



## National Rural Health Mission, Uttar Pradesh



### Visit to Public health institutions in Mainpuri District:

Date of visit: 26<sup>th</sup> to 28<sup>th</sup> September, 2013

#### Team Composition:

1. Dr MC Verma, JD (Admin), Directorate of Medical & Health , U.P.
2. Mahendra Kumar Maurya, Technical Consultant (Maternal Health), SPMU- NRHM, Uttar Pradesh, Lucknow.
3. Akhilesh Srivastava, Program Coordinator (FW), SPMU- NRHM, Uttar Pradesh, Lucknow.

**Name of Health Facility:** Sub Center Rakari (L-1 Health facility).

**General information:** Located at a distance of 15 KM from PHC Sultanganj, this S/C has catchment population of 12,612. One regular ANM is posted to run this center. Running water facility not available, Hand pump is the single source of water. Electricity without power back up, ANM quarter available and ANM stays in the quarter. On an average, 15-25 deliveries are conducted every month.

#### Observation reported and suggestion for filling the gap:

Observation reported	Suggestion for filling the gap
<b>Labour Room:</b> Labour room was found neat and clean. 10*10 sq ft. space not available to place each delivery table, Two Labour table placed in LR without mattress, Mackintosh sheet and Kelly's pad. Tiling done on whole floor & also on wall up to six feet. No mesh in window though good quality curtain was placed. No elbow operated tap installed. Clean toilet facility available with labour room.	Sub Center's AMG should be utilized to prioritize following civil work in phase manner: Mesh should be placed in the Window. Elbow operated tap should be installed in labour room. Procurement of Macintosh sheet and two sets of mattress and Kelly's pad need to be done using the U/F of Sub center.
<b>Status of Trays placed in Labour room:</b> Only one Tray was found in which Tab. Cotrimoxazole, Tab Albendazole, PCM and a few items of Medicine Tray (e.g. Inj. Oxytocin, Tab Metronidazole 400 mg , Inj Methylergometrine) were kept.	Ideally, there should be four trays i.e. Delivery Tray, Episiotomy tray, Baby tray and Medicine tray and all drugs & consumables pertaining to concerned tray must be kept as per criteria at L-1 MCH facility. Maternal & Newborn Health Tool Kit has been shared with the MO I/C to take corrective measures at each delivery point as per guideline.
<b>Newborn Care Corner :</b> Baby weighing tray, mucus extractor available. Radiant heat warmer/ other warmer not available in NBCC. Ambu bag and mask was found functional.	200 Watt bulb with a protection cover should be placed in NBCC in case of unavailability of Radiant heat warmer.
<b>BMW Management:</b> Placenta pit available with broken cover. General wastes are being dumped opposite to the sub center's building. No sharp waste pit available to dispose immunization waste.	One <u>triangle shaped lid with a handle</u> should be constructed to cover the open part of the Placenta pit & one Immunization pit should also be constructed in the premises of the S/C. Puncture



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No Puncture proof container placed in immunization room. Hub cutter was found functional.	proof container should be placed in immunization room. Colour coded bins should be placed in labour room and immunization room for ensuring proper infection prevention & BMW management practices.
<b>Status of Training:</b> Regular ANM has received training in IUCD insertion and Immunization.	Training on SBA should be prioritized for the ANM as the facility has good case load.
<b>Quality parameters:</b> Pregnancy testing kits were found. No test kits available to measure Hb, urine albumin and protein. Partograph is not being plotted.	Test kits/ Strips for Hb and urine tests should be procured and be used for every ANC.
<b>IEC:</b> Citizen charter not displayed, Very good IEC done for sensitization on ANC & immunization, Immunization schedule mentioned through wall writing, Timing of S/C also not mentioned, No SBA protocol posters displayed in LR.	Proper IEC should be done to address the identified gaps.
<b>Record keeping:</b> Registers and other documents were found well maintained. New standard registers are to be introduced yet.	Standard registers for delivery points 2013-14 has been shared with the DPM, ACO-MRHM & CMO for its application and mandatory use at all L1, L2 & L3 Delivery points as per condition.
<b>Implementation of JSY &amp; JSSK:</b> No JSY form pending at Sub Center level. JSSK being implemented as per guideline.	N.A.
<b>Utilization of RKS Fund:</b> RKS grant for 2013-14 has to be received.	Grant release is under process at district level as informed by district level officers of NRHM.

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**Name of Health Facility:** PHC Sultanganj (L-2 Health facility).

**General information:** Located at a distance of 15 KM from the district headquarter, this PHC has catchment population of 1,80,209. PHC is currently functioning in an old building established in 1950. One MO I/C is posted to run this facility. No 2<sup>nd</sup> MO available. Only MO's quarter available. Minor civil work is required in the residential quarter of MOs. Electricity with power back up and running water facility available. On an average, 250-260 deliveries are conducted every month.

**Observation reported and suggestion for filling the gap:**

Observation reported	Suggestion for filling the gap
<p><b>Labour Room:</b> Functional Labour room with one toilet attached with adjacent room. Two labour table with Macintosh sheet available, 10*10 sq ft. space not available with each Labour table, Kelly's pad placed on the labour table without mattress. Tiled floor with tiling done on wall as per norm, No mesh placed in windows. Elbow operated tap not installed. Running water supply available. Civil work is required in the area demarcated for hand washing.</p> <p><b>Status of Trays placed in Labour room:</b> Only one tray was placed in the LR to keep all drugs and injectables. Drugs found in the tray were: Inj. Atropine, Inj. Avil, Inj Tramadol, Inj. Methylergometrine, Inj Dexamethasone, Inj Metoclopramide, Inj Gentamycine, drip set, intracath etc.</p> <p>The provision of placing 'Six Trays' in LR was not found in practice.</p>	<p>Following work needs to be prioritized in phase manner: Mattress must also be placed on all labour Tables. Elbow operated taps to be installed after doing required civil work in the area demarcated for hand washing in LR.</p> <p>Ideally, there should be six trays i.e. Delivery Tray, Episiotomy tray, Baby tray, Medicine tray, Emergency drug tray and MVA/ EVA tray at L-2 facility. All drugs &amp; consumables pertaining to concerned tray must be kept as per criteria. Maternal &amp; Newborn Tool Kit has been shared with the MO I/C to take corrective measures at each delivery point as per guideline.</p>
<p><b>Newborn Care Corner:</b> Baby weighing tray, Ambu bag and mask available, No radiant heat warmer available. A 200 Watt bulb without protection cover was placed as a substitute to the warmer.</p> <p><b>New Born Care Corner</b> of 2.5*1.5 size written on the wall.</p>	<p>One Radiant heat warmer should be procured for NBCC as the facility has good case load. Mucus extractor should also be kept in NBCC.</p>
<p><b>BMW Management &amp; adherence to IMEP protocols:</b> The process of Proper segregation and disinfection is not in practice. BMW is collected once in a week by an agency hired for the purpose. No Puncture proof container placed in immunization room. Hub cutter was found</p>	<p>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 the attendant of clients.</p>

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functional.	
<b>Status of Training:</b> No ANM/Staff Nurse is trained in SBA, NSSK. Only one ANM has received training in IUD insertion and Immunization.	Every staff posted in labour room must be given training on SBA, IUCD insertion and NSSK.
<b>Quality parameters:</b> Lab equipments were found functional. Haemoglobinometer available to measure Hb at PHC level, Pathological services being rendered. Only pregnancy test kits were available. No test kits available to measure urine albumin and sugar. Partograph is not being plotted.	Focus should be laid on preparation of partograph during the training of ANMs/ SNs. Semi auto Analyzer needs to be procured using RKS grant. RI guidelines should be pursued strictly.
<b>IEC:</b> PHC's Landmark placed near approaching roads, No SBA protocol posters displayed in LR, JSY wall writing done JSSK entitlements fully displayed. IEC pertaining to newborn care i.e. colostrums feeding, exclusive breast feeding displayed properly at the entrance of labour room and in PNC wards. List of available medicines written on a board using chalk. No EDL board placed.	SBA Protocol posters should be displayed in LR. EDL board to be placed properly by mentioning the generic name of drugs.
<b>Implementation of JSY &amp; JSSK:</b> Bearer cheques are still being issued to JSY beneficiaries. Three JSY cheques of past ten days were lying at PHC as beneficiaries had absconded immediately after delivery. JSSK is being implemented as per guideline. Cooked food is being served to beneficiaries through a hired agency. Dropback is being ensured by one vehicle. Drugs and consumables and diagnostics are being provided free of cost to beneficiaries. Procurement of drugs and consumables and diagnostics has not been done using the grant of JSSK.	The district has to ensure the release of A/C payee cheques to all JSY beneficiaries at each level. Procurement of drugs and consumables and diagnostics must be procured using the grant of JSSK.

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Name of Health Facility: CHC Kurawali (Potential L-3 Health facility)

(To be upgraded as Functional FRU –CHC)

**General information:** Located at 25 KMs away from the district headquarter, this Potential FRU has catchment population of 2.13 lakh. One Gynaecologist & Anaesthetist has to be posted in order to run this facility as L-3 MCH Center. Staff and MO's quarter available. Minor civil work required in MOs residence. Electricity with power back up available. Running water facility also available. On an average, 165- 180 deliveries are conducted every month.

**Observation reported and suggestion for filling the gap:**

Observation reported	Suggestion for filling the gap
<p><b>Labour Room:</b> Three labour tables with Macintosh sheet &amp; Kelly's pad available, 10*10 sq ft. space not available for each labour table. Mosaic floor with tiling done on wall as per norm, Mesh and curtain properly placed in windows. Elbow operated tap not installed. Running water supply available. Stepping stool placed with each labour table.</p> <p><b>Equipment/ accessories not available in LR:</b> Wall mounted thermometer, Brass V drape to collect blood and amniotic fluid, screen / partition between two tables.</p> <p><b>Status of Trays placed in Labour room:</b> All drugs and consumables were placed in two trays. Inj. Hydrazaline, Inj. Magsulf 50%, Inj. Adrenaline, Inj. Phenergan were not found in the medicine tray. MVA Tray &amp; PPIUCD tray not available. Use of Cord thread is still in practice in place of cord clamp.</p>	<p>Following work needs to be prioritized in phase manner: Mattress should be supplied for each labour table. Refrigerator should be placed in LR for keeping Inj. Oxytocin.</p> <p>Ideally, there should be seven trays i.e. Delivery Tray, Episiotomy tray, Baby tray, Medicine tray, Emergency drug tray, MVA/ EVA tray and PPIUCD tray at L-3 facility. All drugs &amp; consumables pertaining to concerned tray must be kept as per criteria. Maternal &amp; Newborn Tool Kit has been shared with the ACOMO &amp; In-charge of the facility to take corrective measures at each delivery point as per guideline.</p>
<p><b>OT:</b> OT is currently being used only for conducting laparoscopic sterilization. Complete tiling done on whole floor, Tiling not done on wall, AC to be installed, No slab with granite top, hand washing area with elbow operated tap available. Boyle's anaesthetic machine not available. BMW Mgt with colour coded bins to be made functional.</p>	<p>Tiling up to roof level to be done. Boyle's anaesthetic machine to be procured in order to run the existing OT for regular obstetric procedures. Record must be kept for regular fumigation.</p>
<p><b>Newborn Care Corner:</b> Baby weighing tray, Ambu bag and mask,, Laryngoscope and endotracheal intubation tubes, feeding tubes and Mucus</p>	<p>The Superintendent of CHC is a Paediatrician and has maintained very good NBCC by taking personal interests.</p>



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Extractor available. Two radiant heat warmer along with two phototherapy machines available at NBCC. <b>New Born Care Corner</b> of 2.5*1.5 size written on the wall.	
<b>Laboratory:</b> Functional with one monocular and binocular microscope, haemoglobinometers, centrifuge, reagents and testing kits available. Hb test of ANC cases being done for tracking of severe anaemia. 15 ANCs with severe anaemia have been tracked in this financial year by this laboratory.	Line listing of all ANC cases having Hb less than 7 gm % must be done. Hb testing must be done for all high risk pregnancies tracked by ANMs in outreach settings and its follow up be ensured by ANMs and ASHAs of concerned area.
<b>BSU/ Blood Bank:</b> Not available.	-----
<b>BMW Management &amp; adherence to IMEP protocols:</b> IMEP protocols not being followed strictly. Colour coded bins are not placed, coloured polythene is being used to distinguish the colour coding. Staff has to be oriented on BMW management especially segregation and disinfection. No Puncture proof container placed in immunization room. BMW is being collected once in every week by an agency hired for the purpose.	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.
<b>IEC:</b> CHC's Landmark placed near approaching roads, No SBA protocol posters displayed in LR, JSY wall writing done. JSSK entitlements displayed. IEC pertaining to colostrums feeding, exclusive breast feeding displayed in PNC ward.	SBA protocol posters need to be displayed in LR.
<b>Implementation of JSY:</b> A total of 14 JSY cheques pending since 20.09.2013 as these beneficiaries absconded within 3 to 4 hours after delivery. Bearer cheques are still being issued.	JSY cheques (A/C payee) should be handed over to the beneficiaries before discharge from the health facility.
<b>Implementation of JSSK:</b> Cooked diet being given through an agency hired by the facility, Dropback being done by a hired vehicle, Drugs and consumables, diagnostics are being provided free of cost to beneficiaries using the state budget.	As discussed with the district level officers while visiting the health facility, procurement of drugs and consumables, diagnostics has to be done using the grant of JSSK.
<b>Utilization of RKS Fund:</b> No expenditure done. Work plan has been approved by the DHS and expenditure likely to start from this month.	RKS fund of FY 2013-14 should be used to address above identified gaps.



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**Name of Health Facility:** FRU DWH Mainpuri (L-3 Health facility).

**General information:** Located at district headquarter; this FRU has catchment population of 18.47 lakh. One OBG Specialist and one Paediatrician (contracted under NRHM) are available as Specialist MO at this facility. Services of Anaesthetist are taken by hiring on case basis as and when required. One LMO having MBBS is posted under NRHM. Staff quarter not available, nursing hostel available at DH for the staff of DWH too. Electricity with power back up available, running water facility also available. On an average, 350- 370 deliveries are conducted every month including 2 to 3 caesarian deliveries.

**Observation reported and suggestion for filling the gap:**

Observation reported	Suggestion for filling the gap
<p><b>Labour Room:</b> Proper cleanliness was maintained in the LR. Four labour tables placed with stepping stool, Macintosh sheet &amp; pillow available, 10*10 sq ft. space not available for each labour table, Kelly's pad was not placed on two labour tables. Tiling was done on floor only. No tiling done on wall. Elbow operated tap not installed. Running water supply available in labour room.</p> <p><b>Equipment/ accessories not available in LR:</b> Wall mounted thermometer, Brass V drape to collect blood and amniotic fluid, screen / partition between two tables.</p> <p><b>Status of Trays placed in Labour room:</b> One big tray was placed in LR in which all drugs and injectables were placed. Drugs and injectables not found in the tray are: Inj. Vitamin K, Inj. Hydrazaline, Inj. Magsulf 50%, and nasogastric tube. MVA &amp; PP IUCD services are being rendered by the CMS. Trays related to both these services were not kept in the LR.</p>	<p>Following work needs to be prioritized in phase manner: Tiling on wall should be done up to six feet. Kelly's pad should be supplied for each labour table. Refrigerator should be made available to keep the Inj. Oxytocin.</p> <p>Ideally, there should be seven trays i.e. Delivery Tray, Episiotomy tray, Baby tray, Medicine tray, Emergency drug tray and MVA/ EVA tray and PPIUCD tray at L-3 facility. All drugs &amp; consumables pertaining to concerned tray must be kept as per criteria. Maternal &amp; Newborn Tool Kit has been shared with the Staff Nurses, LMO and CMS of the facility to take corrective measures at this delivery point.</p>
<p><b>OT:</b> Two OT tables were placed in OT. Three ACs functional, Tiling was done on floor only, tiling up to roof level to be done, No slab with granite top, hand washing area with elbow operated tap available. BMW Mgt with colour coded bins to be made functional. NBCC was also found functional in OT.</p>	<p>Pulse oxymeter to be procured, Record must be kept for regular fumigation.</p>
<p><b>Newborn Care Corner:</b> Baby scale, Baby weighing tray, Ambu bag and mask and Mucus Extractor available. Three radiant heat warmer and one Laryngoscope available LR.</p>	<p>Feeding tubes should also be placed in the NBCC.</p>



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<b>New Born Care Corner</b> of 2.5*1.5 size written on the wall.	
<b>Laboratory:</b> Functional with one monocular and one binocular microscope, haemoglobinometers. centrifuge available, functional Ultrasound scanners available. Tests for Hb, urine albumin and sugar, blood sugar, HIV (RDT) being done.	Line listing of all ANC cases having Hb less than 7 gm % must be done and its follow up be ensured by ANMs and ASHAs of concerned area.
<b>Blood Bank:</b> Functional at DH.	-----
<b>BMW Management &amp; adherence to IMEP protocols:</b> IMEP protocols not being followed strictly. Colour coded bins are not placed, coloured polythene is being used to distinguish the colour coding. Staff has to be oriented on BMW management especially segregation and disinfection. No Puncture proof container placed in immunization room. BMW is being collected once in every week by an agency hired for the purpose.	Puncture proof container should be placed in immunization room. Colour coded bins as per IMEP norms 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.
<b>Quality parameters:</b> Partograph is not being plotted.	Training on SBA needs to be done to ensure the use of partograph for each case.
<b>IEC:</b> Hospital's landmark placed near approaching roads, No SBA protocol posters displayed in LR, JSY wall writing done. JSSK entitlements also displayed. IEC pertaining to colostrums feeding, exclusive breast feeding displayed in PNC ward.	SBA protocol posters need to be displayed in LR.
<b>Implementation of JSY:</b> Bearer cheques are being issued.	As beneficiaries are staying at this facility up to 20 hours, JSY cheques (Account payee) need to be handed over to the beneficiaries before discharge.
<b>Implementation of JSSK:</b> Cooked diet being given free of cost, two vehicles are providing free dropback services, Diagnostics and drugs and consumables are also being provided free of cost to beneficiaries using state's budget.	Diagnostics and drugs and consumables should be procured using the grant of JSSK.
<b>Utilization of RKS Fund:</b> Rs. 2.5 lakh has been received by the facility in FY 2013-14. No expenditure done but plan for expenditure is ready for approval by the DHS.	RKS fund of FY 2013-14 should be utilized on priority basis to address above identified gaps.

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**Monitoring of RI session at Primary School , Khutara**

1. Session was being organized as per microplan.
2. ASHA was engaged in mobilising the ANC cases and children for immunization.
3. Vaccine & other logistics were supplied to the vaccination site by the ANM.
4. All vaccines and diluent were kept in Vaccine carrier of four ice pack capacity inside a zipper bag and cold chain was also maintained.
5. No vaccine vial was found without VVM.
6. Functional hub cutter, list of expected beneficiaries, ORS packet and IFA tablets were found at immunization site. Red and black bags were not available on the site of immunization.
7. DPT and Hep B was being administered in anterolateral aspect of mid thigh properly.
8. Syringe was being cutted immediately after use with the help of functional hub cutter.
9. Tally sheet was being filled after administration of each vaccine to beneficiaries.
10. Counterfile was being updated after each vaccination.

Four important messages i.e. vaccine administered today, side effects of vaccine administered, next vaccination due and date and time of next session were being communicated to beneficiaries.



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### Village Health, Sanitation and Nutrition Committee (VHSNC):

Sr. No.	Points for monitoring	VHSNC, Emanpur	VHSNC Kirthuwa
1.	Name of Pradhan & ANM	Sri Pramod (Pradhan), Ms Munni Devi Chauhan (ANM)	Sri Veer Pal Singh (Pradhan), Ms Munni Devi (ANM)
2.	Representation from all majra/ hamlet/ Purwa in the committee.	Yes	Yes
3.	VHSNC has received Untied fund this year.	No	No
4.	Meeting register available with VHSNC.	Yes	Yes
5.	No. of meetings held in past six months.	1 time earlier	Two times earlier
6.	Village Health Plan (VHP) prepared.	No	No
7.	Statement of expenditure (SoE) being maintained.	Yes	Yes
8.	Untied fund is being used by VHSNC	Yes	Yes
9.	Which activities accomplished by using the untied fund of VHSNC	Whitewashing of AWCs and construction of wormi-compost units	Whitewashing of AWCs and construction of wormi-compost units
10.	All Members were informed in advance about the meeting	Yes	Yes
11.	No. of mebers who attended the meeting	15	10
12.	Knowledge about utilization of untied fund amongst members	Yes	Yes
13.	Knowledge amongst members about their role in VHSNC	Yes	Yes

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14.	Meeting began with the review of points of last meeting	Yes	Yes
15.	Review and evaluation of health services being done by the committee	Yes	Yes
16.	Review of VHP done in the meeting	No	No
17.	Active participation of members in submitting their proposal in committee	Yes	Yes

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L-3  
functional - PRU



## DH level Monitoring Checklist

Name of District: Mainpuri Name of Block: urban Name of DH: District Women Hospital

Catchment Population: 1847194 Total Villages: 821

Date of last supervisory visit: 26.08.2013 by Dr. M.C. Verma sadar.

Date of visit: 26.09.2013 Name & designation of monitor: 1. Dr. M.C. Verma, JD-Admin  
2. Mahendra Mangar, TC-MH  
3. Akhilesh Srivastava (PC-PA)

Names of staff not available on the day of visit and reason for absence: 1. Dr. Kamlesh Kumar EMO on leave - medical leave since 1st Sep. 2013  
2. Mr. Ankit Singh LT. - PPTCT - on training at Aligarh Medical College.

## Section I: Physical Infrastructure:

3. Ms. Pushpa Raghav, ANM, (23-26 Sep. on CL) Since 23rd Sep. 2013

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	→ available only for male Hospital.
1.5	Habitable Staff Quarters for SNs	Y	N	→ Nursing hostel available at DH.
1.6	Habitable Staff Quarters for other categories	Y	N	
1.7	Electricity with power back up	Y	N	
1.9	Running 24*7 water supply	Y	N	
1.10	Clean Toilets 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	→ yes (available)
1.13	Functional New born care corner (functional radiant warmer with neo-natal ambu bag)	Y	N	2 Radiant warmer placed in L.R. & 1 in Obstetric O.T.
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	→ available at DH.
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	→ yes, Coloured plastic polythene are placed in buckets to resemble colour coding.





	Biomedical waste management (BMW) at facility			
1.24	BMW outsourced	<input checked="" type="checkbox"/>	N	
1.25	Availability of ICTC/ PPTCT Centre	<input checked="" type="checkbox"/>	N	
1.26	Availability of functional Help Desk	Y	<input checked="" type="checkbox"/>	PPTCT available staff facilities at concerned section.

## Section II: Human resource:

S. no	Category	Sanctioned	Numbers (In-P)	Remarks if any
2.1	OBG	3	1	
2.2	Anaesthetist	1	0	
2.3	Paediatrician	1	01 (From NRHM)	
2.4	General Surgeon	0	0	
2.5	Other Specialists	0	0	
2.6	MOs	2	1	
2.7	SNs	4	4	
2.8	ANMs	3	3	
2.9	LTs	1	1	
2.10	Pharmacist	3	4	
2.11	LHV	1	1	
2.12	Radiographer	0	0	
2.13	RMNCHA+ counsellors	2	2	
2.14	Others	0	0	

## Section III: Training Status of HR:

S. no	Training	No. trained	Remarks if any
3.1	EmOC	0	
3.2	LSAS	0	
3.3	BeMOC	0	
3.4	SBA	5	
3.5	MTP/MVA	1	
3.6	NSV	0	
3.7	F-IMNCI	0	
3.8	NSSK	0	
3.9	Mini Lap-Sterilisations	1	
3.10	Laprosopy-Sterilisations	1	
3.11	IUCD	6	
3.12	PPIUCD	1	
3.13	Blood storage	1	
3.14	IMEP	0	
3.16	Immunization and cold chain	1	



3.15	Others	0	
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**Section IV: Equipment:**

S. No	Equipment	Yes	No	Remarks
4.1	Functional BP Instrument and Stethoscope	✓	N	
4.2	Sterilised delivery sets	✓	N	
4.3	Functional Neonatal, Paediatric and Adult Resuscitation kit	✓	N	
4.4	Functional Weighing Machine (Adult and child)	✓	N	✓
4.5	Functional Needle Cutter	✓	N	
4.6	Functional Radiant Warmer	✓	N	
4.7	Functional Suction apparatus	✓	N	
4.8	Functional Facility for Oxygen Administration	✓	N	
4.9	Functional Foetal Doppler/CTG	✓	N	
4.10	Functional Mobile light	✓	N	→ one
4.11	Delivery Tables	✓	N	→ 4 tables.
4.12	Functional Autoclave	✓	N	
4.13	Functional ILR and Deep Freezer	✓	N	→ available at community vaccine is taken from this office.
4.14	Emergency Tray with emergency injections	✓	N	
4.15	MVA/ EVA Equipment	✓	N	
4.16	Functional phototherapy unit	✓	N	
4.17	<b>O.T Equipment</b>			
4.18	O.T Tables	✓	N	→ 2
4.19	Functional O.T Lights, ceiling	✓	N	
4.20	Functional O.T lights, mobile	✓	N	
4.21	Functional Anesthesia machines	✓	N	→ 1
4.22	Functional Ventilators	Y	✓	
4.23	Functional Pulse-oximeters	Y	✓	
4.24	Functional Multi-para monitors	✓	N	
4.25	Functional Surgical Diathermies	Y	✓	
4.26	Functional Laparoscopes	✓	N	→ 1
4.27	Functional C-arm units	Y	✓	



4.28	Functional Autoclaves (H or V)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	available. Non-electric is being used. → 1 bid 1 mono. (functional)
	<b>Laboratory Equipment</b>			
4.1a	Functional Microscope	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4.2a	Functional Hemoglobinometer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4.3a	Functional Centrifuge	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4.4a	Functional Semi autoanalyzer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4.5a	Reagents and Testing Kits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4.6a	Functional Ultrasound Scanners	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
4.7a	Functional C.T Scanner	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4.8a	Functional X-ray units	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4.9a	Functional ECG machines	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

## Section V: Essential Drugs and Supplies:

S.No	Drugs	Yes	No	Remarks
5.1	EDL available and displayed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	not applicable  Inj Magnesium is taken from D.H.
5.2	Computerised inventory management	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5.3	IFA tablets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.4	IFA tablets (blue)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5.5	IFA syrup with dispenser	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5.6	Vit A syrup	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.7	ORS packets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.8	Zinc tablets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.9	Inj Magnesium Sulphate	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5.10	Inj Oxytocin	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.11	Misoprostol tablets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.12	Mifepristone tablets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.13	Availability of antibiotics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.14	Labelled emergency tray	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.15	Drugs for hypertension, Diabetes, common ailments e.g PCM, anti-allergic drugs etc.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5.16	Vaccine Stock available	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
S.No	Supplies	Yes	No	Remarks
5.17	Pregnancy testing kits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	available at PPC.
5.18	Urine albumin and sugar testing kit	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.19	OCPs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5.20	EC pills	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5.21	IUCDs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5.22	Sanitary napkins	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
S.No	Essential Consumables	Yes	No	Remarks
5.23	Gloves, Mckintosh, Pads, bandages, and gauze etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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	<input checked="" type="checkbox"/>	N	
6.2	CBC	<input checked="" type="checkbox"/>	N	
6.3	Urine albumin and sugar	<input checked="" type="checkbox"/>	N	
6.4	Blood sugar	<input checked="" type="checkbox"/>	N	
6.5	RPR (Rapid Plasma Reagin) test	<input checked="" type="checkbox"/>	N	
6.6	Malaria (PS or RDT)	<input checked="" type="checkbox"/>	N	
6.7	T.B (Sputum for AFB)	<input checked="" type="checkbox"/>	N	
6.8	HIV (RDT)	<input checked="" type="checkbox"/>	N	
6.9	Liver function tests(LFT)	<input checked="" type="checkbox"/>	N	
6.10	Ultrasound scan (Ob.)	<input checked="" type="checkbox"/>	N	
6.11	Ultrasound Scan (General)	<input checked="" type="checkbox"/>	N	
6.12	X-ray	<input checked="" type="checkbox"/>	N	
6.13	ECG	<input checked="" type="checkbox"/>	N	
6.14	Endoscopy	<input checked="" type="checkbox"/>	N	
6.15	Others , pls specify	<input checked="" type="checkbox"/>	N	
S.No	Blood bank / Blood Storage Unit	Yes	No	Remarks
6.16	Functional blood bag refrigerators with chart for temp. recording	<input checked="" type="checkbox"/>	N	50 bag capacity blood bag refrigerator available & being used for collection of bld & brought from D.H.
6.17	Sufficient no. of blood bags available	<input checked="" type="checkbox"/>	N	
6.18	Check register for number of blood bags issued for BT in last quarter	<input checked="" type="checkbox"/>	N	

**Section VII: Service Delivery in last two quarters:**

S.No	Service Utilization Parameter	Q1	Q2	Remarks
7.1	OPD	12560	16491	
7.2	IPD	2462	3612	
7.3	Expected number of pregnancies	716	1050	
7.4	No. of pregnant women given IFA	12560	16491	
7.5	Total deliveries conducted	787	1329	
7.6	No. of assisted deliveries( Ventouse/ Forceps)	297	391	
7.7	No. of C section conducted	2	5	
7.8	Number of obstetric complications managed, pls specify type	0	0	
7.9	No. of neonates initiated breast feeding within one hour	766	1297	
7.10	Number of children screened for Defects at birth under RBSK	0	0	
7.11	RTI/STI Treated	236	958	
7.12	No of admissions in NBSUs/ SNCU, whichever available	0	0	
7.13	No of admissions :Inborn	0	0	
7.14	No of admissions :Outborn	0	0	
7.15	No. of children admitted with SAM	0	0	



7.16	No. of sick children referred	2	8
7.17	No. of pregnant women referred	11	3
7.18	No. of IUCD Insertions	144	193
7.19	No. of Tubectomy	11	12
7.20	No. of Vasectomy	0	0
7.21	No. of Minilap	0	0
7.22	No. of children fully immunized	5295	6568
7.23	Measles coverage	387	732
7.24	No. of children given ORS + Zinc	0	0
7.25	No. of children given Vitamin A	535	740
7.26	No. of women who accepted post-partum FP services	0	3
7.27	No. of MTPs conducted in first trimester	97	147
7.28	No. of MTPs conducted in second trimester	0	0
7.29	Number of Adolescents attending ARSH clinic	0	0
7.30	Maternal deaths, if any	1	0
7.31	Still births, if any	0	16
7.32	Neonatal deaths, if any	0	0
7.33	Infant deaths, if any	0	0

## Section VII a: Service delivery in post natal wards:

Section VII a: Service delivery in post natal wards:				
S.No	Parameters	Yes	No	Remarks
7.1a	All mothers initiated breast feeding within one hour of normal delivery	Y	N	20-24 hr. stay reported at DWH.
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)	bearer cheque is being given.		
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	
				cooked food is being given.

JSYK : ✓ Diet — cooked.

✓ Drop back — ~~2~~ 2 vehicles provided by the CMO

✓ Drugs & consumables → free (worry state budget, no fund used from JSYK head)

✓ Diagnostics → free



### 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	✓	N	
8.2	Provide essential newborn care (thermoregulation, breastfeeding and asepsis)	✓	N	
8.3	Manage sick neonates and infants	Y	✓	→ Care taken by the paediatrician.
8.4	Correctly uses partograph	Y	✓	
8.5	Correctly insert IUCD	✓	N	
8.6	Correctly administer vaccines	✓	N	
8.7	Segregation of waste in colour coded bins	Y	N	→ bins placed but Polythene plastics are being used for coding of colour.
8.8	Adherence to IMEP protocols	Y	✓	
8.9	Bio medical waste management	✓	N	→ through hired agency, waste is being collected once in a week.
8.10	Updated Entry in the MCP Cards	✓	N	
8.11	Entry in MCTS	✓	N	
8.12	Corrective action taken on Maternal Death Review finding	✓	N	→ APH due to unknown Cause was reported in a MD and has been shared with blocks during the review.

### Section IX: Record Maintenance:

S. no	Record	Available and Updated and correctly filled	Available but Not maintained	Not Available	Remarks/Timeline for completion
9.1	OPD Register	yes			
9.2	IPD Register	yes			
9.3	ANC Register	yes			
9.4	PNC Register	—	—	—	
9.5	Indoor bed head ticket	yes			
9.6	Line listing of severely anaemic pregnant women	yes			
9.7	Labour room register	yes			
9.8	Partographs	—	—	✓	
9.9	FP-Operation Register (OT)	yes			
9.10	OT Register	yes			
9.11	FP Register	—	—	—	
9.12	Immunisation Register	yes			
9.13	Updated Microplan	yes			
9.14	Blood Bank stock register	—	—	—	
9.15	Referral Register (In and Out)	yes			
9.16	MDR Register			✓	
9.17	Infant Death Review and Neonatal Death Review	—	—	—	
9.18	Drug Stock Register	yes			
9.19	Payment under JSY	yes			



9.20	Untied funds expenditure (Check % expenditure)	—	—	—	
9.21	AMG expenditure (Check % expenditure)	—	—	—	
9.22	RKS expenditure (Check % expenditure)	Revd. 2.5 lakh for 2013-14	—	—	

Plan is ready for submission to DHS.

### 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		No. of sick infants transported		No. of children 1-6 years		Free/Paid
			Q-1	Q-2	Q-1	Q-2	Q-1	Q-2	
10.1	Home to facility	Govt	320	619	0	0	0	0	free
10.2	Inter facility	—	0	0	0	0	0	0	free
10.3	Facility to Home (drop back)	O/S	296	448	0	0	0	0	free

### Section XI: IEC Display:

S.No	Material	Yes	No	Remarks
11.1	Approach roads have directions to the health facility	Y	N	
11.2	Citizen Charter	Y	N	
11.3	Timings of the health facility	Y	N	
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 ( Displayed in ANC Clinics/, PNC Clinics)	Y	N	
11.8	Immunization Schedule	Y	N	
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:

Sl. no	Services	Yes	No	Remarks
12.1	Regular Sterilisation –Labour Room (Check Records)	Y	N	on weekly basis. bleaching solution is used.
12.1 a	Regular Sterilisation –OT (Check Records)	Y	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	
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	Sri S.N. Yadav	<del>Sri</del> Deputy Collector	26.08.2013
13.2		Sadar	
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
<p>① Mattress &amp; macintosh sheets are not in use in L.R.</p> <p>② The concept of 7 Tray is not in practice.</p> <p>③ Only one Gynaecologist &amp; 1 LMO (BBS) Contr. is looking after all gynae/obs cases.</p> <p>④ <del>⑤</del></p>	<p>CMS has been updated about recent guidelines as laid down in the MNH booklet. All staff Nurses &amp; LMO have been oriented about the concept of '7 Tray' &amp; I.P. practices in labour room &amp; obstetric O.T.</p>	<p>CMS/ LMO/ Staff Nurses</p>	<p>by the end of November, 2013.</p>



# DWH, Mainpuri

## Labour room equipment and accessories

1. Labour table with mattress, sheet, pillow (numbers as per case load), Macintosh, Foot rest

4 Labour table /

2. Brass V drape to collect blood and amniotic fluid

3. Wall clock with seconds hand

4. Wall mounted thermometer

5. Suction apparatus

- 2

functional

6. Equipment for adult resuscitation

Oxygen facility

7. Equipment for neonatal resuscitation

Ambubag facilities available

8. Delivery trolley

- 2

9. IV drip stand

10. Screen/Partition between two tables

- yes

11. Stool for birth companion

- yes

12. Lamp - wall mounted or side

→ yes

Lamp with bulb available

13. Autoclave

14. Autoclave drums for instruments, linen, gloves, cotton, gauge, threads sanitary pads

✓ yes

- a. Autoclaved delivery set for each delivery

yes available in ~~Antep~~ Pathology)

15. Refrigerator

16. Sphygmomanometer, adult and newborn thermometer and newborn weighing machine

✓ yes

17. Consumables like gloves, apron, cotton, thread, gauze, sanitary napkins, catgut, IV drip sets, needle, cord clamp, medicines (injectable, oral and parenteral, leucoplast etc

18. Pulse oximeter

19. Sterilizer

20. Oxygen cylinder

21. Oxygen concentrator

22. Partograph

23. Delivery kit for HIV positive women

24. Labelled plastic jars for drugs and injectables with date of expiry written on them against each drug

25. Coloured bins for bio medical waste management

26. Hub cutter

27. Puncture proof container

28. Plastic tubs for 0.5% Chlorine solution

29. Intranatal protocols

30. Wheel chair/patient's trolley

31. 7 Trays: Delivery tray, Episiotomy tray, Medicine tray, Emergency drug tray, Baby tray, MVA tray, PPIUCD tray (see content below)

32. Hand-washing area and toilet for the admitted clients

33. Foeto-scope/Foetal Doppler

34. Stethoscope

35. Display of SBA quality protocols, and shadow less lamp.

36. Mosquito Repellent

yes

No

yes

→ f.D. available

→ No

No

plastics being used.

1 in L.Room, 1 in emergency

→ cases referred to Saifai Medical College

## Trays to be kept in Labour room

1. **Delivery tray:** Gloves, scissor, artery forceps, cord clamp, sponge holding forceps, urinary catheter, bowl for antiseptic lotion, gauze pieces and cotton swabs, speculum, sanitary pads, Kidney tray.
2. **Episiotomy tray:** Inj. Xylocaine 2%, 10 ml disposable syringe with needle, episiotomy scissor, kidney tray, artery forceps, allis forceps, sponge holding forceps, toothed forceps, needle holder, needle (round body and cutting), chromic catgut no. 0, gauze pieces, cotton swabs, antiseptic lotion, thumb forceps, gloves.
3. **Baby tray:** Two pre-warmed towels/sheets for wrapping the baby, cotton swabs, mucus extractor, bag & mask, sterilized thread for cord/cord clamp, nasogastric tube and gloves Inj. Vitamin K, needle and syringe. (Baby should be received in a pre-warmed towel. Do not use metallic tray.)
4. **Medicine tray:** Inj. Oxytocin (to be kept in fridge), Cap Ampicillin 500 mg, Tab Metronidazole 400 mg, Tab Paracetamol, Tab Ibuprofen, Tab B complex, IV fluids, Inj. Oxytocin 10 IU, Tab. Misoprostol 200 micrograms, Inj. Gentamycin, Vit K, Inj. Betamethason, Ringer lactate, Normal Saline, Inj. Hydrazaline, Nefedipin, Methyldopa, magnifying glass.
- (\* - Nevirapin and other HIV drugs only for ICTC and ART Centres)
5. **Emergency drug tray:** Inj. Oxytocin (to be kept in fridge), Inj. Magsulf 50%, Inj. Calcium gluconate-10%, Inj. Dexamethasone, Inj. Ampicillin, Inj. Gentamycin, Inj. Metronidazole, Inj. Lignocaine-2%, Inj. Adrenaline, Inj. Hydrocortisone Succinate, Inj. Diazepam, Inj. Pheneramine maleate, Inj. Carboprost, Inj. Fortwin, Inj. Phenergan, Ringer lactate, normal saline, Betamethazon Inj. Hydrazaline, Nefedipin, Methyldopa, IV sets with 16-gauge needle at least two, controlled suction catheter, mouth gag, IV Canula, vials for drug collection Ceftriaxone (3rd generation cephalosporins) - For L3 facility.
- (\*\* - only for L2, L3 facilities)
6. **MVA/ EVA tray:** Gloves, speculum, anterior vaginal wall retractor, posterior vaginal wall retractor, sponge holding forceps, MVA syringe and cannulas, MTP cannulas, small bowl of antiseptic lotion, sanitary pads, pads /cotton swabs, disposable syringe and needle, misoprostol tablet, sterilised gauze/pads, urinary catheter.
7. **PPIUCD tray**\*\*\* - PPIUCD Insertion Forceps, Cu IUCD 380A/ Cu IUCD 375 in a sterile package.
- (\*\*\* - only for L3 facilities with PPIUCD trained provider)

cord thread

## Equipment and accessories needed at NBCC

1. Baby tray
2. Paediatric stethoscope
3. Baby scale
4. Radiant warmer — 3
5. Self-inflating bag and mask—neonatal size (0 and 1)
6. Oxygen hood (neonatal)
7. Laryngoscope and Endotracheal intubation tubes — 1 set available in NBCC
8. Two set of pencil cell batteries (one is spare)
9. Mucus extractor with suction tube and a foot-operated suction machine NG tubes
10. Blankets
11. Two clean and dry towels
12. Feeding tubes
13. Empty vials for collecting blood
14. Alcohol handrub
15. HLD/sterile gloves

48 hr.  
PP- IUCD  
in practice  
↓  
by the  
CMS/  
DGO  
of the  
hospital.

CHC - Potential FRU → 3  
Potential FRU-CHC



## FRU level Monitoring Checklist

Name of District: Mainpuri Name of Block: Kurawali Name of FRU: Kurawali  
 Catchment Population: 213190 Total Villages: 97 Distance from Dist HQ: 25 KM  
 Date of last supervisory visit: last supervisory visit done by Dr. DB Singh, ACMO- RCH  
 Date of visit: (10.09.2013) Name & designation of monitor: Dr. MC Verma, ID-Admin  
→ 27.09.2013 Mahendra Maurya TC-MH  
 Names of staff not available on the day of visit and reason for absence: Akhilesh Srivastava PC-FP  
 ① Mr. Rameshwar Singh (H.S.) → Reason: Absconding since 17th July, 2013  
 ② Mr. Vinila Devi (W/S) → on EL since 16th Sep 2013.

## Section I: Physical Infrastructure:

S.No	Infrastructure	Yes	No	Additional Remarks
1.1	Health facility easily accessible from nearest road head	✓	N	minor civil work required in MOs residence.
1.2	Functioning in Govt building	✓	N	
1.3	Building in good condition	✓	N	
1.4	Habitable Staff Quarters for MOs	✓	N	
1.5	Habitable Staff Quarters for SNs	✓	N	
1.6	Habitable Staff Quarters for other categories	✓	N	
1.7	Electricity with power back up	✓	N	
1.8	Running 24*7 water supply	✓	N	
1.9	Clean Toilets separate for Male/Female	✓	N	
1.10	Functional and clean labour Room	✓	N	
1.11	Functional and clean toilet attached to labour room	Y	N	separated from Laban Room
1.12	Functional New born care corner (functional radiant warmer with neo-natal ambu bag)	✓	N	
1.13	Functional Newborn Stabilization Unit	Y	N	
1.14	Functional SNCU	Y	N	
1.16	Clean wards	✓	N	
1.17	Separate Male and Female wards (at least by partitions)	✓	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	

Buckets placed  
without colour  
coding.



collected by an  
agency (hired) once  
in a week.

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	Regular		Contractual (NRHM)	
		Sanctioned	Numbers (In-P)	Sanctioned	In-P
2.1	OBG	1	1	-	-
2.2	Anaesthetist	1	0	-	-
2.3	Paediatrician	1	1	-	-
2.4	General Surgeon	1	0	-	-
2.5	Other Specialists	1	0	-	-
2.6	MOs	2	3	3	3
2.7	SNs	3	2	4	4
2.8	ANMs	3	3	1	1
2.9	LTs	1	1	1	1
2.10	Pharmacist	2	3	-	-
2.11	LHV	4	4	-	-
2.12	Radiographer	1	1	-	-
2.13	RMNCHA+ counsellors	-	-	1	1
2.14	Others	-	-	-	-

### Section III: Training Status of HR:

S. no	Training	No. trained	Remarks if any
3.1	EmOC	0	24 S.N./4 ANM/1 LMO
3.2	LSAS	0	
3.3	BeMOC	0	
3.4	SBA	4	
3.5	MTP/MVA	1	
3.6	NSV	0	
3.7	F-IMNCI	0	
3.8	NSSK	3	
3.9	Mini Lap-Sterilisations	0	
3.10	Laprosocopy-Sterilisations	0	
3.11	IUCD	24 S.N./4 ANM/1 LMO	
3.12	PPIUCD	1	
3.13	Blood storage	0	
3.14	IMEP	0	
3.16	Immunization and cold chain	3	
3.15	Others	-	



## 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 child)	✓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 and Deep Freezer	✓Y	N	
4.11	Emergency Tray with emergency injections	✓Y	N	
4.12	MVA/ EVA Equipment	Y	N	
4.13	Functional phototherapy unit	✓Y	N	M.S. is a paediatrician: thus, personal interest is taken. 1 binocular functional & 1 monocular functional
<b>Laboratory Equipment</b>				
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	
4.18	Reagents and Testing Kits	✓Y	N	
<b>O.T Equipment</b>				
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	AC to be installed, Boyle's anaesthetic machine to be procured.
4.22	Functional Anesthesia machines	Y	N	
4.23	Functional Ventilators	Y	N	
4.24	Functional Pulse-oximeters	Y	N	
4.25	Functional Multi-para monitors	Y	N	
4.26	Functional Surgical Diathermies	Y	N	available at DH & taken for conducting lap ligation whenever required.
4.27	Functional Laparoscopes	Y	N	
4.28	Functional C-arm units	Y	N	
4.29	Functional Autoclaves (H or V)	✓Y	N	



### Section V: Essential Drugs and Supplies:

S.No	Drugs	Yes	No	Remarks
5.1	EDL available and displayed	✓	N	<p>not received under BSGY.</p> <p>stock finished.</p> <p>Adrenaline Inj not available.</p>
5.2	Computerised inventory management	Y	N	
5.3	IFA tablets	✓	N	
5.4	IFA tablets (blue)	Y	N	
5.5	IFA syrup with dispenser	Y	N	
5.6	Vit A syrup	✓	N	
5.7	ORS packets	✓	N	
5.8	Zinc tablets	✓	N	
5.9	Inj Magnesium Sulphate	Y	N	
5.10	Inj Oxytocin	✓	N	
5.11	Misoprostol tablets	Y	N	
5.12	Mifepristone tablets	Y	N	
5.13	Availability of antibiotics	✓	N	
5.14	Labelled emergency tray	✓	N	
5.15	Drugs for hypertension, Diabetes, common ailments e.g PCM, metronidazole, anti-allergic drugs etc.	✓	N	
5.16	Vaccine Stock available	Y	N	Remarks
S.No	Supplies	Yes	No	
5.17	Pregnancy testing kits	✓	N	
5.18	Urine albumin and sugar testing kit	✓	N	
5.19	OCPs	✓	N	
5.20	EC pills	✓	N	
5.21	IUCDs	✓	N	
5.22	Sanitary napkins	Y	N	Remarks
S.No	Essential Consumables	Yes	No	
5.23	Gloves, Mckintosh, Pads, bandages, and gauze etc.	✓	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 Services	Yes	No	Remarks
6.1	Haemoglobin	✓	N	
6.2	CBC	Y	N	
6.3	Urine albumin and sugar	✓	N	
6.4	Blood sugar	Y	N	
6.5	RPR (Rapid Plasma Reagin) test	Y	N	
6.6	Malaria (PS or RDT)	✓	N	
6.7	T.B (Sputum for AFB)	Y	N	
6.8	HIV (RDT)	Y	N	
6.9	Liver function tests(LFT)	Y	N	
6.10	Others , pls specify	Y	N	
S.No	Blood bank / Blood Storage Unit	Yes	No	Remarks



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 issued for BT in last quarter			

### Section VII: Service Delivery in last two quarters:

S.No	Service Utilization Parameter	Q1	Q2	Remarks
7.1	OPD	9667	16895	
7.2	IPD	844	1135	
7.3	Expected number of pregnancies	1432	1432	
7.4	No. of pregnant women given IFA	16440	15800	
7.5	Total deliveries conducted	313	420	
7.6	No. of assisted deliveries( Ventouse/ Forceps)	0	0	
7.7	No. of C section conducted	0	0	
7.8	Number of obstetric complications managed, pls specify type	0	0	
7.9	No. of neonates initiated breast feeding within one hour	313	420	
7.10	Number of children screened for Defects at birth under RBSK	—	—	
7.11	RTI/STI Treated	0	0	
7.12	No of admissions in NBSUs/ SNCU, whichever available	0	0	
7.12 a	Inborn	18	19	
7.12 b	Outborn	—	—	
7.13	No. of children admitted with SAM	—	—	
7.14	No. of sick children referred	0	9	
7.15	No. of pregnant women referred	0	109	
7.16	No. of IUCD Insertions	0	194	
7.17	No. of Tubectomy	10	6	
7.18	No. of Vasectomy	0	0	
7.19	No. of Minilap	0	0	
7.20	No. of children fully immunized	831	975	
7.21	Measles coverage	831	975	
7.22	No. of children given ORS + Zinc	—	—	
7.23	No. of children given Vitamin A	831	831	
7.24	No. of women who accepted post-partum FP services	0	41	
7.25	No. of MTPs conducted in first trimester	0	0	
7.26	No. of MTPs conducted in second trimester	0	0	
7.27	Number of Adolescents attending ARSH clinic	0	0	
7.28	Maternal deaths, if any	0	1	
7.29	Still births, if any	3	5	



7.30	Neonatal deaths, if any	0	0
7.31	Infant deaths, if any	0	0

### Section VII a: Service delivery in post natal wards:

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	✓	N	14 cheques pending since 20.09.2013. All clients absconded.
7.2a	Zero dose BCG, Hepatitis B and OPV given	✓	N	
7.3a	Counseling on IYCF done	Y	✓	
7.4a	Counseling on Family Planning done	✓	N	
7.5a	Mothers asked to stay for 48 hrs	✓	N	
7.6a	JSY payment being given before discharge	✓	N	
7.7a	Mode of JSY payment (Cash/bearer cheque/Account payee cheque/Account Transfer)	bearer cheque being given		
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	✓	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	on the case with PPV. Multiple - finding shared with concerned.
8.2	Provide essential newborn care (thermoregulation, breastfeeding and asepsis)	✓	N	
8.3	Manage sick neonates and infants	✓	N	
8.4	Correctly uses partograph	Y	N	
8.5	Correctly insert IUCD	✓	N	
8.6	Correctly administer vaccines	✓	N	
8.7	Segregation of waste in colour coded bins	✓	N	
8.8	Adherence to IMEP protocols	✓	N	
8.9	Manage Bio medical waste	✓	N	
8.10	Updated entry in the MCP Cards	✓	N	
8.11	Entry in MCTS	Y	N	
8.12	Corrective action taken on Maternal Death Review finding	✓	N	

JSSK:

Diet - cooked (hired on contract)  
 Dropback - 1 hired vehicle under JSSK  
 1 U.P. Ambulance.  
 Drugs & consumables - being given free of cost.  
 Diagnostics - being given " " " "





## Section IX: Record Maintenance:

S. no	Record	Available and Updated and Correctly filled	Available but Not maintained	Not Available	Remarks/Timeline for completion
9.1	OPD Register	✓			N.A.
9.2	IPD Register	✓			
9.3	ANC Register	✓			
9.4	PNC Register	✓			
9.5	Indoor bed head ticket	✓			
9.6	Line listing of severely anaemic pregnant women			✓	
9.7	Labour room register		✓	+	
9.8	Partographs			✓	
9.9	FP-Operation Register (OT)	✓	.		
9.10	OT Register	✓			
9.11	FP Register	✓			
9.12	Immunisation Register	✓			
9.13	Updated Microplan	✓			
9.14	Blood Bank stock register	✓	—	—	
9.15	Referral Register (In and Out)	✓	—	—	
9.16	MDR Register	✓	—	—	
9.17	Infant Death Review and Neonatal Death Review	✓	—	✓	
9.18	Drug Stock Register	✓	—	—	
9.19	Payment under JSY				
9.20	Untied funds expenditure (Check % expenditure)	—	—	—	Work Plan prepared & approved by the DHS. Expenditure to be started very soon.
9.21	AMG expenditure (Check % expenditure)	—	—	—	
9.22	RKS expenditure (Check % expenditure)	—	—	—	

## 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	No. of sick infants transported	No. of children 1-6 years	Free/Paid
			Q1 C Q2	Q1 Q2	Q1 Q2	
10.1	Home to facility	Govt.	94 101	— —	— —	free
10.2	Inter facility	Govt.	— —	0 9	— —	free
10.3	Facility to Home (drop back)	Govt.	252 331	— —	— —	free



## Section XI: IEC Display:

S.No	Material	Yes	No	Remarks
11.1	Approach roads have directions to the health facility	Y	N	
11.2	Citizen Charter	Y	N	
11.3	Timings of the health facility	Y	N	
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 (Displayed in ANC Clinics/, PNC Clinics)	Y	N	
11.8	Immunization Schedule	Y	N	
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:

Sl. no	Services	Yes	No	Remarks
12.1	Regular sterilisation of LR (Check Records)	Y	N	F.P. (O.T.)
12.1a	Regular sterilisation of OT (Check Records)	Y	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	
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	Dr. D B Singh	ACMO - RCH.	10.09.2013
13.2		emo office	
13.3		Main floor	
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
1. Lab room to be strengthened by introducing the recent concept of 7 Trays & I.P.	✓ MCH Toolkit has been shared with MO/IC/ Superintendent. relevant pages were also handed over to him.	ACMA RCH/DPM- NRHM/ Medical Superintendent	by the end of November 2013.
2. O.T. lacks AC & Boyle's anaesthetic apparatus & thus lying non-functional for obstetric surgical procedures. only F.P. procedures being done in the existing set up.	✓ Procurement of AC, Boyle's Anaesthetic machine & EMO to be done on urgent basis in order to run the obstetric O.T. & declare this facility as L-3 MCH facility		
3.	✓ One Anaesthetist to be posted along with a Gynaecologist. Plan has been shared with CMO Dr. VK Gupta.		

Potential

FRU-EHC

Kurawali

Distict: Mainpuri

Labour room equipment and accessories

1. Labour table with mattress, sheet, pillow (numbers as per case load).  
Macintosh, Foot-rest
2. Brass V drape to collect blood and amniotic fluid
3. Wall clock with seconds hand
4. Wall mounted thermometer
5. Suction apparatus
6. Equipment for adult resuscitation
7. Equipment for neonatal resuscitation
8. Delivery trolley
9. IV drip stand
10. Screen/Partition between two tables
11. Stool for birth companion
12. Lamp - wall mounted or side
13. Autoclave
14. Autoclave drums for instruments, linen, gloves, cotton, gauge, threads sanitary pads
- a. Autoclaved delivery set for each delivery
15. Refrigerator
16. Sphygmomanometer, adult and newborn thermometer and newborn weighing machine
17. Consumables like gloves, apron, cotton, thread, gauze, sanitary napkins, catgut, IV drip sets, needle, cord clamp, medicines (injectable, oral and parenteral, leucoplast etc)
18. Pulse oxymeter
19. Sterilizer
20. Oxygen cylinder
21. Oxygen concentrator
22. Partograph
23. Delivery kit for HIV positive women
24. Labelled plastic jars for drugs and injectables with date of expiry written on them against each drug
25. Coloured bins for bio medical waste management
26. Hub cutter
27. Puncture proof container
28. Plastic tubs for 0.5% Chlorine solution
29. Intranatal protocols
30. Wheel chair/patient's trolley
31. 7 Trays: Delivery tray, Episiotomy tray, Medicine tray, Emergency drug tray, Baby tray, MVA tray, PPIUCD tray (see content below)
32. Hand-washing area and toilet for the admitted clients
33. Foeto-scope/Foetal Doppler
34. Stethoscope
35. Display of SBA quality protocols, and shadow less lamp
36. Mosquito Repellent

## Trays to be kept in Labour room

1. **Delivery tray:** Gloves, scissor, artery forceps, cord clamp, sponge holding forceps, urinary catheter, bowl for antiseptic lotion, gauze pieces and cotton swabs, speculum, sanitary pads, Kidney tray.
2. **Episiotomy tray:** Inj. Xylocaine 2%, 10 ml disposable syringe with needle, episiotomy scissor, kidney tray, artery forceps, allis forceps, sponge holding forceps, toothed forceps, needle holder, needle (round body and cutting), chromic catgut no. 0, gauze pieces, cotton swabs, antiseptic lotion, thumb forceps, gloves.
3. **Baby tray:** Two pre-warmed towels/sheets for wrapping the baby, cotton swabs, mucus extractor, bag & mask, sterilized thread for cord/cord clamp, nasogastric tube and gloves Inj. Vitamin K, needle and syringe. (Baby should be received in a pre-warmed towel. Do not use metallic tray.)
4. **Medicine tray:** Inj. Oxytocin (to be kept in fridge), Cap Ampicillin 500 mg, Tab Metronidazole 400 mg, Tab Paracetamol, Tab Ibuprofen, Tab B complex, IV fluids, Inj. Oxytocin 10 IU, Tab. Misoprostol 200 micrograms, Inj. Gentamycin, Vit K, Inj. Betamethason, Ringer lactate, Normal Saline, Inj. Hydrazaline, Nefedipin, Methyldopa, magnifying glass.  
(\* - Nevirapin and other HIV drugs only for ICTC and ART Centres)
5. **Emergency drug tray:** Inj. Oxytocin (to be kept in fridge), Inj. Magsulf 50%, Inj. Calcium gluconate-10%, Inj. Dexamethasone, Inj. Ampicillin, Inj. Gentamicin, Inj. Metronidazole, Inj. Lignocaine-2%, Inj. Adrenaline, Inj. Hydrocortisone Succinate, Inj. Diazepam, Inj. Pheneramine maleate, Inj. Carboprost, Inj. Fortwin, Inj. Phenergan, Ringer lactate, normal saline, Betamethazone Inj. Hydrazaline, Nefedipin, Methyldopa, IV sets with 16-gauge needle at least two, controlled suction catheter, mouth gag, IV Canula, vials for drug collection Ceftriaxone (3rd generation cephalosporins) - For L3 facility  
(\* - only for L2, L3 facilities)
6. **MVA/ EVA tray:** Gloves, speculum, anterior vaginal wall retractor, posterior vaginal wall retractor, sponge holding forceps, MVA syringe and cannulas, MTP cannulas, small bowl of antiseptic lotion, sanitary pads, pads /cotton swabs, disposable syringe and needle, misoprostol tablet, sterilised gauze/pads, urinary catheter.
7. **PPIUCD tray**\*\*\* - PPIUCD Insertion Forceps, Cu IUCD 380A/ Cu IUCD 375 in a sterile package.  
(\*\*\* - only for L3 facilities with PPIUCD trained provider)

## Equipment and accessories needed at NBCC

1. Baby tray
2. Paediatric stethoscope
3. Baby scale
4. Radiant warmer - 2
5. Self-inflating bag and mask - neonatal size (0 and 1)
6. Oxygen hood (neonatal)
7. Laryngoscope and Endotracheal intubation tubes
8. Two set of pencil cell batteries (one is spare)
9. Mucus extractor with suction tube and a foot-operated suction machine NG tubes
10. Blankets
11. Two clean and dry towels
12. Feeding tubes
13. Empty vials for collecting blood
14. Alcohol handrub
15. HLD/sterile gloves

cord thread

& 2 phototherapy unit functional.

1 April To 27 <sup>Sep.</sup> October 2013

C.H.C. KURAWALI  
✓ MAINPURI

Hb%. ANC Patient

↔ (Hb 7-0 gm/%)

April 13 → 1 28

May 13 → Nil 34

June 13 → 2 54

July 13 → 2 78

August 13 → 2 88

September → 5 138

~~27 October → 3 38~~

Total = 15



## PHC/CHC (NON FRU) level Monitoring Checklist

Name of District: Mainpuri Name of Block: Sultanganj Name of PHC/CHC: Sultanganj  
 Catchment Population: 180209 Total Villages: 98 Distance from Dist HQ: 15 KM  
 Date of last supervisory visit: 05.08.2013 by the CMO.  
 Date of visit: 27.09.2013 Name & designation of monitor: Dr M C Verma, JD-Admin  
 Names of staff not available on the day of visit and reason for absence: Mahendra Manjhi, TC-MH  
Akhilesh Srivastava, PC-FP

## Section I: Physical Infrastructure:

S.No	Infrastructure	Yes	No	Additional Remarks
1.1	Health facility easily accessible from nearest road head	Y	N	needing civil work.
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	
1.7	Electricity with functional power back up	Y	N	
1.9	Running 24*7 water supply	Y	N	
1.10	Clean Toilets 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	No radiant warmer available NBCC available agency hired. Collects BM once in a week.
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	
1.16	Separate Male and Female wards (at least by Partitions)	Y	N	
1.17	Availability of complaint/suggestion box	Y	N	
1.18	Availability of mechanisms for waste management	Y	N	

## Section II: Human resource:

S. no	Category	Sanctioned	In-f	Numbers	Remarks if any
2.1	MO	2	1		appointed under NRHM
2.2	SNs/ GNMs	—	3		
2.3	ANM	2	1		
2.4	LTs	1	1		
2.5	Pharmacist	1	1		



Sanctioned

In-P.

2.6	LHV/PHN	1	1
2.7	Others	—	—

## Section III: Training Status of HR

S. no	Training	No. trained	Remarks if any
3.1	BeMOC	0	
3.2	SBA	0	
3.3	MTP/MVA	0	
3.4	NSV	0	
3.5	IMNCI	0	
3.6	F- IMNCI	0	
3.7	NSSK	0	
3.8	Mini Lap	0	
3.9	IUD	1	
3.10	RTI/STI	0	
3.11	Immunization and cold chain	1	
3.12	Others	0	

## Section IV: Equipment

S. No	Equipment	Yes	No	Remarks
4.1	Functional BP Instrument and Stethoscope	✓	N	
4.2	Sterilised delivery sets	Y	N	
4.3	Functional neonatal, Paediatric and Adult Resuscitation kit	✓	N	
4.4	Functional Weighing Machine (Adult and infant/newborn)	✓	N	
4.5	Functional Needle Cutter	✓	N	
4.6	Functional Radiant Warmer	Y	N	
4.7	Functional Suction apparatus	✓	N	
4.8	Functional Facility for Oxygen Administration	✓	N	
4.9	Functional Autoclave	✓	N	
4.10	Functional ILR	✓	N	
4.11	Functional Deep Freezer	✓	N	
4.12	Emergency Tray with emergency injections	Y	N	
4.13	MVA/ EVA Equipment	Y	N	one tray available carrying 7 drugs as given in the section VI. <del>annexure</del> . 1 binocular functional.
	<b>Laboratory Equipment</b>	Yes	No	
4.14	Functional Microscope	✓	N	
4.15	Functional Hemoglobinometer	✓	N	
4.16	Functional Centrifuge,	Y	N	





4.17	Functional Semi autoanalyzer	Y	<input checked="" type="checkbox"/>
4.18	Reagents and Testing Kits	<input checked="" type="checkbox"/> Y	N

### Section V: Essential Drugs and Supplies

S.No	Drugs	Yes	No	Remarks
5.1	EDL available and displayed	Y	<input checked="" type="checkbox"/> N	
5.2	Computerised inventory management	Y	<input checked="" type="checkbox"/> N	
5.3	IFA tablets	<input checked="" type="checkbox"/> Y	N	
5.4	IFA tablets (blue)	Y	<input checked="" type="checkbox"/> N	
5.5	IFA syrup with dispenser	Y	<input checked="" type="checkbox"/> N	
5.6	Vit A syrup	<input checked="" type="checkbox"/> Y	N	
5.7	ORS packets	<input checked="" type="checkbox"/> Y	N	
5.8	Zinc tablets	Y	<input checked="" type="checkbox"/> N	
5.9	Inj Magnesium Sulphate	Y	<input checked="" type="checkbox"/> N	
5.10	Inj Oxytocin	<input checked="" type="checkbox"/> Y	N	
5.11	Misoprostol tablets	Y	<input checked="" type="checkbox"/> N	
5.12	Mifepristone tablets	Y	<input checked="" type="checkbox"/> N	
5.13	Antibiotics	<input checked="" type="checkbox"/> Y	N	
5.14	Labelled emergency tray	Y	<input checked="" type="checkbox"/> N	
5.15	Drugs for hypertension, Diabetes, common ailments e.g PCM, anti-allergic drugs etc.	<input checked="" type="checkbox"/> Y	N	
5.16	Vaccine Stock available	<input checked="" type="checkbox"/> Y	N	all available, except BCG.
S.No	Supplies	Yes	No	Remarks
5.17	Pregnancy testing kits	<input checked="" type="checkbox"/> Y	N	
5.18	Urine albumin and sugar testing kit	Y	<input checked="" type="checkbox"/> N	
5.19	OCPs	<input checked="" type="checkbox"/> Y	N	
5.20	EC pills	<input checked="" type="checkbox"/> Y	N	
5.21	IUCDs	<input checked="" type="checkbox"/> Y	N	
5.22	Sanitary napkins	Y	<input checked="" type="checkbox"/> N	stock finished.
S.No	Essential Consumables	Yes	No	Remarks
5.23	Gloves, Mckintosh, Pads, bandages, and gauze etc.	<input checked="" type="checkbox"/> 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	<input checked="" type="checkbox"/> Y	N	
6.2	CBC	Y	<input checked="" type="checkbox"/> N	
6.3	Urine albumin and Sugar	Y	<input checked="" type="checkbox"/> N	
6.4	Serum Bilirubin test	Y	<input checked="" type="checkbox"/> N	
6.5	Blood Sugar	Y	<input checked="" type="checkbox"/> N	

6 HB (ANCs) tested > 7 gm % found in all six cases

Medicine Tray : ① Atropine Inj ② Inj Avid ③ Inj Tramadol  
 ④ Inj Methylethergometrine ⑤ Dexamethasone  
 ⑥ Inj Metoclopramide ⑦ Inj Gentamycin  
 Drip set / Intra cath



6.6	RPR (Rapid Plasma Reagin) test	Y	N
6.7	Malaria (PS or RDT)	Y	N
6.8	T.B (Sputum for AFB)	Y	N
6.9	HIV (RDT)	Y	N
6.10	Others	Y	N

### Section VII: Service Delivery in last two quarters:

S.No	Service Utilization Parameter	Q1	Q2	Remarks
7.1	OPD	3639	8048	
7.2	IPD	527	746	
7.3	Expected number of pregnancies	1884	1884	
7.4	Percentage of women registered in the first trimester			
7.5	Percentage of women registered in the first trimester			
7.6	Percentage of ANC3 out of total registered			
7.7	Percentage of ANC4 out of total registered			
7.8	Total deliveries conducted	576	1189	
7.9	Number of obstetric complications managed, pls specify type	0	0	
7.10	No. of neonates initiated breast feeding within one hour	321	839	
7.11	Number of children screened for Defects at birth under RBSK	—	—	
7.12	RTI/STI Treated	0	0	
7.13	No of admissions in NBSUs, if available	0	0	
7.14	No. of sick children referred	0	0	
7.15	No. of pregnant women referred	0	11	
7.16	No. of IUCD Insertions	0	336	
7.17	No. of Tubectomy	0	6	
7.18	No. of Vasectomy	0	0	
7.19	No. of Minilap	0	0	
7.20	No. of children fully immunized	1161	1519	
7.21	Measles coverage	1161	1519	
7.22	No. of children given ORS + Zinc	561	898	
7.23	No. of children given Vitamin A	1161	1519	
7.24	No. of women who accepted post partum FP services	0	0	
7.25	No. of MTPs conducted	0	0	
7.26	Maternal deaths, if any	0	0	
7.27	Still births, if any	2	5	
7.28	Neonatal deaths, if any	0	0	



7.29 Infant deaths, if any 0 0

### 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	✓	N	Except one case.
7.2a	Zero dose BCG, Hepatitis B and OPV given	✓	N	
7.3a	Counseling on IYCF done	Y	✓N	
7.4a	Counseling on Family Planning done	✓	N	
7.5a	Mothers asked to stay for 48 hrs	✓	N	
7.6a	JSY payment being given before discharge	✓	N	3 cheques of past 10 days pending. Clients absconded as reported by the mo/c.
7.7a	Mode of JSY payment (Cash/bearer cheque/Account payee cheque/Account Transfer)	bearer cheque being given.		
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	✓	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	Skills	Remarks
8.1	Manage high risk pregnancy	✓	N	✓ N
8.2	Provide essential newborn care (thermoregulation, breastfeeding and asepsis)	✓	N	✓ N
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	✓	N	✓ N
8.6	Correctly administer vaccines	✓	N	✓ N
8.7	Alternate Vaccine Delivery (AVD) system functional	✓	N	✓ N
8.7	Segregate waste in colour coded bins	Y	✓N	Y ✓N
8.8	Adherence to IMEP protocols	Y	✓N	Y ✓N

JSSK: ✓ Diet (hired services)  
 ✓ Dropback 1 vehicle (U.P. Ambulance)  
 ✓ Drugs & consumables = CMSD supply  
 ✓ Diagnostics = CMSD supply.

not provided with the grant of NRHM.



## Section IX: Record Maintenance:

S. no	Record	Available, Updated and correctly filled	Available but Not maintained	Not Available	Remarks/Timeline for completion
9.1	OPD Register	✓			No.  Not being done. N.A.  expenditure not done till now. DHS has approved the budget plan.
9.2	IPD Register	✓			
9.3	ANC Register	✓			
9.4	PNC Register	—	—	—	
9.5	Indoor bed head ticket	✓	—	—	
9.6	Line listing of severely anaemic pregnant women	—	—	✓	
9.7	Labour room register	—	—	✓	
9.8	Partographs	—	—	—	
9.9	OT Register	—	—	—	
9.10	FP Register	✓	—	—	
9.11	Immunisation Register	✓	—	—	
9.12	Updated Microplan	✓	—	—	
9.13	Drug Stock Register	✓	—	—	
9.14	Referral Registers (In and Out)	—	—	—	
9.15	Payments under JSY	✓	—	—	
9.16	Untied funds expenditure (Check % expenditure)	—	—	—	
9.17	AMG expenditure (Check % expenditure)	—	—	—	
9.18	RKS expenditure (Check % expenditure)	—	—	—	

## Section X: Referral linkages in last two quarters:

S. no	JSSK	Mode of Transport (Specify Govt./ pvt)	Q1/Q2		Q1/Q2		Q1/Q2		Free/Paid
			No. of women transported during ANC/INC/PNC	No. of sick infants transported	No. of children 1-6 years				
10.1	Home to facility	—	—	—	—	—	—	—	—
10.2	Inter facility	—	—	—	—	—	—	—	—
10.3	Facility to Home (drop back)	Govt.	26	59	0	0	0	0	free



## Section XI: IEC Display:

S.No	Material	Yes	No	Remarks
11.1	Approach roads have directions to the health facility	✓	N	wall painting centrally done.
11.2	Citizen Charter	✓	N	
11.3	Timings of the Health Facility	✓	N	
11.4	List of services available	✓	N	
11.5	Essential Drug List	Y	✓N	
11.6	Protocol Posters	Y	✓N	
11.7	JSSK entitlements	✓	N	
11.8	Immunization Schedule	✓	N	
11.9	JSY entitlements	✓	N	
11.10	Other related IEC material	Y	✓N	

## Section XII: Additional/Support Services:

Sl. no	Services	Yes	No	Remarks
12.1	Regular sterilisation of Labour room (Check Records)	✓	N	No record found
12.2	Functional laundry/washing services	✓	N	
12.3	Availability of dietary services	✓	N	
12.4	Appropriate drug storage facilities	✓	N	
12.5	Equipment maintenance and repair mechanism	Y	✓N	
12.6	Grievance redressal mechanisms	✓	N	
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	Dr. V. K. Gupta	CMO Mainpuri	05.08.2013
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
① labour room lacks drugs as very few drugs were available in L.R. Civil work pending in L.R. The PHC is being run in a building established in 1950, ceiling deteriorated.	✓ Seven trays concept has been discussed with S.Ns & MOYC for ensuring the compliance. ✓ One radiant warmer to be placed in L.R./NBCC ✓ Area for civil work - hand washing area in the L.R.	ACMO-R.I. & MOI/c.	by the end of November 2013.

L-1



## Sub Centre Level Monitoring Checklist

Name of District: Mainpuri Name of Block: Sultangang Name of SC: Rakari  
 Catchment Population: 12612 Total Villages: 15 Distance from PHC: 15 KM.  
 Date of last supervisory visit: 16.08.2013 by the MO/c.  
 Date of visit: 27.09.2013 Name & designation of monitor: 1. Dr. Me Verma JD-Admin  
2. Mahesh Chandra, Tech. Con. - MH  
3. Akhilesh Srivastava PC-FF  
 Names of staff posted and available on the day of visit: Ms. Nirmala Rajput  
 Names of staff not available on the day of visit and reason for absence: None

## Section I: Physical Infrastructure:

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

## Section II: Human Resource:

S.no	Human resource	Numbers	Specify the Training received	Remarks
2.1	ANM	<u>1</u>	<u>1</u>	<u>Immunization,</u>
2.2	2nd ANM	<u>0</u>	<u>0</u>	<u>NA</u>
2.3	MPW - Male	<u>0</u>	<u>0</u>	<u>NA</u>
2.4	Others, specify <u>P.T. Dai</u>	<u>1</u>	<u>1</u>	<u>NA</u>

→ being paid through U/F of S/C.



### Section III: Equipment

Mark (✓) in appropriate column

S.No	Equipment	Available and Functional	Available but non-functional	Not Available	Remarks
3.1	Equipment for Hemoglobin Estimation			✓	
3.2	Blood sugar testing kits			✓	
3.3	BP Instrument and Stethoscope	✓			
3.4	Delivery equipment	✓			
3.5	Neonatal ambu bag	✓			
3.6	Adult weighing machine	✓			
3.7	Infant/New born weighing machine	✓			
3.8	Needle & Hub Cutter	✓			
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	✓	N	
4.2	IFA syrup with dispenser	Y	✓N	
4.3	Vit A syrup	✓	N	
4.4	ORS packets	✓	N	
4.5	Zinc tablets	Y	✓N	
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	✓	N	
4.10	Availability of drugs for common ailments e.g PCM, anti-allergic drugs etc.	Y	N	<p>Available :</p> <p>Tab. Cotrimoxazole,</p> <p>Tab. Metronidazole,</p> <p>Tab. A1 bendazole.</p>

### Section V: Essential Supplies

S.No	Essential Medical Supplies	Yes	No	Remarks
5.1	Pregnancy testing Kits	✓	N	
5.2	Urine albumin and sugar testing kit	Y	✓N	
5.3	OCPs	✓	N	
5.4	EC pills	✓	N	



5.5	IUCDs	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
5.6	Sanitary napkins	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N

### Section VI: Service Delivery in the last two quarters:

S.No	Service Utilization Parameter	Q1	Q2	Remarks
6.1	Number of estimated pregnancies	63	63	
6.2	Percentage of women registered in the first trimester	60.9	104.7	
6.3	Percentage of ANC3 out of total registered	37.5	44.1	
6.4	Percentage of ANC4 out of total registered	0	0	
6.5	No. of pregnant women given IFA	44	66	
6.6	Number of deliveries conducted at SC	60	72	
6.7	Number of deliveries conducted at home	10	12	
6.8	No. of neonates initiated breast feeding within one hour	57	71	
6.9	Number of children screened for defects at birth under RBSK	—	—	
6.10	No. of sick children referred	0	0	
6.11	No. of pregnant women referred	2	0	
6.12	No. of IUCD insertions	0	20	
6.13	No. of children fully immunized	36	30	
6.13 a	Measles coverage	36	30	
6.15	No. of children given ORS + Zinc	40	10	
6.16	No. of children given Vitamin A	36	30	
6.17	No. of children given IFA Syrup	0	0	
6.18	No. of Maternal deaths recorded, if any	0	0	
6.19	No. of still birth recorded, if any	3	1	
6.20	Neonatal deaths recorded, if any	0	0	
6.21	Number of VHNDs attended	23	31	
6.22	Number of VHNSC meeting attended	3	3	
6.23	Service delivery data submitted for MCTS updation	Yes	Yes	





## Section VII: Quality parameters of the facility:

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

S.No	Essential Skill Set	Knowledge		Skill		Remarks
7.1	Correctly measure BP	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
7.2	Correctly measure hemoglobin	<input checked="" type="checkbox"/> Y	<input checked="" type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
7.3	Correctly measure urine albumin and protein	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	
7.4	Identify high risk pregnancy	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
7.5	Awareness on mechanisms for referral to PHC and FRU	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
7.6	Correct use of partograph	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	
7.7	Provide essential newborn care (thermoregulation, breastfeeding and asepsis)	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> Y	<input type="checkbox"/> N	
7.8	Correctly insert IUCD	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
7.9	Correctly administer vaccine	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
7.10	Adherence to IMEP protocols	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	
7.11	Segregation of waste in colour coded bins	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	
7.12	Guidance/ Support for breast feeding method	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
7.13	Correctly identifies signs of Pneumonia and dehydration	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
7.14	Awareness on Immunization Schedule	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
7.15	Awareness on site of administration of vaccine	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	

## Section VIII: Record Maintenance:

Mark (✓) in appropriate column

Sl. No	Record	Available and Upto-date and correctly filled	Available but non-maintained	Not Available	Remarks
8.1	Untied funds expenditure (Rs 10,000) Check % expenditure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grants not received. (under process)
8.2	Annual maintenance grant (Rs 10,000-Check % expenditure)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.3	Payments under JSY	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	→ Payment being given by PHC's Accountant
8.4	VHND plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.5	VHSNC meeting minutes and action taken	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



8.6	Eligible couple register	✓		✓
8.7	MCH register ( as per GOI)	✓		✓
8.8	Delivery Register as per GOI format		✓	
8.9	Stock register			✓
8.10	Due lists	✓		
8.11	MCP cards	✓		
8.12	Village register	✓		
8.13	Referral Registers (In and Out)			✓
8.14	List of families with 0-6 years children under RBSK			✓
8.15	Line listing of severely anemic pregnant women			✓
8.16	Updated Microplan	✓		
8.17	Vaccine supply for each session day (check availability of all vaccines )			✓
8.18	Due list and work plan received from MCTS Portal through Mobile/ Physically	✓		

### 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
9.1	Home to facility	—	—	—	—	
9.2	Inter facility	—	—	—	—	
9.3	Facility to Home (drop back)	—	—	—	—	

### Section X: IEC display:

S. no	Material	Yes	No	Remarks
10.1	Approach roads have directions to the sub centre	Y	✓N	
10.2	Citizen Charter	✓Y	N	
10.3	Timings of the Sub Centre	Y	✓N	
10.4	Visit schedule of "ANMs"	Y	✓N	
10.5	Area distribution of the ANMs/	Y	✓N	



	VHND plan		<input checked="" type="checkbox"/>
10.6	SBA Protocol Posters	Y	<input checked="" type="checkbox"/>
10.7	JSSK entitlements	Y	<input checked="" type="checkbox"/>
10.8	Immunization Schedule	<input checked="" type="checkbox"/>	N
10.9	JSY entitlements	Y	<input checked="" type="checkbox"/>
10.10	Other related IEC material	<input checked="" type="checkbox"/>	N

### Section XI: Previous supervisory visits:

S. no	Name and Designation of the supervisor	Place of posting of Supervisor	Date of visit
11.1	Dr V Singh medical Officer Incharge	PHC Sultansgarh	16.08.2013
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
① Limited drugs were available in the medicine tray in LH.	Concept of 5 trays to be introduced in LH. one overhead tank to be placed to ensure uninterrupted water supply (2400) in LH.	ANM of Concerned Sub Center	by the end of November, 2013
② 24x7 water supply not available, hand pump as single source of water, no electricity power backup available.	One Inverter/emergency light to be placed in LH for proper lighting. Only pregnancy testing kits can't fulfill the field requirement, urine testing kits shall also be procured along with GB testing kits for SLE level intervention.	MO HC of PHC Sultansgarh	
③ Hb, urine albumin, urine sugar test kits not available			

Dr. MC. Verma नियमित टीकाकरण सत्र मॉनिटरिंग प्रपत्र

मॉनिटर का नाम :	संस्था : <input checked="" type="checkbox"/> सरकारी विभाग <input type="checkbox"/> NPSP <input type="checkbox"/> UNICEF <input type="checkbox"/> अन्य	पदनाम : <i>JD-Admin</i>
दिनांक : <i>28/09/2013</i>	समय : <i>12:10 pm</i>	दिवस : <input type="checkbox"/> बुद्धवार <input type="checkbox"/> शुक्रवार <input type="checkbox"/> शनिवार <input type="checkbox"/> अन्य <i>Mon</i>
राज्य	<i>उत्तर प्रदेश</i>	
जिला	<i>मैनपुरी</i>	
ब्लॉक/प्लानिंग युनिट	<i>करहल</i>	
उपकेंद्र/शहरी पोस्ट	<i>किरवा</i>	
जगह का पता	<i>ग्राम मिक विहालय सुतारा</i>	
प्रकार : <input checked="" type="checkbox"/> ग्रामीण <input type="checkbox"/> शहरी <input type="checkbox"/> मलिन बस्ती	HRA : <input type="checkbox"/> हां <input checked="" type="checkbox"/> नहीं	सत्र स्थल : <input type="checkbox"/> स्वास्थ्य केंद्र <input type="checkbox"/> उपकेंद्र <input type="checkbox"/> आंगनवाड़ी केंद्र <input type="checkbox"/> अन्य ..... <i>डा. 10</i>

सही जवाब पर <input checked="" type="checkbox"/> का निशान लगाएं।			
1. क्या सत्र आयोजित हो रहा है	<input checked="" type="checkbox"/> हां <input type="checkbox"/> नहीं		
अ. यदि नहीं तो सत्र आयोजित न होने का कारण लिखें (प्रपत्र के नीचे देखें) <sup>Δ</sup>	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D		
ब. यदि हां तो क्या सत्र माइक्रोप्लान के अनुसार आयोजित हो रहा है	<input checked="" type="checkbox"/> हां <input type="checkbox"/> नहीं		
2. लाभार्थियों को सत्र स्थल तक कौन बुला कर ला रहा है *	<input checked="" type="checkbox"/> आंगनवाड़ी कार्यकर्ता <input checked="" type="checkbox"/> आशा <input type="checkbox"/> अन्य <input type="checkbox"/> कोई नहीं		
3. पी.एच.सी./ब्लॉक से सत्र स्थल तक वैक्सीन तथा अन्य लॉजिस्टिक कैसे लाए गए	<input type="checkbox"/> वैकल्पिक साधन <sup>#</sup> <input checked="" type="checkbox"/> ए.एन.एम. <input type="checkbox"/> सुपरवाइजर <input type="checkbox"/> अन्य		
4. क्या सभी वैक्सीन तथा डाइल्यूएंट चार आइस पैक वाले वैक्सीन कैरियर में जिपर युक्त थैली के अंदर रखे गए हैं	<input type="checkbox"/> हां <input type="checkbox"/> नहीं		
5. सत्र स्थल पर कौन कौन सी वैक्सीन उपलब्ध हैं *	<input checked="" type="checkbox"/> BCG <input checked="" type="checkbox"/> BCG का डाइल्यूएंट <input checked="" type="checkbox"/> DPT <input type="checkbox"/> JE <input checked="" type="checkbox"/> Measles <input checked="" type="checkbox"/> Measles का डाइल्यूएंट <input checked="" type="checkbox"/> DT <input type="checkbox"/> JE का डाइल्यूएंट <input checked="" type="checkbox"/> OPV <input checked="" type="checkbox"/> mOPV <input checked="" type="checkbox"/> TT <input type="checkbox"/> Hepatitis B		
6. कौन कौन सी वैक्सीन की वायल बिना VVM लगे पाई गई * <i>Nme</i>	<input type="checkbox"/> BCG <input type="checkbox"/> DPT <input type="checkbox"/> OPV <input type="checkbox"/> Hep-B <input type="checkbox"/> Measles <input type="checkbox"/> DT <input type="checkbox"/> TT <input type="checkbox"/> JE	<i>Nil</i>	
7. क्या कोई वैक्सीन वायल उल्लिखित अवस्था में पाई गई, यदि हां तो, <input checked="" type="checkbox"/> का निशान लगाएं तथा वैक्सीन का नाम लिखें *	<input type="checkbox"/> बिना लेबल/न पढ़ सकने लायक लेबल <input type="checkbox"/> VVM स्टेज III अथवा IV <input type="checkbox"/> एक्सपायर हो चुकी वैक्सीन वायल <input type="checkbox"/> जमी अवस्था में वैक्सीन (DPT, TT, DT, Hepatitis -B)	<i>Nil</i>	
8. उल्लिखित लॉजिस्टिक में से क्या क्या वस्तुएं सत्र स्थल पर उपलब्ध हैं *	<input checked="" type="checkbox"/> ए.डी. (0.1 मि.ली.) सिरिजें <input type="checkbox"/> विटामिन-ए सॉल्यूशन <input checked="" type="checkbox"/> ORS के पैकेट <input checked="" type="checkbox"/> ए.डी. (0.5 मि.ली.) सिरिजें <input type="checkbox"/> विटामिन ए हेतु प्लास्टिक की चम्मच <input checked="" type="checkbox"/> IFA की टैबलेट <input checked="" type="checkbox"/> चानू अवस्था में हब कटर <input type="checkbox"/> भुष्टाहार/Supplements <input checked="" type="checkbox"/> पैरासिटामोल <input checked="" type="checkbox"/> खाली टीकाकरण कार्ड <input checked="" type="checkbox"/> अपेक्षित लाभार्थियों की सूची <input type="checkbox"/> बजान नापने की मशीन <input checked="" type="checkbox"/> लाल और काली थैलियां <input type="checkbox"/> पिछले सत्रों के काउंटरफॉयल <input type="checkbox"/> BP नापने की मशीन		
9. क्या सत्र स्थल पर समुचित संख्या में मिश्रण करने हेतु 5 मि.ली. की डिस्पोजिबल सिरिजें उपलब्ध हैं (=BCG + Measles + JE की वायलें)	<input type="checkbox"/> हां <input type="checkbox"/> नहीं <input type="checkbox"/> उपलब्ध नहीं		
10. क्या मिश्रित BCG/Measles/JE की वायलों पर मिश्रण का समय अंकित है	<input checked="" type="checkbox"/> हां <input type="checkbox"/> नहीं <input type="checkbox"/> लागू नहीं		
11. क्या इंजेक्शन से दी जाने वाली वैक्सीन देने के लिए ए.डी. सिरिजों का इस्तेमाल किया जा रहा है	<input checked="" type="checkbox"/> हां <input type="checkbox"/> नहीं <input type="checkbox"/> लागू नहीं		
12. क्या DPT वैक्सीन मध्य जांघ के बाहरी भाग में दी जा रही है	<input checked="" type="checkbox"/> हां <input type="checkbox"/> नहीं <input type="checkbox"/> लागू नहीं		
13. क्या इंजेक्शन लगाते वक्त ए.एन.एम. सुई अथवा उसके किसी भाग को छू रही है	<input type="checkbox"/> हां <input checked="" type="checkbox"/> नहीं <input type="checkbox"/> लागू नहीं		
14. क्या प्रत्येक सिरिज को इस्तेमाल के तुरंत पश्चात हब कटर से काटा जा रहा है	<input checked="" type="checkbox"/> हां <input type="checkbox"/> नहीं <input type="checkbox"/> लागू नहीं		
15. क्या प्रत्येक लाभार्थी को दिए गए टीके की जानकारी सत्र टैली शीट में भरी जा रही है	<input checked="" type="checkbox"/> हां <input type="checkbox"/> नहीं <input type="checkbox"/> लागू नहीं		
16. क्या आज दिए जा रहे टीकों की जानकारी को काउंटरफॉयल में भरकर उन्हें अधुनांत किया जा रहा है	<input checked="" type="checkbox"/> हां <input type="checkbox"/> नहीं <input type="checkbox"/> लागू नहीं		
17. क्या माता पिता को टीकाकरण के बाद चार महत्वपूर्ण संदेश दिए जा रहे हैं	<input checked="" type="checkbox"/> हां <input type="checkbox"/> नहीं <input type="checkbox"/> लागू नहीं		

Δ (प्र. 13): A= ए.एन.एम./टीकाकरण कर्मी तथा वैक्सीन एवं लॉजिस्टिक दोनों उपलब्ध नहीं हैं। B= ए.एन.एम./टीकाकरण कर्मी उपलब्ध हैं परंतु वैक्सीन एवं लॉजिस्टिक उपलब्ध नहीं हैं। C= वैक्सीन 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

\* एक से अधिक जवाबों पर निशान लगा सकते हैं

उन सभी अधिकारियों हेतु जिन्हें इस कार्य का पर्यवेक्षण करना है

जनपद का नाम मैनपुरी

ब्लाक प्रा0स्वा0केन्द्र करइल

अधिकारी का नाम/पदनाम डा. एन. सी. वर्मा

दिनांक 28.09.2013

ग्राम स्वास्थ्य एवं स्वच्छता समिति

एमनपुर

किरथुवा

क्रम	पर्यवेक्षण हेतु बिन्दु	गांव/ग्राम पंचायत 1	गांव/ग्राम पंचायत 2
1	प्रधान एवं सम्बंधित ए0एन0एम0 का नाम	ANM मु-नी देवी चौधरी प्रधान-प्रभोद	ANM-मु-नी देवी चौधरी प्रधान-वीरपाल सिंह
	क्या समिति में सभी मजदूरों/पुरवा/हेम्लेट से प्रतिनिधित्व है।	हां	हां
	क्या ग्राम स्वास्थ्य एवं स्वच्छता समिति को इस वर्ष में अन्टाइड फण्ड प्राप्त हुआ।	नहीं	नहीं
	क्या ग्राम स्वास्थ्य एवं स्वच्छता समिति का बैठक रजिस्टर बना है।	हां	हां
	ग्राम स्वास्थ्य एवं स्वच्छता समिति की पिछले 6 माह में कितनी बैठकें की गयी हैं।	एक	दो
	क्या ग्राम स्वास्थ्य कार्ययोजना बनी है।	नहीं	नहीं
	क्या ग्राम स्वास्थ्य एवं स्वच्छता समिति का व्यय विवरण रखा जा रहा है।	हां	हां
	क्या ग्राम स्वास्थ्य एवं स्वच्छता समिति द्वारा अन्टाइड फण्ड का प्रयोग किया जा रहा है।	हां/हां	हां/हां
	ग्राम स्वास्थ्य एवं स्वच्छता समिति द्वारा अन्टाइड फण्ड का प्रयोग किन-किन गतिविधियों में किया गया है।	अणु-वासी के जो बी रोगों के लिए	अणु-वासी के जो बी रोगों के लिए
2.	क्या बैठक की पूर्व सूचना सभी सदस्यों को थी।	हां	हां
	बैठक में उपस्थित सदस्यों की संख्या	15	10
	क्या समिति सदस्यों को अन्टाइड फण्ड के प्रयोग की जानकारी है।	हां	हां
	क्या समिति के सदस्यों को अपनी भूमिका की जानकारी है।	हां	हां
	क्या समिति बैठक की शुरुआत गत बैठक की समीक्षा से की गयी थी।	हां	हां
	क्या समिति द्वारा स्वास्थ्य सेवाओं की समीक्षा व मूल्यांकन किया जा है।	हां	हां
	क्या बैठक में ग्राम स्वास्थ्य कार्ययोजना की समीक्षा की गयी।	हां	हां
	क्या समिति में प्रस्ताव रखने में सभी सदस्यों की सक्रिय भागीदारी रही।	हां	हां

ब्लाक एच0ई0आई0ओ0/जिला कम्युनिटी मोबिलाइजर अपना भ्रमण योजना टीकाकरण माइक्रोप्लान के अनुसार बनाएं।

दिनांक 28.09.2013

हस्ताक्षर MS