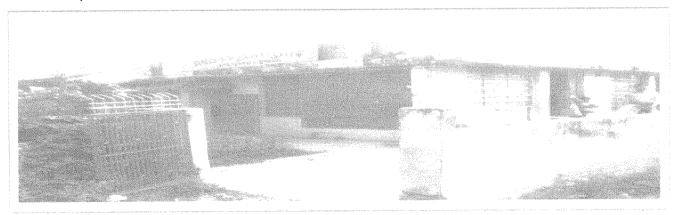
General information: Located at a distance of 30 KM from District Headquarter. This SC has catchment population of 4000.One ANM was posted to run this center. Hand pump was available. Electricity with power back up, ANM quarter available and she stays in the quarter.

| Labour Room: 10*10 space available with one Labour table, No macintosh and Kelly's pad placed on labour table. no tiling on floor, tiling on wall upto 5 feet, no mesh in window. | Sub Center's AMG should be utilized to prioritize following civil work in phase manner: Tiling should be done on the floor using AMG. Tiling on wall should be done up to 6 feet, Mesh should be placed in the Window. One overhead tank should be placed over the roof of sub center to ensure running water supply and Elbow operated tap should also be installed in labour room. Procurement of Macintosh sheet and Kelly's pad needs to be done using U/F. |
|---|---|
| It was very strange that inspite of MCH Level 1 centre there was nothing for ANC except BP Instrument & Stethoscope. | Instructed MOIC / ANM to procure all required Equipments like weighing scale, haemoglobino meter ,albumin sugar kit, inch tape, height scale etc. at center from u/f of SC. |
| Newborn Care Corner: Nonew born care corner was not present. | Newborn Care Corner should be placed in delivery centres. |
| BMW Management: No Puncture proof container placed in immunization room. Hub cutter was found functional. Plastic bags are being used in place of Colour coded bins. | Puncture proof container should be placed in Labour Room. Colour coded bins should be placed in SHC. |
| Status of Training: ANMs has not received training in SBA . | ANMs should receive training in SBA & NSSK urgently. |

Good things seen at L-1 centre-

- ✓ Situated near main road side It was running in govt building including of all basic infrastructure
- ✓ It was good to see that ANM was residing at Head Quarter.

Some photos of Sub Centre-



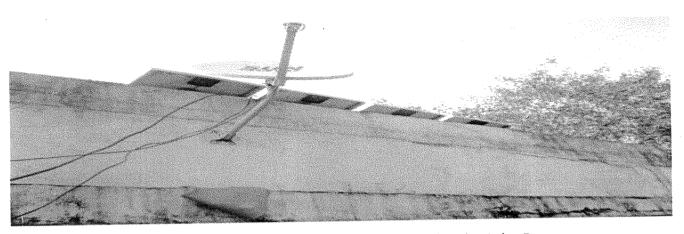
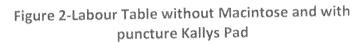


Figure 1- Sub Centre Building with Electric Backup by Solar Energy





Name of Health Facility: Block PHC Bawai

General information: Located at a distance of 26 KM from the district headquarter, This PHC has catchment population of 1.32 lakh . having 28 SHCs with 103 revenue villages.

(L-2 Health facility).



One MO-II, one AYUSH MOs, one Staff Nurses and one

LT are posted at this PHC.. Staff and MO quarter available.

. Electricity with power back up and running water facility available in the health facility. It was seen that MOIC of this PHC was a good leader of team with lot of energy and quality of sharing responsibility with

their staffs. He used the NRHM budget in a very good manner. But still there was a need of improvement in that PHC.

| Observation | Suggestion / Action Taken |
|---|---|
| Labor Room: One labor table with Macintosh | Two Kelly's pad should be supplied in LR. |
| sheet available, Only one Kelly's pad placed on | Mattress must also placed on both Labor |

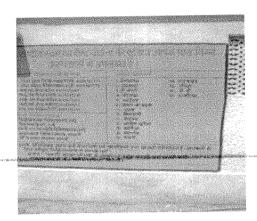
| the labor table was found ruptured No mattress placed on labor tables. Elbow | Tables. |
|--|---|
| operated tap not available. | |
| Newborn Care Corner: Baby weighing tray, | Radiant heat warmer to be placed in NBCC |
| Ambu bag and mask and Mucus Extractor | and should be demarcated . |
| available but area was not demarcated for | |
| New Born Care Corner written on the wall. | |
| BMW Management & adherence to Standard | Puncture proof container should be placed in |
| Treatment protocols: No Segregation of waste | immunization room. Colour coded bins should |
| is being done. Staff has not been oriented on | be placed both in labor room and |
| BMW management. No Puncture proof | immunization room and each bin should be |
| container placed in immunization room. Hub | labeled as per protocol for the ease of all staff |
| cutter was found functional. | and attendant. |
| Status of Training: One Staff Nurse was | Every staff posted in labor room must be given |
| trained in SBA and NSSK | training on SBA and NSSK. |
| Quality parameters: All Pathological services | Instructed MOIC to get those facility done in |
| are not available. In lab there were no lab | 02 or 03 days because those facilities were |
| services of Urine Albumin Sugar, Serum | basic requirement for patients. |
| Bilirubin test, blood sugar, RRP, HIV. | |
| Partograph is not being plotted. | |
| IEC: PHC's Landmark placed near approaching | IEC should preferably be done by placing flex |
| roads, No SBA protocol posters displayed,. | boards and wall writing. |
| JSSK entitlements displayed but not in detail. | |
| Complaint and suggestion box was not | Instructed MOIC / ANM to make arrangement |
| available. | of suggestion/ complaint box at center. |

Good things seen at PHC-

Signage and Wall writing of programs was seen at PHC

R.I Session-Karmer (Karmer AWW) Dist- Jalaun





- ✓ RI Session was being held at KARMER Aganbadi Center.
- ✓ ANM Mrs. Sukhdevi was administering vaccines at session site.
- ✓ Ms Chandrawas and Rampyari AWW was assisting the ANM.
- ✓ Beneficiaries were called by ASHA-Ms. Malti.
- ✓ Vit –A, ORS packet, AD Syrenge (0.1and 0.5 ml), Hub Cutter, MCP Card ,Red and Black Poly Bags for waste needle and syringe, Plastic Spoons for Vit.A, weighing and BP machine, Paracetamol ,IFA etc were present at session site.
- ✓ Counter file of immunization card was not maintained properly.

Figure - VHSC / Immunization Session Site





Visit to Chief Medical Officer Office-

Mr. Dhruv Chandra Gupta –CMO Jalaun.

Main points discussed were:

- \checkmark To improve social marketing of contraceptives by ASHAs to improve family planning programme.
- ✓ Increase IEC and Standard Treatment Protocols.
- ✓ Sensitization about PCPNDT and mapping of Ultra Sonographic Centres
- ✓ All the supervisory visits to be followed up action taken reports.
- ✓ Suggestion /Complain Box in all the facilities
- √ High failure rate of ligation cases.
- ✓ Mapping of USG Centers.
- ✓ Supply of contraceptive to be picked up from Nadir Gang Store.
- ✓ Reporting of social marketing to be improved
- ✓ Regular RKS meetings.
- \checkmark All the ANMs to be instructed to update the target couple register (ECR) for implementation of family planning programme.

Prepared By:-

Dr. Madan Kumar

Joint Director

Programe Cordinator

Technical Consultant-FP



PHC/CHC (NON FRU) level Monitoring Checklist

| Name of District: <u>Jalaua</u> Catchment Population: | Name of Block: Mokewo | Name of PHC/CHC: <u>Kalbr</u> |
|--|---|---------------------------------|
| 14346 | Total Villages: 12.72 | Distance from Dist HQ: <u> </u> |
| Date of last supervisory visit: | 6 month (MRIM Troom) | |
| Date of visit: 24 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + | Name& designation of monitor: Description of monitor: Description of wisit and reason for | C Rome Here J.D. F.P. |

Section I: Physical Infrastructure:

| S.No | Infrastructure | Yes | No | Additional Remarks |
|------|--|-----|----|--|
| 1.1 | Health facility easily accessible from nearest road head | Y | N | 100 |
| 1.2 | Functioning in Govt building | Y | N | THE STATE OF THE S |
| 1.3 | Building in good condition | Y | N | The second secon |
| 1.4 | Habitable Staff Quarters for MOs | Y | N | * . |
| 1.5 | Habitable Staff Quarters for SNs | Y | N | **Addingsomerous |
| 1.6 | Habitable Staff Quarters for other categories | Y | N | Annual An |
| 1.7 | Electricity with functional power back up | Y | N | entition and |
| 1.9 | Running 24*7 water supply | Y | N | (Management of Management of M |
| 1.10 | Clean Toilets separate for Male/Female | Y | N | and any one |
| 1.11 | Functional and clean labour Room | Y | N | |
| 1.12 | Functional and clean toilet attached to labour room | Y | N | |
| 1.13 | Functional New born care corner(functional radiant warmer with neo-natal ambu bag) | Y | N | |
| 1.14 | Functional Newborn Stabilization Unit | Y | N | |
| 1.15 | Clean wards | Y | N | To recognize the second |
| 1.16 | Separate Male and Female wards (at least by Partitions) | Y | N | |
| 1.17 | Availability of complaint/suggestion box | Y | N | 1960 |
| 1.18 | Availability of mechanisms for waste management | Y | N | gire |

Section II: Human resource:

| S. no | Category | Numbers | Remarks if any |
|-------|------------|---------|----------------|
| 2.1 | MO | 2 | 1 Aquili |
| 2.2 | SNs/ GNMs | (| 3+2 |
| 2.3 | ANM | 2 | |
| 2.4 | LTs | | 1 Contectual |
| 2.5 | Pharmacist | L.A | 3+1(00,100,00) |



| NAME OF TAXABLE PARTY OF TAXABLE PARTY. | |
|---|--|
| | ALCONOMINATION OF THE PROPERTY |
| NAME AND ADDRESS OF THE OWNER, WHEN PERSON ADDRESS OF THE OWNER, WHEN PERSON AND ADDRESS OF THE OWNER, WHEN | |
| | way of boy & Succepture |
| ~ | |

Section III: Training Status of HR

| S. no | Training | No. trained | Remarks if any |
|-------|-----------------------------|--|----------------|
| 3.1 | Вемос | | |
| 3.2 | SBA | N/A | |
| 3.3 | MTP/MVA | The contract of the contract o | |
| 3.4 | NSV | 14.4 | |
| 3.5 | IMNCI | | |
| 3.6 | F- IMNCI | Alternative services and the services are the services and the services are the services and the services and the services are the services are the services and the services are the services and the services are the services ar | |
| 3.7 | NSSK | | |
| 3.8 | Mini Lap | -0-004 | |
| 3.9 | IUD | 2- | |
| 3.10 | RTI/STI | Approximation of the second | |
| 3.11 | Immunization and cold chain | | |
| 3.12 | Others | Potter and a | |

Section IV: Equipment

| S. No | Equipment | Yes | No | Remarks |
|-------|---|-----|----|---------------|
| 4.1 | Functional BP Instrument and Stethoscope | Y | N | |
| 4.2 | Sterilised delivery sets | Y | N | |
| 4.3 | Functional neonatal, Paediatric and Adult Resuscitation kit | Y / | N | |
| 4.4 | Functional Weighing Machine (Adult and infant/newborn) | Y | N | |
| 4.5 | Functional Needle Cutter | Y | N | |
| 4.6 | Functional Radiant Warmer | Y < | N | |
| 4.7 | Functional Suction apparatus | Y 🗸 | N | |
| 4.8 | Functional Facility for Oxygen Administration | Y | N | |
| 4.9 | Functional Autoclave | Y | N | |
| 4.10 | Functional ILR | Y | N | |
| 4.11 | Functional Deep Freezer | | | |
| 4.12 | Emergency Tray with emergency injections | Y | N | |
| 4.13 | MVA/ EVA Equipment | Y | N | generalists . |
| | Laboratory Equipment | Yes | No | Remarks |
| 4.14 | Functional Microscope | Y | N | |
| 4.15 | Functional Hemoglobinometer | Y 🗸 | N | |
| 4.16 | Functional Centrifuge, | Y | N | |



| 4.17 | Functional Semi autoanalyzer | Y ./ | N & | NOWOK. | |
|------|------------------------------|------|-----|--------|--|
| 4.18 | Reagents and Testing Kits | Y | N | | |

Section V: Essential Drugs and Supplies

| S.No | Drugs | Yes | No | Remarks |
|------|-------------------------------------|----------------|--|--|
| 5.1 | EDL available and displayed | Y | N | |
| 5.2 | Computerised inventory management | Y | N | |
| 5.3 | IFA tablets | Y | N | |
| 5.4 | IFA tablets (blue) | Y | N | wave d |
| 5.5 | IFA syrup with dispenser | Y | N. | |
| 5.6 | Vit A syrup | Y | N | |
| 5.7 | ORS packets | YV | N | |
| 5.8 | Zinc tablets | Y | N | |
| 5.9 | Inj Magnesium Sulphate | Y | NV | - |
| 5.10 | Inj Oxytocin | Y | N | |
| 5.11 | Misoprostol tablets | Y | N | of the state of th |
| 5.12 | Mifepristone tablets | Y | N V | _ |
| 5.13 | Antibiotics | Y | N | |
| 5.14 | Labelled emergency tray | Y | N | |
| 5.15 | Drugs for hypertension, Diabetes, | Y | N | |
| | common ailments e.g PCM, anti- | | one of the latest and | |
| | allergic drugs etc. | | | |
| 5.16 | Vaccine Stock available | Y | N | |
| | | ~ | | |
| S.No | Supplies | Yes | No | Remarks |
| 5.17 | Pregnancy testing kits | Y _/ | N | |
| 5.18 | Urine albumin and sugar testing kit | $Y \checkmark$ | Ν | |
| 5.19 | OCPs | $Y \checkmark$ | N | upadifir |
| 5.20 | EC pills | Y | N 🎺 | |
| 5.21 | IUCDs | Y 🗸 | N | |
| 5.22 | Sanitary napkins | $Y \lor $ | Ν | |
| S.No | Essential Consumables | Yes | No | Remarks |
| 5.23 | Gloves, Mckintosh, Pads, bandages, | Y | N | |
| | and gauze etc. | | | |

Note: For all drugs and consumables, availability of at least 2 month stock to be observed and noted

Section VI: Other Services:

| S.no | Lab tests being conducted for | Yes | No | Remarks |
|------|-------------------------------|-----|----|--|
| 6.1 | Haemoglobin | Y | N | |
| 6.2 | CBC | Y | N | Technology of the Control of the Con |
| 6.3 | Urine albumin and Sugar | Y | N | The state of the s |
| 6.4 | Serum Bilirubin test | YVS | N | - Port |
| 6.5 | Blood Sugar | Y | N | Strip not provided in the |

1.00 760



| 6.6 | RPR (Rapid Plasma Reagin) test | Y | N | BDPOVERIE |
|------|--------------------------------|-------|-----|--------------------------|
| 6.7 | Malaria (PS or RDT) | Y ~~~ | N | |
| 6.8 | T.B (Sputum for AFB) | Y | N | |
| 6.9 | HIV (RDT) | Y | N V | |
| 6.10 | Others | Y | N | Hepolitis B. Ripergyriti |

Section VII: Service Delivery in last two quarters:

| S.No | Service Utilization Parameter | Q1 | Q2 | Remarks |
|------|---|---------------|-----------|--|
| 7.1 | OPD | 12/13/4 | 22017 | |
| 7.2 | IPD SS | 973 | 1234 | The state of the s |
| 7.3 | Expected number of pregnancies | 348 | 394 | |
| 7.4 | Percentage of women registered in the first trimester | 21.14] | 233% | |
| 7.5 | Percentage of women registered in the first trimester | 214% | 23:37. | |
| 7.6 | Percentage of ANC3 out of total registered | 27.14 | 23.3 | |
| 7.7 | Percentage of ANC4 out of total registered | 21.14) | 23.37 | |
| 7.8 | Total deliveries conducted | 240 | 328' | |
| 7.9 | Number of obstetric complications managed, pls specify type | 2) KE | HIC | |
| 7.10 | No. of neonates initiated breast feeding within one hour | 232 | 352 | |
| 7.11 | Number of children screened for Defects at birth under RBSK | ports. | | , |
| 7.12 | RTI/STI Treated | - | ,,,,,max | |
| 7.13 | No of admissions in NBSUs, if available | | | |
| 7.14 | No. of sick children referred | · September | - Angelow | |
| 7.15 | No. of pregnant women referred | (0 | n | |
| 7.16 | No. of IUCD Insertions | 110 | 137 | |
| 7.17 | No. of Tubectomy | George | | |
| 7.18 | No. of Vasectomy | مستبدين | _ | |
| 7.19 | No. of Minilap | -459444497 | | ************************************** |
| 7.20 | No. of children fully immunized | 19 | 45 | |
| 7.21 | Measles coverage | 383 | 423 | |
| 7.22 | No. of children given ORS + Zinc | 20 | -second# | Zinc Tablet Not Availably |
| 7.23 | No. of children given Vitamin A | 303 | 423 | |
| 7.24 | No. of women who accepted post partum FP services | 4 | | |
| 7.25 | No. of MTPs conducted | oL | | |
| 7.26 | Maternal deaths, if any | | | |
| 7.27 | Still births, if any | 10 | 9 | The second secon |
| 7.28 | Neonatal deaths, if any | Secure | | |



| 4.17 | Functional Semi autoanalyzer | Y | N A | Nowak. | TTEN SECTION |
|------|------------------------------|---|-----|--------|----------------------------|
| 4.18 | Reagents and Testing Kits | Y | N . | | Section of the Contraction |

Section V: Essential Drugs and Supplies

| S.No | Drugs | Yes | No | Remarks |
|------|---|----------------|----|--|
| 5.1 | EDL available and displayed | Y | N | 0.000 |
| 5.2 | Computerised inventory management | Y | N | on and the state of the state o |
| 5.3 | IFA tablets | Y | N. | one of the state o |
| 5.4 | IFA tablets (blue) | Y | N | |
| 5.5 | IFA syrup with dispenser | Y | N | average of the state of the sta |
| 5.6 | Vit A syrup | Y < | N | |
| 5.7 | ORS packets | YV | N | |
| 5.8 | Zinc tablets | Y | N | |
| 5.9 | Inj Magnesium Sulphate | Y | NV | |
| 5.10 | Inj Oxytocin | Y | N | |
| 5.11 | Misoprostol tablets | Y | N | |
| 5.12 | · Mifepristone tablets | Y | N | eser I |
| 5.13 | Antibiotics | Y | N | |
| 5.14 | Labelled emergency tray | Y | N | |
| 5.15 | Drugs for hypertension, Diabetes, | Y | N | |
| | common ailments e.g PCM, anti- | | | |
| | allergic drugs etc. | | | |
| 5.16 | Vaccine Stock available | Y | N | |
| | | V | | |
| S.No | Supplies | Yes | No | Remarks |
| 5.17 | Pregnancy testing kits | $Y \checkmark$ | N | |
| 5.18 | Urine albumin and sugar testing kit | $Y \checkmark$ | N | |
| 5.19 | OCPs | Y < | N | 499/2009 |
| 5.20 | EC pills | Y | NV | |
| 5.21 | IUCDs | Y | N | |
| 5.22 | Sanitary napkins | $Y \vee $ | N | |
| S.No | Essential Consumables | Yes | No | Remarks |
| 5.23 | Gloves, Mckintosh, Pads, bandages, and gauze etc. | Y | N | |
| | | | | |

Note: For all drugs and consumables, availability of at least 2 month stock to be observed and noted

Section VI: Other Services:

| S.no | Lab tests being conducted for | Yes | No | Remarks |
|------|-------------------------------|-----|----|---------------------------|
| 6.1 | Haemoglobin | Y | N | |
| 6.2 | CBC | Y | N | |
| 6.3 | Urine albumin and Sugar | Y | N | |
| 6.4 | Serum Bilirubin test | YV® | N | |
| 6.5 | Blood Sugar | Y 🗸 | N | Strip not provided in the |

1200 1600



7.29 Infant deaths, if any

Section VII a: Service delivery in post natal wards:

| S.No | Parameters | Yes | No | Remarks |
|------|--|----------|-------------|---------|
| 7.1a | All mothers initiated breast feeding within one hr of normal delivery | Y | N | |
| 7.2a | Zero dose BCG, Hepatitis B and OPV given | Y | N | |
| 7.3a | Counseling on IYCF done | Y | N | |
| 7.4a | Counseling on Family Planning done | Y | N | |
| 7.5a | Mothers asked to stay for 48 hrs | Y | N | |
| 7.6a | JSY payment being given before discharge | Y | N | |
| 7.7a | Mode of JSY payment (Cash/ bearer cheque/Account payee cheque/Account Transfer) | Bea | rer Chaput. | |
| 7.8a | Any expenditure incurred by Mothers on travel, drugs or diagnostics(Please give details) | X | N | |
| 7.9a | Diet being provided free of charge | Y | N | |

Section VIII: Quality parameter of the facility

Through probing questions and demonstrations assess does the staff nurses and ANMs know how to...

| S.No | Essential knowledge/Skill Set Knowledge | | ge Skills | | Remarks | |
|------|---|----|-----------|----|---------|--|
| 8.1 | Manage high risk pregnancy | Y | N | Y | N | Gynaraol |
| 8.2 | Provide essential newborn care(thermoregulation, breastfeeding and asepsis) | Y | N | Y | 2 | |
| 8.3 | Manage sick neonates and infants | Y | N | Y | N | |
| 8.4 | Correctly uses partograph | Y | N | Y | N | |
| 8.5 | Correctly insert IUCD | YV | N | Y~ | 'N | |
| 8.6 | Correctly administer vaccines | y | N | y | N | |
| 8.7 | Alternate Vaccine Delivery (AVD) system functional | X | N | Y | N | |
| 8.7 | Segregate waste in colour coded bins | Y | N | Y | N | The state of the s |
| 8.8 | Adherence to IMEP protocols | Υ | N | Y | N | |



Section IX. Record Maintenance:

| S. no | Record | Available, Updated and correctly filled | Available but Not maintain ed | Not Avai lable | Remarks/Timeline for completion |
|-------|---|---|--|----------------------|--|
| 9.1 | OPD Register | V | | | |
| 9.2 | IPD Register | / | | | |
| 9.3 | ANC Register | / | Purchased Available Control of the C | | and definition of the state of |
| 9.4 | PNC Register | ~ | | | C . |
| 9.5 | Indoor bed head ticket | ~ | | | |
| 9.6 | Line listing of severely anaemic pregnant women | ~ | | | |
| 9.7 | Labour room register | V | | | |
| 9.8 | Partographs | / | | | The state of the s |
| 9.9 | OT Register | | | - | |
| 9.10 | FP Register | | | | - |
| 9.11 | Immunisation Register | ~ | | , | |
| 9.12 | Updated Microplan | | | | |
| 9.13 | Drug Stock Register | 7 | | | |
| 9.14 | Referral Registers (In and Out) | | V | | |
| 9.15 | Payments under JSY | V | | | • |
| 9.16 | Untied funds expenditure (Check % expenditure) | Vo%. | \$e | | The state of the s |
| 9.17 | AMG expenditure (Check % expenditure) | 0% | | | |
| 9.18 | RKS expenditure (Check % expenditure) | 0%, | | | |

Section X: Referral linkages in last two quarters: April 2013 to Supplies

| S. no | JSSK | Mode of Transport (Specify Govt./ pvt) | No. of women transpor ted during ANC/INC /PNC | No. of sick infants transpor ted | No. of children 1-6 years | Free/Paid |
|-------|------------------------------|---|---|--|--|-----------|
| 10.1 | Home to facility | 108A-b- | 180 | | Specific Control of the Control of t | bel |
| 10.2 | Inter facility | \ | -elistenn | | *** | ** |
| 10.3 | Facility to Home (drop back) | ARMM Arb. | 489 | | Activities, | *, |



Section XI: IEC Display:

| S.No | Material | Yes | No | Remarks |
|-------|---------------------------------------|-----|----|--|
| 4-5-4 | Approach roads have directions to the | Y | N | |
| 11.1 | health facility | | | |
| 11.2 | Citizen Charter | Y | N | |
| 11.3 | Timings of the Health Facility | Y | N | 8 Am to 2 PM |
| 11.4 | List of services available | Y | N | |
| 11.5 | Essential Drug List | Y | N | |
| 11.6 | Protocol Posters | Y | N | |
| 11.7 | JSSK entitlements | Y | N | |
| 11.8 | Immunization Schedule | Y | N | and the same of th |
| 11.9 | JSY entitlements | Y | N | |
| 11.10 | Other related IEC material | Y | N | non name |

Section XII: Additional/Support Services:

| Sl. no | Services | Yes | No | Remarks |
|--------|--|-----|----|--|
| 12.1 | Regular sterilisation of Labour room (Check Records) | YV | N | |
| 12.2 | Functional laundry/washing services | Y | N | |
| 12.3 | Availability of dietary services | Y | N | |
| 12.4 | Appropriate drug storage facilities | Y | N | |
| 12.5 | Equipment maintenance and repair mechanism | Y | N | |
| 12.6 | Grievance redressal mechanisms | Y | N | and the second s |
| 12.7 | Tally software implemented | Y | N | 14-20mg country of |

Section XIII: Previous supervisory visits:

| S. no | Name and Designation of the supervisor | Place of posting of Supervisor | Date of visit |
|-------|--|-----------------------------------|--|
| 13.1 | | | |
| 13.2 | | | |
| 13.3 | | | |
| 13.4 | | | |
| 13.5 | | | The state of the s |

Note: Ensure that necessary corrective measures are highlighted and if possible, action taken on the spot. The Monthly report of monitoring visits and action points must be submitted to the appropriate authority for uploading on State MoHFW website

To be filled by monitor(s) at the end of activity

| | Key Findings | Actions Taken/Proposed | Person(s) | Timeline |
|---------------|--------------|------------------------|-------------|----------|
| - | | | Responsible | |
| - | | | | |
| and a company | | | | |
| L | | | | |



| DH | 1000 | j. | 100 | 11111 | evipa | Chec | klist |
|----|------|----|-----|-------|-------|------|-------|
| | | | | | | | |

| Name of District: <u>Jajava</u> | Name of Block: | Name of DH: District wongen Hope |
|---|--|----------------------------------|
| Catchment Population: 5 CICK | Total Villages: | |
| Date of last supervisory visit: 10 ' ' | Name of the second seco | |
| Date of visit: 87 9 13 | Name& designation of monitor: | AB. Pagendra Sing & Penifor |
| Names of staff not available on the day | y of visit and reason for absence: | |

Section I: Physical Infrastructure:

| S.No | Infrastructure | Yes | No | Additional Remarks |
|------|--|-----|----|--|
| 1.1 | Health facility easily accessible from nearest road head | Y | N | |
| 1.2 | Functioning in Govt building | Y | N | |
| 1.3 | Building in good condition | Y | N | |
| 1.4 | Habitable Staff Quarters for MOs | Y | N | |
| 1.5 | Habitable Staff Quarters for SNs | Y | N | |
| 1.6 | Habitable Staff Quarters for other categories | Y | N | To the state of th |
| 1.7 | Electricity with power back up | Y | N | |
| 1.9 | Running 24*7 water supply | Y | N | |
| 1.10 | Clean Toilcts separate for Male/Female | Y | N | |
| 1.11 | Functional and clean labour Room | Y | N | |
| 1.12 | Functional and clean toilet attached to labour room | Y | N | , . |
| 3 | Functional New born care corner(functional radiant warmer with neo-natal ambu bag) | Y | N | |
| 1.14 | Functional Newborn Stabilization Unit | Y | N | |
| 1.16 | Functional SNCU | Y | N | |
| 1.17 | Clean wards | Y | N | |
| 1.18 | Separate Male and Female wards (at least by partitions) | Y | N | |
| 1.19 | Availability of Nutritional Rehabilitation Centre | Y | N_ | |
| 1.20 | Functional BB/BSU, specify | Y | N | The second secon |
| 1.21 | Separate room for ARSH clinic | Y | N | |
| 1.22 | Availability of complaint/suggestion box | Y | N | |
| 1.23 | Availability of mechanisms for | Y | N | |



| 1.24 | Biomedical waste management (BMW)at facility BMW outsourced | Y | N %. | |
|------|---|---|------|--|
| 1 | | | | Annual State of Contract and State of Contract and Contra |
| 1.25 | Availability of ICTC/ PPTCT | Y | N | |
| 1 | Centre | | | |
| 1.26 | Availability of functional Help | Y | N | CONTRACTOR OF THE PROPERTY OF |
| 1000 | Desk | | | |

Section II: Human resource:

| **** | on II: Human resource: | Numbers | Remarks if any |
|-------|------------------------|-----------------|--|
| S. no | Category | | |
| 2.1 | OBG | 200 | AND THE CONTRACT OF THE CONTRA |
| 2.2 | Anaesthetist | | |
| 2.3 | Paediatrician | | |
| 2.4 | General Surgeon | Windows | |
| 2.5 | Other Specialists | All Delications | - APA |
| 2.6 | MOs | l. A | 2,42 |
| 2.7 | SNs | | |
| 2.8 | ANMs | - Janear | A Hach. |
| 2.9 | LTs | | |
| 2.10 | Pharmacist | <u> </u> | 244141 |
| 2.11 | LHV | | |
| 2.12 | Radiographer | discourse, | |
| 2.13 | RMNCHA+ counsellors | | |
| 2.14 | Others | | |

Section III: Training Status of HR:

| S. no | Training | No. trained | Remarks if any |
|-------|-----------------------------|--|--|
| 3.1 | EmOC | : MMSONNet ex. | |
| 3.2 | LSAS | | |
| 3.3 | BeMOC | #20mlonlympinis sh | |
| 3.4 | SBA | | |
| 3.5 | MTP/MVA | | |
| 3.6 | NSV | Wildelighton. | |
| 3.7 | F-IMNCI | | |
| 3.8 | NSSK | 1, market | Application of the Control of the Co |
| 3.9 | Mini Lap-Sterilisations | | - Landing verwised |
| 3.10 | Laproscopy-Sterilisations | No. of the last of | Refrestor trains required |
| 3.11 | IUCD | Barrenser | |
| 3.12 | PPIUCD | Application of the second | |
| 3.13 | Blood storage | Lower | |
| 3.14 | IMEP | displace | |
| 3.16 | Immunization and cold chain | - Carrent | |



| | The state of the s |
|--|--|
| | AND DESCRIPTION OF THE PROPERTY OF THE PROPERT |
| The state of the s | |
| AND THE PROPERTY OF THE PROPER | |
| 3.15 Others | |
| 1 7 1 6 1 ()thore | |
| I A LA LEBRICIA | |
| 1 3,12 1 0 0000 | |
| | |

| Section | on IV: Equipment: | h | manufacture of the state of the | |
|---------|---|--|--|--|
| S. No | Equipment | Yes | No | Remarks |
| 4.1 | Functional BP Instrument and Stethoscope | Y | N | |
| 4.2 | Sterilised delivery sets | Y / | N | |
| 4.3 | Functional Neonatal, Paediatric and Adult Resuscitation kit | Y | N | |
| 4.4 | Functional Weighing Machine (Adult and child) | Y | N | |
| 4.5 | Functional Needle Cutter | X_ | N | |
| 4.6 | Functional Radiant Warmer | Y | N | |
| 4.7 | Functional Suction apparatus | Y | N | |
| 4.8 | Functional Facility for Oxygen Administration | Y | N | |
| 4.9 | Functional Foetal Doppler/CTG | Y | N | |
| 4.10 | Functional Mobile light | Y | N | work from Level |
| 4.11 | Delivery Tables | Y | N | |
| 4.12 | Functional Autoclave | Y | N | |
| 4.13 | Functional ILR and Deep Freezer | Y | N | |
| 4.14 | Emergency Tray with emergency injections | Y | N | \$ |
| 4.15 | MVA/ EVA Equipment | Y | N | |
| 4.16 | Functional phototherapy unit | Y | N | |
| 4.17 | O.T Equipment | and the second s | | |
| 4.18 | O.T Tables | Y | N. | |
| 4.19 | Functional O.T Lights, ceiling | Y | N | · |
| 4.20 | Functional O.T lights, mobile | Y | N | |
| 4.21 | Functional Anesthesia machines | Y | N | |
| 4.22 | Functional Ventilators | Y | N | |
| 4.23 | Functional Pulse-oximeters | Y | N | and the state of t |
| 4.24 | Functional Multi-para monitors | Y | N | SACRET |
| 4.25 | Functional Surgical Diathermies | Y | N | |
| 4.26 | Functional Laparoscopes | Y | N | |
| 4.27 | Functional C-arm units | Y | N | |



| 4.28 | Functional Autoclaves (H or V) | Y | N |
|--|--------------------------------|---|---|
| and comment and market and an artist and an artist and an artist and artist a | Laboratory Equipment | | |
| 4.1a | Functional Microscope | Y | N |
| 4.2a | Functional Hemoglobinometer | Y | N |
| 4.3a | Functional Centrifuge | Y | N |
| 4.4a | Functional Semi autoanalyzer | Y | N |
| 4.5a | Reagents and Testing Kits | Y | N |
| 4.6a | Functional Ultrasound Scanners | Y | N |
| 4.7a | Functional C.T Scanner | Y | N |
| 4.8a | Functional X-ray units | Y | N |
| 4.9a | Functional ECG machines | Y | N |

Section V: Essential Drugs and Supplies:

| S.No | on V: Essential Drugs and Supplies Drugs | Yes | No | Remarks |
|------|---|-----|----------------|--|
| 5.1 | EDL available and displayed | Y | N | |
| 5.2 | Computerised inventory management | γ | $N \checkmark$ | on the second se |
| 5.3 | IFA tablets | Y 🗸 | N | |
| 5.4 | IFA tablets (blue) | Υ | N_{\searrow} | and the state of t |
| 5.5 | IFA syrup with dispenser | Y | $N \sim$ | |
| 5.6 | Vit A syrup | Y | N | |
| 5.7 | ORS packets | Y | ⁻ N | - |
| 5.8 | Zinc tablets | Y | N | |
| 5.9 | Inj Magnesium Sulphate | Y | N | |
| 5.10 | Inj Oxytocin | Y | N | |
| 5.11 | Misoprostol tablets | Y 🗸 | N | |
| 5.12 | Mifepristone tablets | Y | N | - |
| 5.13 | Availability of antibiotics | Y | N | |
| 5.14 | Labelled emergency tray | Y | N | |
| 5.15 | Drugs for hypertension, Diabetes, common ailments e.g PCM, anti-allergic drugs etc. | Y | N | |
| 5.16 | Vaccine Stock available | YV | N | |
| S.No | Supplies | Yes | No | Remarks |
| 5.17 | Pregnancy testing kits | Y | N | |
| 5.18 | Urine albumin and sugar testing kit | Y | N | |
| 5.19 | OCPs | Y | N | |
| 5.20 | EC pills | Y | N | 11-07-0 |
| 5.21 | IUCDs | Y | $\frac{1}{N}$ | |
| 5.22 | Sanitary napkins | Y | No No | Remarks |
| S.No | Essential Consumables | Yes | NO | IVIIIII |
| 5.23 | Gloves, Mckintosh, Pads, bandages, and | Y | I V | |
| | gauze etc. | 1 | <u> </u> | |

Note: For all drugs and consumables, availability of at least 2 month stock to be observed and noted



Section VI: Other Services:

| S.no | Lab Services | Yes | No | Remarks |
|--------|--|--|-----|--|
| 6.1 | Haemoglobin | Y 🗸 | N | <u> </u> |
| 6.2 | CBC | Y | NV | |
| 6.3 | Urine albumin and sugar | Y | N | |
| 6.4 | Blood sugar | Y | N | |
| 6.5 | RPR (Rapid Plasma Reagin) test | Y | N | |
| 6.6 | A Contraction of the contraction | Y | NU | |
| 6.7 | Malaria (PS or RDT) T.B (Sputum for AFB) | Y | N V | question de la constanta de la |
| 6.8 | A STATE OF THE PARTY OF THE PAR | Y | N | |
| 6.9 | HIV (RDT) Liver function tests(LFT) | Y | NV | |
| 6.10 | Ultrasound scan (Ob.) | Y | NV | |
| 6.11 | Ultrasound Scan (General) | Y | NV | |
| 6.12 | X-ray | Y | N V | |
| 6.13 | ECG | Y | N 🗸 | |
| 6.14 | Endoscopy | Y | N | |
| 6.15 | Others, pls specify | Y | N | TLC.DLC. ESR |
| S.No | Blood bank / Blood Storage Unit | Yes | No | Remarks |
| 6.16 | Functional blood bag refrigerators with chart | Y | N | |
| V. 1 V | for temp, recording | | | |
| 6.17 | Sufficient no. of blood bags available | Y | N. | |
| 6.18 | Check register for number of blood bags issued for BT in last quarter | the state of the s | | |

Section VII: Service Delivery in last two quarters:

| S.No | n VII: Service Delivery in last two Service Utilization Parameter | Q1 | Q2 |
|------|---|---------------------|---|
| | OPD | 5 949 | 5.445 |
| | | 22,0 | 3432 |
| | IPD Company | 8" 6" 45 | |
| | Expected number of pregnancies | | 308 |
| | No. of pregnant women given IFA | 2 | |
| | Total deliveries conducted | 10776 | 1881 |
| 7.6 | No. of assisted deliveries(Ventouse/ | 51 | L i Ci |
| | Forceps) | 1 % | |
| 7.7 | No. of C section conducted | 15 | 1 |
| 7.8 | Number of obstetric complications | - | T-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P |
| | managed, pls specify type | | 195 |
| 7.9 | No. of neonates initiated breast feeding | 1037 | March |
| | within one hour Number of children screened for Defects at | | 1 |
| 7.10 | birth under RBSK | 1,50 | 099 |
| 7.11 | RTI/STI Treated | 253 | 532 |
| | No of admissions in NBSUs/ SNCU, | | |
| 7.12 | whichever available | gi-joj epipadasan | |
| 7.13 | No of admissions :Inborn | 1042 | 1 (105) |
| | | - | |
| 7.14 | No of admissions :Outborn | - Parameter Comment | |
| 7.15 | No. of children admitted with SAM | | |



| | | - | AND DESCRIPTION OF THE PROPERTY OF THE PROPERT | And the second s |
|------|---|--------|--|--|
| 7.16 | No. of sick children referred | | | |
| 7.17 | No. of pregnant women referred | | | |
| 7.18 | No. of IUCD Insertions | | | |
| 7.19 | No. of Tubectomy | O P | 04 | |
| 7.20 | No. of Vasectomy | | | |
| 7.21 | No. of Minilap | 02 | | |
| 7.22 | No. of children fully immunized | 1997 | | 1354 |
| 7.23 | Measles coverage | 144.00 | A American | 1354 |
| 7.24 | No. of children given ORS + Zinc | 12.0% | 10 | |
| 7.25 | No. of children given Vitamin A | 77 | 9115 | · · |
| 7.26 | No. of women who accepted post-partum FP services | , a | ٥ | |
| 7.27 | No. of MTPs conducted in first trimester | 129 | 189 | 10% |
| 7,28 | No. of MTPs conducted in second trimester | 401 | 27 | |
| 7.29 | Number of Adolescents attending ARSH clinic | A | | |
| 7.30 | Maternal deaths, if any | 4- | 1:- | Tanada |
| 7.31 | Still births, if any | 73 | 21 | |
| 7.32 | Neonatal deaths, if any | 80. | ,g1 | |
| 7,33 | Infant deaths, if any | *** | | |

Section VII a: Service delivery in post natal wards:

| Section | on VII a: Service delivery in | DOST HATE | TALEST CO. | |
|---------|--|-----------|------------|---------|
| S.No | Parameters | Yes | No | Remarks |
| 7.1a | All mothers initiated breast feeding within one hour of normal delivery | Y | N | |
| 7.2a | Zero dose BCG, Hepatitis B and OPV given | Y | N | |
| 7.3a | Counseling on IYCF done | Y | N | |
| 7.4a | Counseling on Family Planning done | Y | N | |
| 7.5a | Mothers asked to stay for 48 hrs | Y | N | |
| 7.6a | JSY payment being given before discharge | Y | N | |
| 7.7a | Mode of JSY payment (Cash/ bearer cheque/Account payee cheque/Account Transfer) | bearen | alani, m | |
| 7.8a | Any expenditure incurred by Mothers on travel, drugs or diagnostics(Please give details) | Y | N ✓ | |
| 7.9a | Diet being provided free of charge | Y 🗸 | N | |



Section VIII: Quality parameter of the facility:

Through probing questions and demonstrations assess does the staff know how to...

| S.No | Essential Skill Set | Yes | No | Remarks |
|------|--|-----|----|---------|
| 8.1 | Manage high risk pregnancy | Y | N | |
| 8.2 | Provide essential newborn care (thermoregulation, breastfeeding and asepsis) | Y | N | |
| 8.3 | Manage sick neonates and infants | Y | N | |
| 8.4 | Correctly uses partograph | Y | N | |
| 8.5 | Correctly insert IUCD | _Y | N | |
| 8.6 | Correctly administer vaccines | Y | N | |
| 8.7 | Segregation of waste in colour coded bins | Y | N | |
| 8.8 | Adherence to IMEP protocols | Y | N | |
| 8.9 | Bio medical waste management | y. | X | |
| 8.10 | Updated Entry in the MCP Cards | Y | N | |
| 8.11 | Entry in MCTS | Y | Ŋ | |
| 8.12 | Corrective action taken on Maternal Death Review finding | Y | N | |

Section IX: Record Maintenance:

| S. no | Record | Available and Updated and correctly filled | Available but Not maintained | Not Available | Remarks/Ti meline for completion |
|-------|--|--|--|------------------|--|
| 9.1 | OPD Register | | | | |
| 9.2 | IPD Register | | , i | | word MA |
| 9.3 | ANC Register | Land of the second | | | |
| 9.4 | PNC Register | V | | | unicopy and |
| 9.5 | Indoor bed head ticket | No. | | | |
| 9.6 | Line listing of severely anaemic pregnant women | |). | | |
| 9.7 | Labour room register | Name of the second | minor established delicates | | |
| 9.8 | Partographs | | | | |
| 9.9 | FP-Operation Register (OT) | V/ | | | *** |
| 9.10 | OT Register | 4 | | | |
| 9.11 | FP Register | | V. | | |
| 9.12 | Immunisation Register | L | | | - |
| 9.13 | Updated Microplan | Name of the last o | | | |
| 9.14 | Blood Bank stock register | | \ | | |
| 9.15 | Referral Register (In and Out) | | | | |
| 9.16 | MDR Register | | l _{es} es es estado esta | | |
| 9.17 | Infant Death Review and Neonatal Death Review | | | | |
| 9.18 | Drug Stock Register | 1 | | | |
| 9.19 | Payment under JSY | | | | |



| | | | Control of the second | ï |
|---|--|---------------------------------|--|---------------------------|
| | | | Variable of the Control of the Contr | ł |
| - | AND THE PROPERTY OF THE PROPER | Untied funds expenditure (Check | | and and other property of |
| - | | % expenditure) | | - |
| | | AMG expenditure (Check % | | and property of |
| | 9.21 | expenditure) | | minerare desire in |
| | | RKS expenditure (Check % | | |
| | 9.22 | expenditure) | | لد |

Section X: Referral linkages in last two quarters:

| S. no | JSSK | Mode of Transport (Specify Govt./ pvt) | No. of women transported | No. of sick infants transported | No. of children 1- 6 years | Free/Paid |
|-------|------------------------------|---|--------------------------|---------------------------------------|----------------------------------|-----------|
| 10.1 | Home to facility | | | | | |
| 10.2 | Inter facility | | | | | |
| 10.3 | Facility to Home (drop back) | | | | | |

Section XI: IEC Display:

| | M. A. ich Display | Yes | No * | Remarks |
|---|--|-----|------|--|
| S.No | Material directions to the | V | N | |
| | Approach roads have directions to the | | | |
| 1.1 | health facility | V | N | OCCUMENT TO THE PROPERTY OF TH |
| 11.2 | Citizen Charter | * | | |
| 11.3 | Timings of the health facility | Y | N | |
| <u>. </u> | List of services available | Y | N | 227344000 |
| 11.5 | Essential Drug List | Y | N | |
| 1.6 | Protocol Posters | Y | N | · · |
| 11.7 | JSSK entitlements (Displayed in ANC Clinics/, PNC Clinics) | Y | N | |
| 1.8 | Immunization Schedule | Y | ~ | |
| 1.9 | JSY entitlements(Displayed in ANC Clinics/, PNC Clinics) | Y | N | |
| 11.10 | Other related IEC material | Y | N | |

Section XII: Additional/Support Services:

| | Services | Yes | No | Remarks |
|----------------|--|-----|----|--|
| SI. no 12.1 | Regular Sterilisation –Labour Room (Check Records) | Y | N | |
| 12.1 a | Regular Sterilisation –OT (Check Records) | Y | N | |
| 12.2 | Functional Laundry/washing services | Y | N | Information and |
| 12.3 | Availability of dietary services | Y | N | and confidence of the Confiden |
| 12.4 | Appropriate drug storage facilities | Y | N | |
| 12.5 | Equipment maintenance and repair mechanism | Y | N | |
| 12.6 | Grievance Redressal mechanisms | Y | N | and control of the co |
| 12.7 | Tally software Implemented | Y | N | |



Section XIII: Previous supervisory visits:

| S. no | Name and Designation of the supervisor | Place of posting of Supervisor | Date of visit |
|-------|--|-----------------------------------|---------------|
| 13.1 | Parendia Sweet Portion | 12 13 10 10 10 | |
| 13.2 | | | |
| 13.3 | | | |
| 13.4 | | | |
| 13.5 | | | |

Note: Ensure that necessary corrective measures are highlighted and if possible, action taken on the spot. The Monthly report of monitoring visits and action points must be submitted to the appropriate authority for uploading on State MoHFW website

To be filled by monitor(s) at the end of activity

| Key Findings | Actions Taken/Proposed | Person(s) Responsible | Timeline |
|--|------------------------|--------------------------|----------|
| westernatorial | will on he was as h | 30,50 | |
| the state of the s | Ban an misor process | | |
| the reproperties have | | | |
| the week something with | | | |
| | | | |
| | | | |
| | | | |



FRU level Monitoring Checklist

| Name of District: <u>Jalan</u> | Name of Block: <u>Bower</u> | Name of FRU: |
|---|------------------------------------|--|
| Catchment Population: 137 40 | Total Villages: | Distance from Dist HQ: |
| Date of last supervisory visit: $\underline{\mathcal{D}}$ | and the second | |
| Date of visit: 13.9 | Name& designation of monitor: | announce and control of the second se |
| Names of staff not available on the o | day of visit and reason for absenc | e: |
| | | |

Section I: Physical Infrastructure:

| S.No | Infrastructure | Yes | No | Additional Remarks |
|------|--|-----|----|--|
| 1.1 | Health facility easily accessible | Y | N | |
| 1.2 | from nearest road head Functioning in Govt building | Y | N | Annual Property of the Control of th |
| 1.3 | | V | | romania productiva de la constanta de la const |
| | Building in good condition | | N | |
| 1.4 | Habitable Staff Quarters for MOs | Y | N | |
| 1.5 | Habitable Staff Quarters for SNs | Y | N | |
| 1.6 | Habitable Staff Quarters for other categories | Y | N | |
| 1.7 | Electricity with power back up | Y | ·N | ¢ |
| 1.8 | Running 24*7 water supply | Y | N | |
| 1.9 | Clean Toilets separate for Male/Female | Y | N | |
| 1.10 | Functional and clean labour Room | Y | N | |
| 1.11 | Functional and clean toilet attached to labour room | Y | N | |
| 1.12 | Functional New born care corner(functional radiant warmer with neo-natal ambu bag) | Y | N | Available but not function |
| 1.13 | Functional Newborn Stabilization Unit | Y | N | |
| 1.14 | Functional SNCU | Y | N | |
| 1.16 | Clean wards | Y | N | |
| 1.17 | Separate Male and Female wards (at least by partitions) | Y | N | |
| 1.18 | Availability of Nutritional Rehabilitation Centre | Y | N | |
| 1.19 | Functional BB/BSU, specify | Y | N | |
| 1.20 | Separate room for ARSH clinic | Y | N | |
| 1.21 | Availability of complaint/suggestion box | Y | N | |



| 1.22 | Availability of mechanisms for Biomedical waste management (BMW)at facility | Y | N | |
|------|---|---|---|---|
| 1.23 | BMW outsourced | Y | N | - |
| 1.24 | Availability of ICTC Centre | Y | N | |

| S. no | Category | Numbers | Remarks if any |
|-------|---------------------|--|-------------------|
| 2.1 | OBG | Millipetics - | |
| 2.2 | Anaesthetist | West and the second sec | · |
| 2.3 | Paediatrician | Smith - | |
| 2.4 | General Surgeon | | |
| 2.5 | Other Specialists | | , T |
| 2.6 | MOs | 2 | 141 |
| 2.7 | SNs | | |
| 2.8 | ANMs | 3 > | |
| 2.9 | LTs | | |
| 2.10 | Pharmacist | 2 | san took a choose |
| 2.11 | LHV | l _{and} | |
| 2.12 | Radiographer | 602-1- | |
| 2.13 | RMNCHA+ counsellors | for a - | |
| 2.14 | Others | | |

Section III: Training Status of HR:

| | on III: Training Status of Tix. | No. trained | Remarks if any |
|--|---------------------------------|-------------------|--|
| S. no | Training | 18.0. 11 (411.0.0 | |
| 3.1 | EmOC | | and the state of t |
| 3.2 | LSAS | | and the state of t |
| 3.3 | ВеМОС | | |
| 3.4 | SBA | | |
| 3.5 | MTP/MVA | | |
| 3.6 | NSV | | |
| 3.7 | F-IMNCI | | |
| 3.8 | NSSK | ~ | |
| 3.9 | Mini Lap-Sterilisations | | |
| 3.10 | Laproscopy-Sterilisations | | |
| 3.11 | IUCD | | |
| 3.12 | PPIUCD | Modern. | |
| 3.13 | Blood storage | | |
| 3.14 | IMEP | | |
| 3.16 | Immunization and cold chain | | |
| 3.15 | Others | | |
| water management of the same o | | | |



Section IV: Equipment:

| S. No | on IV: Equipment: Equipment | Yes | No |
|-------|---|----------|----------|
| 4.1 | Functional BP Instrument and | γ γ | N |
| Til | Stethoscope | i. | '* |
| 4.2 | Sterilised delivery sets | Y | N |
| 4.3 | Functional Neonatal, Paediatric and | Y | N |
| | Adult Resuscitation kit | | |
| 4.4 | Functional Weighing Machine (Adult and | Y | N |
| 4.5 | child) Functional Needle Cutter | Y | N |
| 4.6 | Functional Radiant Warmer | Y | N |
| 4.7 | Functional Suction apparatus | Y | N |
| 4.8 | Functional Facility for Oxygen | Y | N |
| | Administration | | |
| 4.9 | Functional Autoclave | Y | N |
| 4.10 | Functional ILR and Deep Freezer | Y | N |
| 4.11 | Emergency Tray with emergency | Y | N |
| 117 | injections | Y | N |
| 4.12 | MVA/ EVA Equipment Functional phototherapy unit | <u>'</u> | N / |
| 4.13 | | <u> </u> | <u> </u> |
| A 4 A | Laboratory Equipment | Y | N |
| 4.14 | Functional Microscope | | N |
| 4.15 | Functional Hemoglobinometer | Y | N |
| 4.16 | Functional Centrifuge | | |
| 4.17 | Functional Semi autoanalyzer | Y | N |
| 4.18 | Reagents and Testing Kits | Y | N |
| | O.T Equipment | | |
| 4.19 | O.T Tables | Y | N |
| 4.20 | Functional O.T Lights, ceiling | Y | N |
| 4.21 | Functional O.T lights, mobile | Y | N |
| 4.22 | Functional Anesthesia machines | Y | N |
| 4.23 | Functional Ventilators | Υ | N |
| 4.24 | Functional Pulse-oximeters | Y | N |
| 4.25 | Functional Multi-para monitors | Y | N > |
| 4.26 | Functional Surgical Diathermies | Y | N 🗸 |
| 4.27 | Functional Laparoscopes | Y | N |
| 4.28 | Functional C-arm units | Y | N v |
| 4.29 | Functional Autoclaves (H or V) | Y | N |



Section V: Essential Drugs and Supplies:

| Section | on V: Essential Drugs and Suppli | Yes | No | Remarks |
|--------------|---|----------------|-------|--|
| S.No | Drugs | res | N | |
| 5.1 | EDL available and displayed | Y | | |
| 5.2 | Computerised inventory management | Y | NV | |
| 5.3 | IFA tablets | Y | N | - |
| 5.4 | IFA tablets (blue) | Y | N V | one control of the co |
| 5.5 | IFA syrup with dispenser | Y | N | in the second se |
| 5.6 | Vit A syrup | Y | N | |
| 5.7 | ORS packets | Y - | N | |
| 5.8 | Zinc tablets | Y | NV | |
| 5.9 | Inj Magnesium Sulphate | Y | NV | |
| 5.10 | Inj Oxytocin | Y | N | |
| 5.11 | Misoprostol tablets | Y | N | |
| 5.12 | | Y | NV | |
| | Mifepristone tablets | $Y \checkmark$ | N | minute. |
| 5.13 | Availability of antibiotics | Y | N | |
| 5.14 | Labelled emergency tray Drugs for hypertension, Diabetes, | Y | N | |
| 5.15 | common ailments e.g PCM, | | M. | Approximation of the state of t |
| | metronidazole, anti-allergic drugs etc. | | | and the second |
| 5.16 | Vaccine Stock available | Y 🗸 | N | |
| 5.10 S.No | Supplies | Yes | No | Remarks |
| 5.17 | Pregnancy testing kits | Y _/ | N | |
| 5.18 | Urine albumin and sugar testing kit | Y | N 🗸 | |
| 5.19 | OCPs 9 | Y | N | - |
| 5.20 | EC pills | Y | N | |
| 5.21 | IUCDs | Y | N | |
| 5.22 | Sanitary napkins | Y | N | Remarks |
| S.No | Essential Consumables | Yes | No | Remarks |
| 5.23 | Gloves, Mckintosh, Pads, bandages, and | Y | N | |
| | ŧ | | 1: 6: | least 2 month stock to be |

Note: For all drugs and consumables, availability of at least 2 month stock to be observed and noted

Section VI: Other Services:

| ******* | on VI: Other Services: | Yes | No | Rema |
|---------|---------------------------------|-----|-----|--------|
| S.no | Lab Services | V | N | |
| 5.1 | Haemoglobin | | | |
| 6.2 | CBC | Y | N | |
| 6.3 | Urine albumin and sugar | Y | N | |
| 6.4 | Blood sugar | Y < | N | |
| | | Y | NV | |
| 6.5 | RPR (Rapid Plasma Reagin) test | Y | N | |
| 6.6 | Malaria (PS or RDT) | T v | N | |
| 6.7 | T.B (Sputum for AFB) | | | - |
| 6.8 | HIV (RDT) | Y | N | - |
| 6.9 | Liver function tests(LFT) | Y | N 🗸 | |
| | | Y | N | |
| 6.10 | Others, pls specify | Yes | No | Remark |
| S.No | Blood bank / Blood Storage Unit | | | |



| 6.11 | Functional blood bag refrigerators with chart for temp. recording | Y | N | |
|--------------------------------|---|---|---|--|
| 6.12 | Sufficient no. of blood bags available | Y | N | |
| 6.13 | Check register for number of blood bags | | | |
| till de addressed and a second | issued for BT in last quarter | | | |

Section VII: Service Delivery in last two quarters:

| S.No | Service Utilization Parameter | Q1 | Q2 | Remar |
|--------|---|----|--|--|
| 7.1 | OPD | | | |
| 7.2 | IPD | | | |
| 7.3 | Expected number of pregnancies | | | |
| 7.4 | No. of pregnant women given IFA | | | |
| 7.5 | Total deliveries conducted | | | |
| 7.6 | No. of assisted deliveries (Ventouse/ Forceps) | | | |
| 7.7 | No. of C section conducted | | | |
| 7.8 | Number of obstetric complications managed, pls specify type | | | |
| 7.9 | No. of neonates initiated breast feeding within one hour | | | AN TOTAL PROPERTY OF THE PROPE |
| 7.10 | Number of children screened for Defects at birth under RBSK | | | |
| 7.11 | RTI/STI Treated | | | |
| 7.12 | No of admissions in NBSUs/SNCU, whichever available | | | |
| 7.12 a | Inborn | | | PROFESTIONAL |
| 7.12 b | Outborn | | | - |
| 7.13 | No. of children admitted with SAM | | | |
| 7.14 | No. of sick children referred | | | |
| 7.15 | No. of pregnant women referred | | | Ann an a |
| 7.16 | No. of IUCD Insertions | | The state of the s | |
| 7.17 | No. of Tubectomy | | - | |
| 7.18 | No. of Vasectomy | | | 4 |
| 7.19 | No. of Minilap | | | |
| 7.20 | No. of children fully immunized | | | ATTENÇAÇÃO |
| 7.21 | Measles coverage | | | |
| 7.22 | No. of children given ORS + Zinc | | | |
| 7.23 | No. of children given Vitamin A | | | P0000000 |
| 7.24 | No. of women who accepted post- partum FP services | | | |
| 7.25 | No. of MTPs conducted in first trimester | | | |
| 7.26 | No. of MTPs conducted in second trimester | | | |
| 7.27 | Number of Adolescents attending ARSH clinic | | | |
| 7.28 | Maternal deaths, if any | | | |
| 7.29 | Still births, if any | | | |



| | 1 |
|--|--|
| | 1 |
| | |
| and the state of t | 1 |
| 7.30 Neonatal deaths, if any | 1 |
| 7.30 | |
| | And the Party of t |
| 7.31 Infant deaths, if any | |
| 7.31 Infant deaths, if any | |
| | |

Section VII a: Service delivery in post natal wards:

| Secti | on VII a: Service delivery it | i post na | tai wai us. | Remarks |
|-------------------------------------|---|-----------|-------------|--|
| S.No | Parameters | Yes | No | 差貨廠 亲亲其意味者 本面心 |
| and the second second second second | All mothers initiated breast | Y | N | |
| 7.1a | feeding within one hr of normal | | | |
| 7.2a | delivery Zero dose BCG, Hepatitis B and OPV given | Y | N | |
| 7.3a | Counseling on IYCF done | Y | N | and the same of th |
| 7.4a | Counseling on Family Planning | Y | N | |
| 7.5a | Mothers asked to stay for 48 hrs | Y | N | |
| 7.6a | JSY payment being given before discharge | Y | N | |
| 7.7a | Mode of JSY payment (Cash/ bearer cheque/Account payee cheque/Account Transfer) | beares | crahm. | |
| 7.8a | Any expenditure incurred by Mothers on travel, drugs or | Y | N | |
| 7.9a | diagnostics(Please give details) Diet being provided free of charge | Y | N | |

| Through pro | obing questions and demonstrations | Yes | No | Remark |
|-------------|---|-----|------|--|
| | sential Skill Set | Y | N | |
| 8.1 Ma | anage high risk pregnancy | Y | N | |
| 8.2 Pr | ovide essential newborn | 8. | | and the same of th |
| cai | re(thermoregulation, | | | |
| br | eastfeeding and asepsis) anage sick neonates and infants | Y | N | |
| 8.3 Ma | anage sick neonates and | Y | N | |
| 8.4 Co | orrectly uses partograph | v | N | |
| 8.5 Cc | orrectly insert IUCD | Y | N | |
| 8.6 Co | orrectly administer vaccines | | N | |
| | egregation of waste in colour | Y | 2 ** | |
| | oded bins | Y | N | |
| 8.8 A | dherence to IMEP protocols | | N | |
| 8.9 M | lanage Bio medical waste | Y | N | |
| 8.10 U | pdated entry in the MCP Cards | Y | | |
| | ntry in MCTS | Y 🗸 | N | |
| 8.12 C | Corrective action taken on | Y | N | |
| 0.14 C | Maternal Death Review finding | | | |



Section IX: Record Maintenance:

| S. no | Record | Available and Updated and Correctly filled | Available but Not maintained | Not Available | Remarks/T imeline for completion |
|-------|--|--|---|--|--|
| 9.1 | OPD Register | ~ | | | |
| 9.2 | IPD Register | | | | |
| 9.3 | ANC Register | L. | | | |
| 9.4 | PNC Register | A CONTRACTOR OF THE PROPERTY O | gegggegen ander in de de de geggegen von de | | |
| 9.5 | Indoor bed head ticket | A Contraction of the Contraction | | Acres (100 April 100 April | |
| 9.6 | Line listing of severely anaemic pregnant women | Where, i.e. | | | |
| 9.7 | Labour room register | | | 000 | - many |
| 9.8 | Partographs | No. 2012 | | | |
| 9.9 | FP-Operation Register (OT) | | | | |
| 9.10 | OT Register | Makeyanii ; Aggishdaniike 1 ga, | and the recommendation of the property of the | | |
| 9.11 | FP Register | | | | |
| 9.12 | Immunisation Register | Ser. | | | |
| 9.13 | Updated Microplan | Name of the second | | | |
| 9.14 | Blood Bank stock register | 2000-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | | |
| 9.15 | Referral Register (In and Out) | V | | | A A A A A A A A A A A A A A A A A A A |
| 9.16 | MDR Register | Management | | | The state of the s |
| 9.17 | Infant Death Review and Neonatal Death Review | Application (1995) | | | |
| 9.18 | Drug Stock Register | | | | |
| 9.19 | Payment under JSY | \\ | | | |
| 9.20 | Untied funds expenditure (Check % expenditure) | */. | | | |
| 9.21 | AMG expenditure (Check % expenditure) | <u> </u> | | | Total Control of the |
| 9.22 | RKS expenditure (Check % expenditure) | 247 | | of the state of th | Representation in the contract of the contract |

Section X: Referral linkages in last two quarters:

| S. no | JSSK | Mode of Transport (Specify Govt./ pvt) | No. of women transported during ANC/INC/PN C | No. of sick infants transporte d | No. of children 1-6 years | Free/Paid |
|-------|------------------------------|---|---|---|---------------------------------|-----------|
| 10.1 | Home to facility | B ₁₋₁ (c) | 225 | | | |
| 10.2 | Inter facility | #Note in section | | | | |
| 10.3 | Facility to Home (drop back) | (Magazino)/SPIA | ETO-VINOL ⁽²⁾ | y | | |



Section XI: IEC Display:

| secur | on XI: IEC Display: | Vac | No | Remarks |
|-------|--|-----|--|--|
| S.No | Material | Yes | N | |
| | Approach roads have directions to | Y | 1 | |
| 11.1 | the health facility | V | N | |
| 11.2 | Citizen Charter | * | N | and the second s |
| 11.3 | Timings of the health facility | Y | Market and the factor of the party of the first of the second of the sec | ann-100 (100 (100 (100 (100 (100 (100 (100 |
| 11.4 | List of services available | Y | N | on the first of the second of |
| 11.5 | Essential Drug List | Y | N | ingentacija in de interes e men |
| 11.6 | Protocol Posters | Y | N | Specialist of the Control of the Con |
| 11.7 | JSSK entitlements (Displayed in ANC Clinics/, PNC Clinics) | Y | N | audicularia (Tara) |
| 11.8 | Immunization Schedule | Y | N | - Automatical Property of the Control of the Contro |
| 11.9 | JSY entitlements(Displayed in ANC Clinics/, PNC Clinics) | Y | N | |
| 11.10 | Other related IEC material | Y | N | |

Section XII: Additional/Support Services:

| | on XII: Additional/Support Ser | Yes | No | Remarks |
|--|--|-----|------|------------|
| Sl. no 12.1 | Services Regular sterilisation of LR (Check | Y | N | |
| 12.1a | Records) Regular sterilisation of OT (Check | Y | N | |
| Control of the State of the Sta | Records) Functional Laundry/washing services | Y | N V | |
| 12.2 | Availability of dietary services | Y | N | |
| 12.4 | Appropriate drug storage facilities | Y | IN . | w/comme |
| 12.5 | Equipment maintenance and repair mechanism | | | executive. |
| 12.6 | Grievance Redressal mechanisms | Y | N | a quantum |
| 12.7 | Tally software implemented | | | |

Section XIII: Previous supervisory visits:

| Section S. no | Name and Designation of the supervisor | Place of posting of Supervisor | Date of visit |
|------------------|--|-----------------------------------|---------------|
| 404 | Mrs palevar | UNKNOW? | |
| 13.1 | Principal Servetory | | |
| 13.3 | | | |
| 13.4 | | | |
| 13.5 | | | |

Note: Ensure that necessary corrective measures are highlighted and if possible, action taken on the spot. The Monthly report of monitoring visits and action points must be submitted to the appropriate authority for uploading on State MoHFW website



| Key Findings | Actions Taken/Proposed | Person(s) Responsible | Timeline |
|--------------|------------------------|--------------------------|----------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |



Sath Centre level Manitoring Clucklist

| Annual Contraction of the Contra | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |
|--|---|---------------------------------------|
| Name of District: <u>Jalau</u> | Name of Block: Mahala | Name of SC: Ni yaya at 8.7 |
| Catchment Population: 11000 | Total Villages: | Distance from PHC: |
| Date of last supervisory visit: | yes Add a state of the state of | - announce order section (|
| Date of visit: | Name & designation of monitor: | <u> </u> |
| Names of staff posted and available | on the day of visit: | |
| Names of staff not available on the d | ay of visit and reason for absence : | |
| | | |

Section I: Physical Infrastructure:

| S.No | Infrastructure | Yes | No | Remarks |
|------|--|-------------|----|---------|
| 1.1 | Subcentre located near a main habitation | Y | N | |
| 1.2 | Functioning in Govt building | Y | N | |
| 1.3 | Building in good condition | Y | N | |
| 1.4 | Electricity with functional power back up | V | N | |
| 1.5 | Running 24*7 water supply | <i>Y</i> ./ | N | · |
| 1.6 | ANM quarter available | Y | N | |
| 1.7 | ANM residing at SC | Y | N | |
| 1.8 | Functional labour room | Y. | N | |
| 1.9 | Functional and clean toilet attached to labour room | Y | N | |
| 1.10 | Functional New Born Care Corner (functional radiant warmer with neonatal ambu bag) | Y | N | |
| 1.11 | General cleanliness in the facility | Y | N. | |
| 1.12 | Availability of complaint/ suggestion box | Y | N | |
| 1.13 | Availability of deep burial pit for waste management / any other mechanism | Y | N | |

Section II: Human Resource:

| S.no | Human resource | Numbers | Specify the Training received | Remarks |
|------|-----------------|---------|-------------------------------|---------|
| 2.1 | ANM | | | |
| 2.2 | 2nd ANM | | | |
| 2.3 | MPW - Male | Mary | | |
| 2.4 | Others, specify | | | |



Section III: Equipment Mark (√) in appropriate column

| S.N | Equipment | Available | Available | Not | Remarks |
|------|-------------------------------------|--|--|-----------|--|
| 0 | | and Functional | but non- functional | Available | |
| 3.1 | Equipment for Hemoglobin Estimation | Name of the last o | | | |
| 3.2 | Blood sugar testing kits | | | | |
| 3.3 | BP Instrument and Stethoscope | | | | |
| 3.4 | Delivery equipment | | Personal Committee Committ | 1 | |
| 3.5 | Neonatal ambu bag | | | | The state of the s |
| 3.6 | Adult weighing machine | 1,700 | | | |
| 3.7 | Infant/New born weighing machine | Sappenday Comment | | | |
| 3.8 | Needle &Hub Cutter | Marine | | | |
| 3.9 | Color coded bins | | | | |
| 3.10 | RBSK pictorial tool kit | | | | |

Section IV: Essential Drugs:

| S. No | Availability of at least 2 month stock of essential Drugs | Yes | No | Remarks |
|----------|---|-----|----------------|---------|
| 4.1 | IFA tablets | Y | √N | |
| 4.2 | IFA syrup with dispenser | Y | VN | |
| 4.3 | Vit A syrup | Y 🛬 | N | |
| 4.4 | ORS packets | Y | N | |
| 4.5 | Zinc tablets | Y | N _V | |
| 4.6 | Inj Magnesium Sulphate | Y | N | |
| 4.7 | Inj Oxytocin | Y | N/ | |
| 4.8 | Misoprostol tablets | Y | N | |
| 4.9 | Antibiotics, if any, pls specify | Y | N | |
| 4.10 | Availability of drugs for common ailments e.g PCM, anti-allergic drugs etc. | Y | N | |

Section V: Essential Supplies

| ~~~~~~ | occion vi boccicio ouppireo | | | | | | |
|--------|-----------------------------------|-----|----|---------|--|--|--|
| S.No | Essential Medical Supplies | Yes | No | Remarks | | | |
| 5.1 | Pregnancy testing Kits | Y | N | | | | |
| 5.2 | Urine albumin and sugar | Y | N | | | | |
| | testing kit | | | | | | |
| 5.3 | OCPs | Y | N | | | | |
| 5.4 | EC pills | Y | N | | | | |



| 5.5 | IUCDs | Y | N. Market Contract | N | 0.000 (0.000) | |
|-----|------------------|---|--------------------|---|---------------|--|
| 5.6 | Sanitary napkins | Y | V | N | April 1995 | |

Section VI: Service Delivery in the last two quarters:

| S.No | Service Utilization Parameter | Q1 | Q2 | Remarks |
|--|-------------------------------------|---|--|--|
| 6.1 | | | | A The Mark Mark A The State of |
| | pregnancies | 1/20 | 1 1 1 60 | |
| 6.2 | 0 | 3 67 | 0.0 | |
| | in the first trimester | とシ | 19 | |
| 6.3 | 9 | diliki karananananan | | |
| | registered | | | |
| 6.4 | 9 | 2.5 | 2 % | |
| 6.5 | registered | # 100 m | 2 | none, |
| 0.3 | No. of pregnant women given | - | Wadpunggiji Ondo rand | |
| 6.6 | Number of deliveries conducted | | | |
| And distribution of the Control of t | at SC | 46 | 120 | |
| 6.7 | Number of deliveries conducted | | *************************************** | , |
| | at home | | | |
| 6.8 | No. of neonates initiated breast | | | |
| ***** | feeding within one hour | | | |
| 6.9 | Number of children screened | | | |
| C 4 0 | for defects at birth under RBSK | No. | | O CONTRACTOR OF THE CONTRACTOR |
| 6.10 | No. of sick children referred | | | |
| 6.11 | No. of pregnant women referred | *************************************** | | |
| 6.12 | No. of IUCD insertions | <u> 51</u> | <u> </u> | - |
| 6.13 | No. of children fully immunized | 103 | 1:3/ | |
| 6.13 a | Measles coverage | | | |
| 6.15 | No. of children given ORS + Zinc | | | |
| 6.16 | No. of children given Vitamin A | | and the second s | |
| 6.17 | No. of children given IFA Syrup | | | |
| 6.18 | No. of Maternal deaths recorded | | Popola de Antonio de Maria | |
| 610 | , if any | | | |
| 6.19 | No. of still birth recorded, if any | | | |
| 6.20 | Neonatal deaths recorded, if | 40- | Millioner. | |
| 6.21 | Number of VHNDs attended | 2. | 2 | |
| 6.22 | Number of VHNSC meeting | annesses and programme and anniety | and the second s | · · |
| 0.66 | attended | 2 | 25 | |
| 6.23 | Service delivery data submitted | | | |
| | for MCTS updation | | And the state of t | TO A CONTRACT OF THE CONTRACT |
| | | | | |



Section VII: Quality parameters of the facility:

Through probing questions and demonstrations assess does the ANM know how to...

| S.No | robing questions and demonstrations asses. Essential Skill Set | Knowledge | | Ski | III | Remarks |
|------|---|--|------|----------|-----|---------|
| 7.1 | Correctly measure BP | ··Y | N | Y | N | |
| 7.2 | Correctly measure hemoglobin | Y | N | Y | N | |
| 7.3 | Correctly measure urine albumin and protein | Y | N | Y | N | |
| 7.4 | ldentify high risk pregnancy | ~ Y | N | Y | N | |
| 7.5 | Awareness on mechanisms for referral to PHC and FRU | Y | N | Y | N | |
| 7.6 | Correct use of partograph | Y | N | Υ | N | |
| 7.7 | Provide essential newborn | Y | N | Y | N | |
| ,,, | care(thermoregulation, breastfeeding and asepsis) | waaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa | 1, , | | | |
| 7.8 | Correctly insert IUCD | Y | N | Y | N | |
| 7.9 | Correctly administer vaccine | У | N | Y | N | |
| 7.10 | Adherence to IMEP protocols | Y | N | Y | N | |
| 7.11 | Segregation of waste in colour coded bins | Y | N | X | N | |
| 7.12 | Guidance/ Support for breast feeding method | Y | N | Y | N | |
| 7.13 | Correctly identifies signs of Pneumonia and dehydration | Y | N | Y | N | |
| 7.14 | Awareness on Immunization Schedule | Y | N | Y | N | |
| 7.15 | Awareness on site of administration of vaccine | у | N | Y | N | |

Section VIII: Record Maintenance:

Mark ($\sqrt{\ }$) in appropriate column

| Sl. No | Record | Available and Upto-date and correctly filled | Available but non- maintained | Not Avail able | Remarks |
|--------|--|--|-------------------------------------|----------------------|---------|
| 8.1 | Untied funds expenditure (Rs 10,000)Check % expenditure | | | ~ | |
| 8.2 | Annual maintenance grant (Rs 10,000-Check % expenditure) | | | B _e uv ' | |
| 8.3 | Payments under JSY | | | 25.00 | 799 |
| 8.4 | VHND plan | | | 1 | |
| 8.5 | VHSNC meeting minutes and action taken | | | | |



| 0.6 | Eligible couple register | 1 | | attended to the | |
|------|--------------------------------|---------------|--|--|--|
| 8.6 | <u></u> | | | Manager of the Control of the Contro | |
| 8.7 | MCH register (as per GOI) | | | | |
| 8.8 | Delivery Register as per | No. of Action | | | |
| | GOI format | | | San | |
| 8.9 | Stock register | | | | |
| 8.10 | Due lists | -2 | | | |
| 8.11 | MCP cards | m | | | |
| 8.12 | Village register | | | | |
| 8.13 | Referral Registers (In and | | | | |
| | Out) | | | And Comment | |
| 8.14 | List of families with 0-6 | | | | |
| | years children under RBSK | | - Control of the Cont | | |
| 8.15 | Line listing of severely | | | | |
| | anemic pregnant women | | | | |
| 8.16 | Updated Microplan | | | | |
| 8.17 | Vaccine supply for each | | | | |
| 0.17 | session day (check | | | | |
| | | | | lange of the second | |
| | availability of all vaccines) | | | | |
| 8.18 | Due list and work plan | | and interest | - | |
| | received from MCTS Portal | | | And a state of the | |
| | through Mobile/ | | The state of the s | 100000000000000000000000000000000000000 | |
| | Physically | | | | ny wygan y yn ei gyf y gydyd ang gwyr gyng y greg y yr ei annau ar araedd fyf yr meiddir ei 1800 blondail gwr mau araen ba |

Section IX: Referral Linkages in last two quarters:

| S. no | , | Mode of Transport (Specify Govt./ pvt) | No. of women transported during ANC/INC/PNC | No. of sick infants transported | No. of children 1-6 years | Free/Paid |
|----------|----------------|--|--|---------------------------------------|---------------------------------|--|
| | Home to | | | s.j: | | |
| 9.1 | facility | | | | | |
| 9.2 | Inter facility | | and the state of t | | | |
| | Facility to | and including the manifest of the standard of | | | | Audition of the control of the contr |
| | Home (drop | Tipo de la Constantida del Constantida de la Con | for the Committee of th | | | |
| 9.3 | back) | | Va dela della dell | | | |

Section X: IEC display:

| S. no | Material | Yes | No | Remarks |
|-------|--|-------------|------|--|
| 10.1 | Approach roads have directions to the sub centre | N. Carlotte | N | |
| 10.2 | Citizen Charter | Y | News | ************************************** |
| 10.3 | Timings of the Sub Centre | Y | _N* | promocal rook manage |
| 10.4 | Visit schedule of "ANMs" | X | N | Terminal Participants of the Control |
| 10.5 | Area distribution of the ANMs/ | <u> </u> | N | |

| | | The state of the s | tar de la companya del la companya de la companya del la companya de la compa | Annual Control of the |
|-------|----------------------------|--|---|--|
| | VHND plan | | | |
| 10.6 | SBA Protocol Posters | Y | N | |
| 10.7 | JSSK entitlements | Y | N | |
| 10.8 | Immunization Schedule | Y | N | |
| 10.9 | JSY entitlements | _Y- | N | |
| 10.10 | Other related IEC material | Y | N | |

Section XI: Previous supervisory visits:

| S. no | Name and Designation of the supervisor | Place of posting of Supervisor | Date of visit |
|-------|--|-----------------------------------|---------------|
| 11.1 | | | |
| 11.2 | | | |
| 11.3 | | | |
| 11.4 | | | |
| 11.5 | | | |

Note: Ensure that necessary corrective measures are highlighted and if possible, action taken on the spot. The Monthly report of monitoring visits and action points must be submitted to the appropriate authority for uploading on State MoHFW website.

To be filled by monitor(s) at the end of activity

| Key Findings | Actions Taken/Proposed | Person(s) Responsible | Timeline |
|--------------|------------------------|--|--|
| | | | |
| | | COLOR OF THE COLOR | |
| | | Note of many the state of the s | Transportation in the contract of the contract |
| | | And the second s | |
| | | to de la constanta de la const | - |

नियमित टीकाकरण सत्र मॉनिटरिंग प्रपत्र

| मॉर्ग | नेटर का नाम : | संस्था : 🗗 सरकारी विभाग 🛘 NI | PSP 🗆 UNICEF 🗆 STF | य | पदनाम | * |
|--|--|---|--|---|--|---|
| वि | ांक : 28 / 9 / 1 3 | समय: // //5 | दिवस : 🛛 | पुद्धवार 🛚 शुद् | कवार 🗘 श | निवार 🛘 अन्य |
| राष | U | TERREK | | | | 111111111111111111111111111111111111111 |
| <u></u> | en JE | W B C B | | | | |
| ब्लॉ | क / प्लानिंग युनिट | KOR III | TOTAL STATE OF THE | | | |
| उप | केंद्र / शहरी पोस्ट 🔣 🎅 📝 | | | | | |
| जग | ह का पता 🔣 🔎 | em ar I | | | | |
| प्रक | ार : □ प्रामीण □ शहरी □ मलिन बस्ती | HRA: □ हां □ नहीं सत्र स्थर | न : 🛘 स्वास्थ्य केंद्र 🕻 |] उपकेंद्र 💋 | आंगनवाड़ी | केंद्र 🛘 अन्य |
| सर्ह | ो जवाब पर 🗹 का निशान लगाएं। | | | | | C-4-4-0-8-0-7-1 |
| 1. | क्या सत्र आयोजित हो रहा है | | धिंहां □ नहीं | ti e emillen stej el ster Mons hare tre entre entre egen tre en retrojajn en se | and the second states as an externe of a field of entire second s | VOA-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0 |
| Control of the Contro | अ. यदि नहीं तो सत्र आयोजित न होने | का कारण लिखें (प्रपत्र के नीचे देखें) ^A | □А □В | ПС | | D |
| | ब. यदि हां तो क्या सत्र माइक्रोप्लान के | अनुसार आयोजित हो रहा है | 🛭 हां 🔲 नहीं | | | |
| 2. | लाभार्थियों को सत्र स्थल तक कौन बुल | | 🛘 आंगनवाड़ी कार्यक | र्ता 🛭 आशा | 🛮 अन्य | 🛘 कोई नहीं |
| 3. | पी.एच.सी. /ब्लॉक से सत्र स्थल तक वैव लाए गए | | ध वैकल्पिक साधन | 🛘 ए.एन.एम. | 🗆 सुपरवाः | इजर 🛘 अन्य |
| 4. | क्या सभी वैक्सीन तथा डाइल्यूएंट चार जिपर युक्त थैली के अंदर रखे गए हैं | भाइस पैक वाले वैक्सीन कैरियर में | 🔎 हीं 🛘 नहीं | | | |
| 5. | सत्र स्थल पर कौन कौन सी वैक्सीन उपलब्ध हैं * | | CG का डाइल्यूएंट easles का डाइल्यूएंट OPV | | | □ JE □ JE का डाइल्यूएंट □ Hepatitis B |
| 6. | कौन कौन सी वैक्सीन की वायल बिना VVM लगे पाई गईं * | □ BCG □ DF | | □ OPV □ 1T | | □ Hep-B □ JE |
| 7. | क्या कोई वैक्सीन वायल उल्लिखित अवस्था में पाई गई, यदि हां तो, ☑ का निशान लगाएं तथा वैक्सीन का नाम लिखें * | ☐ बिना लेबल / न पढ़ सकने ला ☐ VVM स्टेज III अथवा IV ☐ एक्सपायर हो चुकी वैक्सीन व ☐ जमी अवस्था में वैक्सीन (DPT | ायल | -B) | | |
| 8. | उल्लिखित लॉजिस्टिक में से क्या क्या वस्तुएं सत्र स्थल पर उपलब्ध है * | ए.डी. (0.1 मि.ली.) सिरिजें ए.डी. (0.5 मि.ली.) सिरिजें चालू अवस्था में हब कटर खाली टीकाकरण कार्ड लाल और काली थैलियां | चिवटामिन ए सॉल्यू चिविटामिन ए हेतु प चिपुष्टाहार/Supple चिअपेक्षित लामार्थिये | शन नास्टिक की व ements iं की सूची | | 1 |
| 9. | क्या सत्र स्थल पर समुचित संख्या में मि (=BCG + Measles +JE की वायलें) | पण करने हेतु 5 मि.ली. की डिस्पोज़िब | ल सिरिजें उपलब्ध हैं | प िंहां | 🛭 नहीं | 🗆 उपलब्ध नहीं |
| 10. | क्या मिश्रित BCG/Measles/JE की वाय | नों पर मिश्रण का समय अंकित है | | √⊒ हां | 🗆 नहीं | 🛘 लागू नहीं |
| 11. | क्या इंजेक्शन से दी जाने वाली वैक्सीन | देने के लिए ए.डी, सिरिंजों का इस्तेमा | ल किया जा रहा है | Q €i | 🗆 नहीं | 🛘 लागू नहीं |
| 12. | क्या DPT वैक्सीन मध्य जांघ के बाहरी भ | ग में दी जा रही है | | D gi | 🛘 नहीं | 🗆 लागू नहीं |
| 13. | क्या इंजेक्शन लगाते वक्त ए.एन.एम. सुई | अथवा उसके किसी भाग को छू रही | A | ॅ टी हां | □ नहीं | 🛘 लागू नहीं |
| 14. | क्या प्रत्येक सिरिंज को इस्तेमाल के तुरंत | पश्चात हब कटर से काटा जा रहा है | h | र्ख हां | 🛘 नहीं | 🛘 लागू नहीं |
| 15. | क्या प्रत्येक लाभार्थी को दिए गए टीके व | ो जानकारी सत्र टैली शीट में भरी जा | रही है | √ि हां | 🛘 नहीं | 🛘 लागू नहीं |
| 16. | क्या आज दिए जा रहे टीकों की जानका | ो को काउँटरफॉयल में भरकर उन्हें अ | द्युनांत किया जा रहा | है 🔎 हां | □ नहीं | □ लागू नहीं |
| 17. | क्या माता पिता को टीकाकरण के बाद च | ार महत्वपूर्ण संदेश दिए जा रहे हैं | edin kali kilokulohin en sidak kilomenen (da kali sidak kimayasan iba ayanna sayannaya kasan). | | 🛘 नहीं | 🗆 लागू नहीं |
| and the same of th | A A A | एवं लॉजिस्टिक दोनों उपलब्ध नहीं हैं। B= ए | | A* | 9 /9 | |

∆ (प्र. 134): A= ए.एन.एम. ∕ टीकाकरण कर्मी तथा यैक्सीन एवं लॉजिस्टिक दोनों उपलब्ध नहीं हैं। B= ए.एन.एम. ∕ टीकाकरण कर्मी उपलब्ध हैं परंतु यैक्सीन एवं लॉजिस्टिक उपलब्ध नहीं हैं। C= यैक्सीन एवं लॉजिस्टिक उपलब्ध हैं परंतु ए.एन.एम. ∕ टीकाकरण कर्मी उपलब्ध नहीं हैं। ,D-अन्य (विवरण दें)

^{# (}प्र. 3): वैकल्पिक साधन- किसी अन्य साधन से वैक्सीन/लॉजिस्टिक पहुंचाना

उन सभी अधिकारियों हेतु जिन्हें इस कार्य का पर्यवेक्षण करना है

| जनपद का नाम | ब्लाक प्रा०स्वा०केन्द्र |
|----------------------|-------------------------|
| अधिकारी का नाम/पदनाम | दिनांक |
| | |

ग्राम स्वास्थ्य एवं स्वच्छता समिति

| क्रम | पर्यवेक्षण हेतु बिन्दु | गांव / ग्राम पंचायत १ | गांव/ग्राम पंचायत 2 |
|--|---|--------------------------|------------------------|
| 1 | प्रधान एवं सम्बंधित ए०एन०एम० का नाम | | |
| MALLE BALLETON TO THE THREE TH | क्या समिति में सभी मजरों / पुरवा / हेम्लेट से प्रतिनिधित्व है। | | |
| maken kakakaka a a sa maranga mpa ngi adapana. | क्या ग्राम स्वास्थ्य एवं स्वच्छता समिति को इस वर्ष में अन्टाइड फण्ड प्राप्त हुआ। | | |
| p - p - p - p - p - p - p - p - p - p - | क्या ग्राम स्वास्थ्य एवं स्वच्छता समिति का बैठक रजिस्टर बना है। | | |
| our manufacturi (manufacturi (m | ग्राम स्वास्थ्य एवं स्वच्छता समिति की पिछले 6 माह में कितनी बैठकें की गयी है। | | |
| | क्या ग्राम स्वास्थ्य कार्ययोजना बनी है। | | |
| | क्या ग्राम स्वास्थ्य एवं स्वच्छता समिति का व्यय विवरण रखा जा रहा है। | | |
| | क्या ग्राम स्वास्थ्य एवं स्वच्छता समिति द्वारा अन्टाइड फण्ड का प्रयोग किया जा रहा है। | | |
| | ग्राम स्वास्थ्य एवं स्वच्छता समिति द्वारा अन्टाइड फण्ड का प्रयोग किन-किन गतिविधियों में किया गया है। | | |
| 2. | क्या बैठक की पूर्व सूचना सभी सदस्यों को थी। | | |
| apolitica de l'apolitica de l'apolit | बैठक में उपस्थित सदस्यों की संख्या | | |
| | क्या समिति सदस्यों को अन्टाइड फण्ड के प्रयोग की जानकारी है। | | |
| au jų palainininininininininininininininininini | क्या समिति के सदस्यों को अपनी भूमिका की जानकारी है। | | |
| dispussion and control of the contro | क्या समिति बैठक की शुरूआत गत बैठक की समीक्षा से की गयी थी। | | |
| an inadepunit for formation | क्या समिति द्वारा स्वास्थ्य सेवाओं की समीक्षा व मूल्यांकन किया जा है। | | |
| | क्या बैठक में ग्राम स्वास्थ्य कार्ययोजना की समीक्षा की गयी। | | |
| | क्या समिति में प्रस्ताव रखने में सभी सदस्यों की सक्रिय भागीदारी रहीं। | | |

ब्लाक एच०ई०आई०ओ० / जिला कम्युनिटी मोबिलाइजर अपना भ्रमण योजना टीकाकरण माइक्रोप्लान के अनुसार बनाएं। जिला कार्यका प्रवन्धक द्वारा अनुगत काराया भाग कि इस भाहकी सभी वैश्वे प्रवी हो गई हैं।



| *** | | | | | | | | | | |
|--------------|---|--|--|--|--|--|--|--|--|--|
| Indicators | Knowledge and Awareness Households | great. | 2 | ო | 4 | N | Ç | r | α | Total |
| | | (Y/N) | CV/N | (V/V) | (V/N) | S/N | 2 | 5/80 | 3 | |
| l. Breast | Is the mother aware that Breast feeding (BF) must be | and decomposition of the second | | (i., / -) | 7.7.7 | Car / E | (N/12) | N/E | (N/X) | |
| Feeding | initiated within one hour after birth? | 7 | - | 7 | *** | | | W _b | | |
| | Did the mother Initiate BF within one hour of birth? | 1 | - 4 | - | | 1 | 9 | The second secon | | réstére la mandomorpo por de un |
| | Is the mother aware that Exclusive Breast feeding should | | The last of the la | 7 | | | | | The second contract of | Appropriation of the control of the |
| | be done for Six months and continued till child attains age | 160 | T [*] | i. | | | | | ······································ | |
| | of 2 years? | | | | | | | Ty. | ridd Archertov v coo | |
| | Has the mother Exclusively Breast fed her youngest child | The second secon | | | American mental and property of the property of the second | | | | | and of the special management of the special of |
| | for Six months and continued BF till 2 years? | ~ 4 | 71., ,e' | > | | 4 | Ī | ************************************** | College (Annual College annual Colle | |
| 2. Complemen | Is she aware about initiating Complementary Feeding | | | | en description delivering and a second and a | PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRE | | | | |
| tary Feeding | (CF) from 6 months onwards? | ~ | | 4. | No. | Nys. | | 10, | ************************************** | |
| Practices | Has she adhered to initiating CF from 6 months onwards? | > | 2 | The second secon | * * | F. | | | - Control of the Cont | Andreio jamen popularina madawa k |
| 3. Diarrhoea | Does the mother know that ORS+ Zinc needs to be given | | | | | | | 7ng. | | |
| 400000 | to child with diarrhoea? | 7 | angle | Z | g-2 | on. | ~. 2 | Sing Si | | |
| | As per mother, is ORS+ Zinc available with ASHAs? | 17 | | 2. 15 | | - No. | - | S. S. S. | - | HELOVICA HELOVICA HAZING HAZIN |
| 4. Pneumonia | Can mother tell at least two danger signs of pneumonia? | 7 | 1 | 7 | | 7 | | | | Mark of temporary and temporary of the second |
| | Is she aware whom to annroach on recognizing the dones. | - | | | | | Company of the Control of the Contro | | | And the state of t |
| | signs? | 7 | ~ | *** | À | 70., | 297,0 | 5-, v | 904-935m0,-ux+9 | |

| | 1221 | 128 | 1 1 2 2 3 1 2 1 2 | | 2.0 } | | | - | |
|--|-------------|--|--|--|--|--|---|--|--|
| Kay Onothon A | | | | | F. S. J. S. | *************************************** | - Andrews and the state of the | terik de der demokretationskipping op 1800 bet | O Biological de la company de |
| Households | | N | ന | 4 | M | 9 | _ | 000 | Total (|
| A | (Y/N) | (Y/N) | N/N | (N/A) | S/S | (N/V) | CV /WD | (N/ 2) | * |
| Is the MCP card being regularly filled? * | 7 | 7 | | | | C. S. | | (N/I) | the experimental section of the sect |
| Is the quality of ANC and regularity of ANCs adequate? * | * | | | and the same of th | , | - | | | |
| | | | <_ | - | ************************************** | e. | 200 | | |
| IS the pregnant woman aware about birth preparedness? | 1 | 1 2 | 1 | | 7.5 | | * | One design of the second statement of the second se | d transfer (self-regis frameware measure desapo de propositiones anos |
| Does the pregnant woman have knowledge of JSY and JSSK? | - 1 | 7 7 | 4 1 | | | | | | |
| Whether the pregnant woman has received safe motherhood booklet? | | and the second s | Th. | | | - The second sec | * | | |
| Does the pregnant woman have the telephone number of call center for | | | | | | | | and the second s | A STATE A COMMERCIAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS |
| referral transport/ other available referral transport? | > | Deg. | Ar _{te} | 7 | 4. | | *4. | | |
| Does the pregnant woman have talenhous much of ACTIA / ASIA | | Name and Associate Associa | The state of the s | and the state of t | The state of the s | | | | |
| | > | dro. | 5 | | | | ***** | | |
| IS guidance and referral provided along with birth preparedness in case of high risk pregnant woman? | > | | | | | | | | |
| | ~ | | | | A Commence | - | | in on p | |

*(Probe by questions and verify through filled up MCP card)

