

**REGIONAL OFFICES OF HEALTH & FAMILY WELFARE
DATA COLLECTION FORMATS FOR REVIEW OF PRIMARY HEALTH CENTERS**

Name of the Regional Office: Raipur, Chhattisgarh

Report for the Month of: 16th to 20th JULY 2012

FORM-7.2 (iv)					
INFORMATION ON SHCs					
MONTHLY PERFORMANCE REPORT ON TECHNICAL ACTIVITIES FOR ROH&FW					
Name of the ROH&FW: RAIPUR (C.G)					
Report for the Month of: 16 JULY TO 20 TH JULY 2011					
5.1. Field verification Children for fully immunization at SHCs					
Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
1	Total beneficiaries selected	8	10	11	29
2	Total beneficiaries contacted	5	6	6	17
3	Beneficiaries could not be contacted due to				
	A) No such person living in the area.	0	0	0	0
	B) Left the place temporarily.	0	0	0	0
	C) Left the place permanently	0	0	0	0
	D) Dead	0	0	0	0
	E) Wrong /Incomplete address	0	0	3	0
z	F) Others	3	4	5	12
	Total	3	4	5	12
4	No. of beneficiaries confirmed with full doses	4	6	6	16
5	No. of beneficiaries not confirmed with dose	1	0	0	1
6	Discrepancies in entries in the age of beneficiaries	0	0	0	0
7	Children have Complication after receiving the services	0	0	0	0
8	Satisfied with the services	5	6	6	17

FORM – 7.2 (i)

Field Verification of ANC clients

MONTHLY PERFORMANCE REPORT ON TECHNICAL ACTIVITIES FOR ROH&FW

5.2. Field verification of ANC mothers at SHCs					
Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
1	Total No of beneficiaries selected	8	10	11	29
2	Total beneficiaries contacted	5	6	6	17
3	Beneficiaries could not be contacted due to				
	A) No such person living in the area.	0	0	0	0
	B) Left the place temporarily.	0	0	0	0
	C) Left the place permanently	0	0	0	0
	D) Dead	0	0	0	0
	E) Wrong/Incomplete address	0	0	0	0
	F) Others	3	4	5	12
	Total	3	4	5	12
4	Discrepancy in age of beneficiaries	0	0	0	0
5	TT received during the pregnancy	5	6	6	17
6	IFA tablet received during the pregnancy	5	6	6	17
7	IFA consumed as per instruction	5	6	6	17
8	Received three Ante natal check up	5	6	6	17
9	No of women have gone through delivery	5	6	6	17
9.1.	No. of Instts Deliveries	5	5	5	15
10	DDK used during delivery	5	5	5	15
11	Child fed within 30 minute of delivery	1	2	3	6
12	Used colostrums as per advise	1	2	3	6
13	Exclusive Breast feeding	0	0	0	0
14	Three post natal check up	5	6	6	17

FORM – 7.2 (ii)

Field Verification of INC clients

MONTHLY PERFORMANCE REPORT ON TECHNICAL ACTIVITIES FOR ROH&FW

5.2. Field verification of INC mothers at SHCs					
Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
1	Total No of beneficiaries selected	8	10	11	29
2	Total beneficiaries contacted	5	6	6	17
3	Beneficiaries could not be contacted due to				
	A) No such person living in the area.	0	0	0	0
	B) Left the place temporarily.	0	0	0	0
	C) Left the place permanently	0	0	0	0
	D) Dead	0	0	0	0
	E) Wrong/Incomplete address	0	0	0	0
	F) Others	3	4	5	12
	Total	3	4	5	12
4	Discrepancy in age of beneficiaries	0	0	0	0
5	TT received during the pregnancy	5	6	6	17
6	IFA tablet received during the pregnancy	5	6	6	17
7	IFA consumed as per instruction	5	6	6	17
8	Received three Ante natal check up	5	6	6	17
9	No of women have gone through delivery	5	6	6	17
9.1.	No. of Instts Deliveries	5	5	5	15
10	DDK used during delivery	5	5	5	15
11	Child fed within 30 minute of delivery	1	2	3	6
12	Used colostrums as per advise	1	2	3	6
13	Exclusive Breast feeding	0	0	0	0
14	Three post natal check up	5	6	6	17

FORM – 7.2 (iii)

Field Verification of PNC clients

MONTHLY PERFORMANCE REPORT ON TECHNICAL ACTIVITIES FOR ROH&FW

5.2. Field verification of PNC mothers at SHCs					
Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
1	Total No of beneficiaries selected	8	10	11	29
2	Total beneficiaries contacted	5	6	6	17
3	Beneficiaries could not be contacted due to				
	A) No such person living in the area.	0	0	0	0
	B) Left the place temporarily.	0	0	0	0
	C) Left the place permanently	0	0	0	0
	D) Dead	0	0	0	0
	E) Wrong/Incomplete address	0	0	0	0
	F) Others	3	4	5	12
	Total	3	4	5	12
4	Discrepancy in age of beneficiaries	0	0	0	0
5	TT received during the pregnancy	5	6	6	17
6	IFA tablet received during the pregnancy	5	6	6	17
7	IFA consumed as per instruction	5	6	6	17
8	Received three Ante natal check up	5	6	6	17
9	No of women have gone through delivery	5	6	6	17
9.1.	No. of Instts Deliveries	5	5	5	15
10	DDK used during delivery	5	5	5	15
11	Child fed within 30 minute of delivery	1	2	3	6
12	Used colostrums as per advise	1	2	3	6
13	Exclusive Breast feeding	0	0	0	0
14	Three post natal check up	5	6	6	17

Field Verification of JSY Clients

MONTHLY PERFORMANCE REPORT ON TECHNICAL ACTIVITIES FOR ROH&FW

Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
1	Total No of beneficiaries selected	8	10	11	29
2	Total beneficiaries contacted	5	6	6	17
S3	Beneficiaries could not be contacted due to				
	A) No such person living in the area.	0	0	0	0
	B) Left the place temporarily.	0	0	0	0
	C) Left the place permanently	0	0	0	0
	D) Dead	0	0	0	0
	E) Wrong/Incomplete address	0	0	0	0
	F) Others	3	4	5	12
	Total	3	4	5	12
4	Discrepancy in reporting of beneficiaries	0	0	0	0
5	TT received during the pregnancy	5	6	6	17
6	IFA tablet received during the pregnancy	5	6	6	17
7	IFA consumed as per instruction	5	6	6	17
8	Received three Ante natal check up	5	6	6	17
9	Three post natal check up	5	6	6	17
10	Monetary benefit under JSY	1(1900) 4(1650)	1(500) 5(1650)	1(500) 1(1000) 4(1650)	2(500) 1(1000) 13(1650) 1(1900)
11	Satisfied with services	5	6	6	17

Form 7.1 (I)

FIELD VERIFICATION OF Sterilization Cases

5.4.1. Field verification of Clients practicing Contraceptive methods – Sterilization					
Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
1	# of selected cases	No	5	7	12
2	# of contacted cases	List	4	4	8
S 3	Cases not contacted due to	&			
A	NSP	Register	0	0	0
B	IA/WA	Not	0	0	0
H	PO	Available	0	0	0
D	TO		1	0	1
E	Others		0	3	3
	Total		1	3	4
4	Discrepancy		0	0	0
A	Age of acceptors		0	0	0
B	Age of spouse		0	0	0
D	No. of Total child		0	0	0
E	No.of Male child		0	0	0
	Total		0	0	0
5	Ineligible Cases		0	0	0
6	Denial/ Fake				
A	Denial cases		0	0	0
B	Fake cases		0	0	0
C	Double reported cases		0	0	0
	Total		0	0	0
7	Follow up by Staff out of found genuine cases		4	4	8
8	Pregnancy during the use of method out of found genuine cases		0	1	1
	Complaints if any out of found genuine cases		0	1	1
10	Satisfied with method out of found genuine cases		4	3	7

Form -7.1 (ii)

Field verification of Clients practicing – IUDs Methods

Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
1	# of selected cases	No	3	No	11
2	# of contacted cases	List	2	List	7
3	Cases not contacted due to	&		&	
A	NSP	Register	0	Register	0
B	IA/WA	Not	0	Not	0
H	PO	Available	0	Available	0
D	TO		1		1
E	Others		0		0
	Total		1		1
4	Discrepancy				
A	Age of acceptors		0		0
B	Age of spouse		0		0
D	No. of Total child		0		0
E	No. of Male child		0		0
	Total		0		0
5	Ineligible Cases		0		0
6	Denial/ Fake				
A	Denial cases		0		0
B	Fake cases		2		2
C	Double reported cases		0		0
	Total		2		2
7	Follow up by Staff out of found genuine cases		0		0
8	Pregnancy during the use of method out of found genuine cases		0		0
9	Complaints if any out of found genuine cases		0		0
10	Satisfied with method out of found genuine cases		0		0

Form 7.1 (iii)

Field verification of Clients practicing - Oral Pills Contraceptive methods

Sl. No.	Action points	Nawgoi	Ujjiarpur	Jilda	Total
1	# of selected cases	No	6	No	8
S 2	# of contacted cases	Reg.	3	Reg.	5
3	Cases not contacted due to	available		available	
A	NSP	&	0	&	0
B	IA/WA	No	0	No	0
H	PO	List	0	List	0
D	TO	NA	0	NA	0
E	Others	NA	3	NA	3
	Total	0	3	0	3
4	Discrepancy	NA		NA	
A	Age of acceptors	NA	0	NA	0
B	Age of spouse	NA	0	NA	0
D	No. of Total child	NA	0	NA	0
E	No. of Male child	NA	0	NA	0
	Total	NA	0	NA	0
5	Ineligible Cases	NA	0	NA	0
6	Denial/ Fake				
A	Denial cases	NA	0	NA	0
B	Fake cases	NA	1	NA	1
C	Double reported cases	NA	0	NA	0
	Total	NA	1	NA	1
7	Follow up by Staff out of found genuine cases	NA	2	NA	2
8	Pregnancy during the use of method out of found genuine cases	NA	0	NA	0
*9	Complaints if any out of found genuine cases	NA	*2	NA	2
10	Satisfied with method out of found genuine cases	NA	0	NA	0

* 9. Not Regular provided Oral Pills contraceptive

FORM 7.3 (iii)					
MONTHLY PERFORMANCE REPORT ON TECHNICAL ACTIVITIES FOR ROH&FW					
INFORMATION ON Community satisfaction of Mother for Work of ANMs					
Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
S1	ANMs visited village regularly	1/5	6/6	3/6	10/17
2	Mothers had some problem in last pregnancy	0	0	0	0
3	Mothers received timely advices for getting treatment	0	6	3	9
4	Institutional deliveries	5	5	5	15
5	Babies weighed after birth	5	6	5	16
6	Mothers aware about JSY	5	5	5	15
7	Mothers received three PNC	1	4	0	5
8	Mothers advised regarding colostrums	1	2	3	6
9	Mothers get information about proper breast feeding	0	5	5	10
10	Mothers have knowledge about the dangerous sign of ARI-	0	2	3	5
11	Mothers have knowledge about fluid that is to be given during diarrhea	0	1	3	4
12	Mothers have knowledge about schedule of Child immunization	1	2	3	6
13	Mothers aware about the disease for which immunization given to their child -	1	2	3	6
14	Mothers aware about the immunization against measles to be given in the 9th month	1	2	3	6
15	Awareness of mothers about the contraceptive method -	0	2	3	5
16	Mothers aware about the side effect of the contraceptive.	0	2	3	5
17	Awareness about the ideal gap between two children	1	4	4	9

Community satisfaction of Mother for Work of ASHA

Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
1	ASHA visited mothers during period from pregnancy to delivery	5	6	3/6	14/17
2	Mothers Received three ANC	5	6	3	14
3	Mothers had some problem in last pregnancy	0	0	0	0
4	Mothers received timely advices for getting treatment	5	6	3	14
5	Institutional deliveries	5	5	3	13
6	Babies weighed after birth	5	5	5	15
7	Mothers received three PNC	5	5	3	13
8	Mothers get information about proper breast feeding	5	6	3	14
9	Mothers have knowledge about the dangerous sign of ARI.	0	2	1	3
10	Mothers have knowledge about fluid that is to be given during diarrhea	0	1	2	3
11	Mothers have knowledge about the immunization given to their child	0	2	2	4
12	Mothers have knowledge about that the immunization against measles given in the ninth month	0	2	2	4

Form 7.3 (i)

Key Information from sarpanchs (PRI) on the work of ANMs

Sl. No.	Action points	Jilda	
	No. of Panchayat Members contacted	1	
1	Do you know about NRHM?	DK	
2	Activities of NRHM are smoothly functioning ?	DK	
3	Whether the JSY benefited to all the villagers?	1	
4	Do you know about untied funds?	1	
5	Do you have a Joint account with ANM in bank for untied funds?	0	
6	Is there proper utilization of untied funds?	1	
7	Are the Villagers are benefited out of the untied funds?	1	
8	In your village when and where the health camps are organized?	1	
9	Who is ASHA in your Village?	1	
10	You know about the functioning of ASHA?	1	
11	Know about the how many Link Worker are working in your Village?	0	
12	In your village whether the cases of Institutional deliveries are increased?	0	
13	Any Polio case found in your Village?	0	
14	Is there regular immunization of children from time to time in your Village?	1	

(iv) Field verification of Clients practicing - Condom Contraceptive methods

Sl. No.	Action points	Nawgoi	Ujiyarpur	Jilda	Total
1	# of selected cases	No	5	No	8
S 2	# of contacted cases	List	3	List	5
3	Cases not contacted due to	&		For	
A	NSP	Register	0	The	0
B	IA/WA	Not	0	Year	0
H	PO	available	0	2011-	0
D	TO	NA	0	12	0
E	Others	NA	2	&	2
	Total		2	2012-	2
4	Discrepancy	NA		13	0
A	Age of acceptors	NA	0	NA	0
B	Age of spouse	NA	0	NA	0
D	No. of Total child	NA	0	NA	0
E	No. of Male child	NA	0	NA	0
	Total	NA	0	NA	0
5	Ineligible Cases	NA	0	NA	0
6	Denial/ Fake				
A	Denial cases	NA	0	NA	0
B	Fake cases	NA	3	NA	3
C	Double reported cases	NA	0	NA	0
	Total	NA	3	NA	NA
7	Follow up by Staff out of found genuine cases	NA	0	NA	0
8	Pregnancy during the use of method out of found genuine cases	NA	0	NA	0
9	Complaints if any out of found genuine cases	NA	0	NA	0
10	Satisfied with method out of found genuine cases	NA	0	NA	0

Form 7.3 (iv)

Patient's SATISFACTION

S. No	Particulars	P1	P2	P3	P4	P7
	1 Socio-economic correlation					
i	Age	19	45	58	26	32
ii	sex	male	Male	male	Female	male
iii	education	12 TH	8TH	1ST	8TH	BA
iv	race	Indian	Indian	Indian	Indian	Indian
v	marital status	Unmarried	Married	Married	Married	Married
vi	facility size	06	06	12	03	04
vii	occupation	student	laborer	Gove job	housewife	business
viii	income	00/Mt	2000/Mt	3000/mt	1500/Mt	1800/mt
ix	social class	BPL	BPL	BPL	BPL	BPL
	2 Art of Care					
i	friendliness	Yes	Yes	Yes	Yes	Yes
ii	Patience, sincerity	Good	Good	Yes	Good	Good
iii	Consideration, concern	Good	Good	Good	Good	Good
iv	Disrespect, embarrassment	No	No	No	No	No
v	Hurt, insult	No	No	No	No	No
vi	making worry, abruptness	Yes	Yes	Yes	No	No
	2 Technical Quality of Care					
i	Ability, accuracy	Good	Not Known	Not Known	Not Known	Not Known
ii	Experience, thoroughness	Not Known	Not Known	Not Known	Not Known	Not Known
iii	training	Na	Na	Not Known	Not Known	Not Known
iv	defective equipments	No	Na	Na	Na	Na
v	over prescribing	No	No	No	No	No
vi	outdated regimens	No	No	No	No	No
vii	taking unnecessary risk	No	No	No	No	No

	3	Accessibility/Convenience					
i		easy appointment	Yes	Yes	Yes	Yes	Yes
ii		care facility is far away(>3Km)	No	No	No	No	No
iii		Lot of time and efforts to get care	No	No	No	No	Yes
iv		convenience location	Yes	Yes	Yes	Yes	Yes
v		conveyance timing	20min	15min	5min	2min	15min
vi		long waiting time	No	No	No	No	No
vii		telephonic consultation available	No	No	No	No	No
viii		home care provided	No	No	No	No	No
	4	Finance					
i		Care services are free of cost	Yes	Yes	Yes	Yes	Yes
ii		Drugs are provided free of cost & adequate	No	No	No	No	No
iii		Investigations are undertaken in hospital free of cost	No	Na	No	No	No
iv		Have to pay consultation fee	No	No	No	No	No
v		have to pay for drugs	No	No	No	No	No
vi		have to pay for tests	No	No	No	Yes	Yes
vii		have to bribe to get services	No	No	No	No	No
	5	Physical Environment					
i		Pleasant atmosphere	Yes	Yes	Yes	Yes	No
ii		comfort of seating	Yes	Yes	Yes	Yes	No
iii		Attractiveness of waiting room	No	No	No	No	No
iv		clarity of sign & directions	No	Yes	No	Yes	No
v		good lighting	Yes	Yes	Yes	Yes	No
vi		quite	No	No	Yes	Yes	Yes
vii		Neat & clean	No	Yes	No	Yes	No
viii		Orderly facility & equipment	Na	Na	Na	Na	Na

FORM 7.3 (v)

5	Use of Skills and Abilities							
i	Opportunities to utilize skills & talents	YES	NO	YES	NO	YES	NO	YES
ii	Opportunities to learn new skills	NO	NO	NO	NO	NO	NO	NO
iii	Support for additional training	NO	YES	YES	YES	NO	NO	NO
iv	It is a challenging Job	YES	YES	YES	YES	YES	YES	YES
v	Provides all resources & Logistics	NA	NA	NA	NA	NA	NA	NA
6	Work Activities							
i	Variety of job responsibilities	NO	NO	NO	YES	YES	YES	NO
ii	Independence of your work Role	YES	YES	YES	NO	YES	YES	YES
iii	Opportunities for periodic changes in duties	NO	NO	NO	NO	NO	NO	NO
iv	Flexibility of Scheduling	NO	NO	NO	NO	NO	NO	NO
v	Fixed duty rosters	YES	YES	YES	NO	YES	NO	YES
7	Personal							
i	Residential accommodation provided	NO	NO	NO	NO	NO	NO	NO
ii	Transportation arranged for duties	NO	NO	NO	NO	NO	NO	NO
iii	benefits for children education	NO	NO	NO	NO	NO	NO	NO
iv	Health insurance of family members	NO	NO	NO	NO	NO	NO	NO
v	Risk coverage/life insurance	NO	NO	NO	NO	NO	NO	NO