

DISTRICT LEVEL SELF-ASSESSMENT CHECKLIST

Name of the State: _____ Name of the District: _____ Date of Assessment: _____

Name of assessor: _____ Designation of the assessor: _____

Section 1) Program Implementation

Governance and Accountability

Review Mechanisms at District *(Respondent – District Immunization Officer)*

Questions	Responses
1. Number of DTFI meetings held in the last financial year (2018-19)? (Verify minutes of meeting)	_____
2. Has District Task Force for Urban Immunization (DTFUI) been constituted for district HQ urban area?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
3. If Yes, no. of District Task Force for Urban Immunization (DTFUI) / City Task Force for urban Immunization (CTFUI) meetings held in 2018-19 (Verify meeting minutes)	_____ _____
4. How many exclusive Quarterly RI review meetings held at district level (with Block officials / MOs, and other stakeholders) in 2018-19?	0/1/2/3/4
5. In how many exclusive quarterly RI review meetings did ICDS representative participate in the last FY?	0/1/2/3/4

Fund Utilization/Expenditure *(Respondent - NHM Cell/District Program Management Unit - District Program Manager)*

	(%)
1. For last FY, What % of fund allocated for mobilization of children through ASHA has been utilized?	_____
2. For last FY, What % of fund allocated for ASHA incentive (for children achieving full immunization and complete immunization) has been utilized?	_____
3. For last FY, What % of fund allocated for AVD has been utilized?	_____

Inter-Sectoral Coordination *(Respondent – District Immunization Officer)*

Questions	Responses
1. Does a joint concurrent monitoring mechanism for RI (partners with government) exist at the district?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA If Yes, then with which partner/s _____
2. Has district received any directives for the AAA (ANM, ASHA, AWW) convergence meetings from state?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Has district issued any directives for the AAA convergence meetings to blocks?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Infrastructure

Infrastructure *(Respondent: Planning cell - nodal person identified by CMO/DIO)*

Mention numbers (no. of health facility in a district) against each question and if information is not available, then mention 'NA'				
Total population of the district _____		Urban Population _____		Rural Population _____
Blocks _____	Rural Planning units _____	Urban Planning units _____	Wards _____	Villages _____
Rural CHCs _____	Rural PHCs _____	Number of NUHM cities _____	Urban CHCs _____	Urban PHCs _____
Sub-centres _____	Vacant sub-centres _____ Status as on date: DD/MM/YYYY	SC with one ANM _____ Status as on date: DD/MM/YYYY	SC with two ANMs _____ Status as on date: DD/MM/YYYY	SC with more than 2 ANMs (other than delivery points) _____ Status as on date: DD/MM/YYYY
Cold chain points _____	Total High Risk Areas _____	No of Health & wellness Centres _____	Others _____	

Human Resource (Respondent: Establishment cell - nodal person identified by CMO/DIO)
Mention numbers against each question and if information is not available then tick accordingly

Questions	Responses				
1. Is full time District Immunization Officer (DIO)/ RCHO assigned in the district?	<input type="checkbox"/> Yes, without any additional charge <input type="checkbox"/> Yes, with additional charges <input type="checkbox"/> No				
2. Is there an assigned urban nodal officer for immunization at the district level other than DIO/RCHO?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
3. Total number of MOs & Supervisors and other staff in the district (Both regular & Contractual)		Rural		Urban	
		Sanctioned	Currently posted	Sanctioned	Currently posted
	Allopathy MO				
	AYUSH MO				
	Mid-Level Health Care Provider				
	HS				
	LHV				
PHN					

	ASHA supervisor				
	Any other supervisory cadre				
	ANM (total)				
	Total ANMs posted at PHC/CHC (including delivery points)				
	Total ANMs involved in RI and outreach activities posted at PHC/CHC				
	ASHA				
	AWW				
	Urban health planning Manager/co nsultant (for Urban)/Urban Health Coordinator				
	Public Health Manager (Per UPHC)				
4. Total number of Mahila Aarogya Samiti (MAS*) <i>*MAS is Self Help Group especially formed for urban slum areas to help urban ASHAs</i>	Expected _____ Existing _____				
5. Whether the district has a Cold Chain Technician?	<input type="checkbox"/> Yes, based at district <input type="checkbox"/> Yes, based at division/region <input type="checkbox"/> Yes, based at state <input type="checkbox"/> No , but outsourced <input type="checkbox"/> No				
6. Total number of Cold chain handlers in the district	Primary ----- Additional -----				

Capacity Building

	2016-17			2017-18			2018-19		
	Total Available	Planned	Trained	Total Available	Planned	Trained	Total Available	Planned	Trained
1. Health Workers training on Immunization handbook for HW (2 Days)									
2. Cold Chain Handlers on VCCH Module 2016									

Supportive Supervision

Supportive Supervision (Respondent: District Immunization Officer)

Questions	Responses
1. Have poor performing blocks been identified in the district?	<input type="checkbox"/> Yes, Number of poor performing blocks _____ <input type="checkbox"/> No Specify the criteria for selection _____
2. Whether the poor performing blocks have been assigned by name to district officials?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Poor performing blocks not identified Number of Poor performing blocks assigned to district officials _____
3. Is there any supervision format exclusive for RI being used in the district?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. How many supervisory formats had been filled for RI in the district in the last quarter of financial year 2018-19?	By District officials _____, By Block Officials, By Supervisory cadres, By any other _____
5. If any, does the district have any mechanism of collation and compilation of feedback from supervision format?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Is there any documentation regarding supervisory visit feedback shared with the blocks?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. If feedback has been documented (Letter/Mail), what is the frequency of sharing feedback?	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Need based
8. Is there any documentation regarding any state/divisional level officer's visit to the district in last 3 months for supervision of RI?	<input type="checkbox"/> Yes <input type="checkbox"/> No

AEFI and VPD Surveillance

AEFI and VPD Surveillance (Respondent: District Immunization Officer)

Questions	Responses
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1. Whether the district has updated list of AEFI committee members list?	<input type="checkbox"/> Within 1 year <input type="checkbox"/> More than 1 year <input type="checkbox"/> Not constituted <input type="checkbox"/> Not revised since constitution			
2. No. of district AEFI committee meetings held in the last financial year (verify minutes)	0/1/2/3/4			
3. Number of severe/serious AEFI cases reported in FY	2016-17 _____ 2017-18 _____ 2018-19 _____			
4. Whether there are any severe/serious AEFI cases in which CRF has not been received within 24 hours and PCIF not filled within 10 days of notification	<input type="checkbox"/> Yes, CRF <input type="checkbox"/> Yes, PCIF <input type="checkbox"/> No			
5. Has the district reported any suspected measles case in last three years?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
6. How many suspected measles outbreak reported and investigated in last financial year?	Measles outbreak reported _____ Measles outbreak with detailed investigation _____			
7. How many laboratory confirmed measles outbreak occurred in last financial year?	Laboratory confirmed measles outbreak reported _____			
8. How many suspected measles cases were reported in the last three months?		HMIS	IDSP	DIO office
	Suspected measles cases			

Section 2) Logistics & Supply Chain

Logistics & Supply Chain				
Questions	Response			
1. Is DIO trained on revised Vaccine and Cold chain handler (VCCH-2016) module and eVIN (Multiple answers allowed)	<input type="checkbox"/> VCCH module 2016	<input type="checkbox"/> eVIN		
2. Is CCH and additional CCH assigned for the DVS	<input type="checkbox"/> Only CCH assigned <input type="checkbox"/> Both CCH & additional assigned <input type="checkbox"/> None assigned			
3. Are CCHs at DVS trained on revised Vaccine and Cold chain handler (VCCH-2016) module	<input type="checkbox"/> Both CCH	<input type="checkbox"/> One CCH	<input type="checkbox"/> None	
4. Are CCHs at DVS trained on eVIN	<input type="checkbox"/> Both CCH	<input type="checkbox"/> One CCH	<input type="checkbox"/> None	<input type="checkbox"/> NA
5. Number of functional and in use WIC/WIF at DVS	WIC _____	WIF _____	NA ____	
6. Number of ILRs at DVS	Functional _____	In use _____	Non- functional _____ Beyond economic repair _____	

7. Number of DFs at DVS	Functional _____ In use _____ Non- functional _____ Beyond economic repair _____																				
8. Total number of functional (and in use) CCE with separate functional stabilizer	ILR _____ DF _____																				
9. Is the temperature recorded twice daily for all in use CCEs?	<input type="checkbox"/> Yes , on all days (including Sundays/holidays) <input type="checkbox"/> Yes , on working days only <input type="checkbox"/> No																				
10. Are there records for cleaning of ILR/DF and defrosting of DF maintained in temperature logbook?	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
11. Are the vaccines stored as per guideline of the ILR	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
12. Is the stock register updated for vaccines, diluents, syringes	Vaccines: <input type="checkbox"/> Yes <input type="checkbox"/> No Diluents: <input type="checkbox"/> Yes <input type="checkbox"/> No Syringes: <input type="checkbox"/> Yes <input type="checkbox"/> No																				
13. Number of stock outs observed for given vaccines (BCG, OPV, Penta, Measles/MR) in the past 3 months	<table border="1"> <thead> <tr> <th>Name of vaccine</th> <th>No. of Stock outs</th> </tr> </thead> <tbody> <tr> <td>BCG</td> <td></td> </tr> <tr> <td>OPV</td> <td></td> </tr> <tr> <td>Measles/MR</td> <td></td> </tr> <tr> <td>Pentavalent</td> <td></td> </tr> <tr> <td>BCG diluent</td> <td></td> </tr> <tr> <td>Measles/MR diluent</td> <td></td> </tr> <tr> <td>AD 0.1 ml</td> <td></td> </tr> <tr> <td>AD 0.5 ml</td> <td></td> </tr> <tr> <td>5 ml reconstitution syringes</td> <td></td> </tr> </tbody> </table>	Name of vaccine	No. of Stock outs	BCG		OPV		Measles/MR		Pentavalent		BCG diluent		Measles/MR diluent		AD 0.1 ml		AD 0.5 ml		5 ml reconstitution syringes	
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Measles/MR diluent																					
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5 ml reconstitution syringes																					
14. Is there any functional power backup available (generator, invertor etc.) for CCE	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
15. Is the contingency plan for cold chain and vaccine logistics displayed at vaccine store (Multiple answers allowed)	<input type="checkbox"/> Plan for prolonged electricity failure (More than 8 hours) <input type="checkbox"/> Plan for malfunctioning of storage equipment <input type="checkbox"/> No plan available																				
16. No. of CCEs beyond economic repair pending for condemnation at district since last 3 years																					
17. Is the CCT trained in CCE repair in the last 3 years	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA																				
18. Does the CCT have a tool kit	<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> No kit available																				
19. Is the plan for preventive maintenance for CCT visit available at DVS	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
20. Number of supervisory visits by DIO documented in the last 3 months at the DVS																					

Section 3) Data Recording & Reporting System

Data Recording & Reporting System	
Questions	Response
1. Data management (including immunization data) or M&E person available at district	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Is there any Computer Assistant available to support the DIO	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Are VPD - D001 weekly reports for last quarter available with the district?	_____ out of 13 (expected in last quarter)
4. In how many VPD-D001 weekly reports available for the last completed quarter, serious and severe AEFIs has been filled (including 'NIL' reporting)?	in ___ out of ___ available VPD- D001 reports
5. Are VPD-H002 reports available for all RUs (reporting unit) for the last month?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Which platforms/portal are you using for name-based tracking of beneficiaries of vaccination (Multiple choice allowed)	<input type="checkbox"/> RCH <input type="checkbox"/> ANMOL _____ <input type="checkbox"/> State specific portal <input type="checkbox"/> None
7. Number of villages mapped in RCH/state portal	Number of villages mapped in RCH/state portal _____ Total villages in the district _____
8. No. of children (0-1 year) registered in the RCH/state portal out of the total children estimated in the last FY 2018-19.	No. of children (0-1 year) registered in portal _____ Estimated children (0-1 year) in the district _____
9. Does the district -has updated coverage monitoring chart (till last month) for relevant antigens (Penta 1 to Penta 3 coverage and left outs)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Whether district is still reporting Hepatitis B-1, 2, 3 in HMIS during last 6 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section 4) Programme Communication

Programme Communication

Questions	Responses
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1. Does a documented district RI communication plan for current year exist?	<input type="checkbox"/> Yes <input type="checkbox"/> No												
2. What components of communication are included in the RI communication plan? (multiple choice allowed)	<input type="checkbox"/> Advocacy <input type="checkbox"/> Capacity Building <input type="checkbox"/> Social Media <input type="checkbox"/> Special plans for HRAs/ vaccine hesitancy areas												
3. Is a nodal officer assigned for IEC at the district?	<input type="checkbox"/> Yes, Designation: _____ <input type="checkbox"/> No												
4. Of the total number of planning units, how many planning units have submitted RI communication plans for year 2019-20?	Total planning units (both urban and rural) _____ No. of units who have submitted RI Communication plans _____												
5. Were communication issues discussed during the last DTFI? (Verify minutes)	<input type="checkbox"/> Yes <input type="checkbox"/> No												
6. Is district level ToT for BRIDGE IPC for FLWs completed?	<input type="checkbox"/> Yes, Date of ToT: _____ <input type="checkbox"/> No												
7. BRIDGE training Out of the total number of participants planned, how many have been trained till now?	<table border="1"> <thead> <tr> <th>Heath worker cadre</th> <th>Total</th> <th>Trained</th> </tr> </thead> <tbody> <tr> <td>ANM (Regular + Contractual)</td> <td></td> <td></td> </tr> <tr> <td>ASHA</td> <td></td> <td></td> </tr> <tr> <td>AWW</td> <td></td> <td></td> </tr> </tbody> </table>	Heath worker cadre	Total	Trained	ANM (Regular + Contractual)			ASHA			AWW		
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	ANM (Regular + Contractual)												
	ASHA												
AWW													
8. Is there a designated media spokesperson at the district level?	<input type="checkbox"/> Yes <input type="checkbox"/> No												
9. If Yes, Has the spokesperson/s been trained on media management during crisis?	<input type="checkbox"/> Yes <input type="checkbox"/> No												
10. Has any media workshop for RI been organized in 2018-19? (Not for campaigns or introduction of new vaccines)	<input type="checkbox"/> Yes <input type="checkbox"/> No												