





**UPHMIS (Uttar Pradesh Health Management Information System)** 

## Standard Operating Procedure

(Volume -1 as on May 2017)

## National Health Mission Government of Uttar Pradesh

Supported by: UPTSU, Uttar Pradesh

	1				UPHMIS Standard Operating Procedure (SOP), L			
SN	Data element	Level of reporting		ting	Data element definition	Guidance of data collection and validation	Data source	
		SC	PHC	СНС	DH			
						Section A - Human resource		
A1.1	Doctors (Level 1 & above)	No	Yes	Yes	Yes	Regular Number of doctors (Level 1 & above) working in the facility during the reporting month.	All the doctors (L1 & above) who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.2	Physician	No	No	Yes	Yes	Regular & contractual Number of physicians working in the facility during the reporting month.	Physicians who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.3	Paediatrician	No	No	Yes	Yes	Regular & contractual Number of Paediatricians working in the facility during the reporting month.	Paediatricians who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.4	Radiologist	No	No	Yes	Yes	Regular & contractual Number of Radiologists working in the facility during the reporting month.	Radiologists who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.5	Gynaecologist & Obstetrics	No	No	Yes	Yes	Regular & contractual  Number of Gynaecologists & Obstetrics working in the facility during the reporting month.	Number of Gynaecologist and Obstetrics who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.6	Anaesthetists	No	No	Yes	Yes	Regular & contractual Number of Anaesthetists working in the facility during the reporting month.	Number of Anaesthetists who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.7	Pathologist	No	No	Yes	Yes	Regular & contractual Number of Pathologists working in the facility during the reporting month.	Number of Pathologist who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.8	General surgeon	No	No	Yes	Yes	Regular & contractual Number of General surgeons working in the facility during the reporting month.	Number of General surgeon who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.9	Dental surgeon	No	No	Yes	Yes	Regular & contractual Number of Dental surgeons working in the facility during the reporting month.	Number of Dental surgeon who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.10	Ortho surgeon	No	No	No	Yes	Regular & contractual Number of Ortho surgeons working in the facility during the reporting month.	Number of Ortho surgeon who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.11	ENT surgeon	No	No	No	Yes	Regular & contractual Number of ENT surgeons working in the facility during the reporting month.	Number of ENT surgeon who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.12	Total surgeon	No	No	No	Yes	Regular & contractual Number of total surgeons working in the facility during the reporting month.	Number of total surgeon who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.13	Chest & TB specialist	No	No	No	Yes	Regular & contractual Number of Chest & TB specialists working in the facility during the reporting month.	Number of Chest & TB specialist who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.14	Skin & VD specialist	No	No	No	Yes	Regular & contractual Number of Skin & VD specialists working in the facility during the reporting month.	Number of Skin & VD specialist who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record

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A1.15	Other specialist	No	No	Yes	Yes	Regular & contractual  Number of other specialists working in the facility during the reporting month.	Number of other specialists who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.16	MBBS male MO	No	Yes	Yes	Yes	Regular & contractual Number of MBBS male MO working in the facility during the reporting month.	Number of MBBS male MO who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.17	MBBS female MO	No	Yes	No	Yes	Regular & contractual Number of MBBS female MO working in the facility during the reporting month.	Number of MBBS female MO who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.18	EMO (Emergency Medical Officer)	No	No	Yes	Yes	Regular & contractual Number of Emergency Medical Officer working in the facility during the reporting month.	Number of Emergency Medical Officer who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.19	Medical officer AYUSH- (Male)	No	Yes	Yes	Yes	Regular & contractual Number of medical officer AYUSH (male) working in the facility during the reporting month.	Number of Emergency Medical Officer (male) who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.20	Medical officer AYUSH- (Female)	No	Yes	Yes	Yes	Regular & contractual Number of medical officer AYUSH (female) working in the facility during the reporting month.	Number of Emergency Medical Officer (female) who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.21	Staff nurse	No	Yes	Yes	Yes	Regular & contractual Number of staff nurse working in the facility during the reporting month.	Number of staff nurse who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.22	Ward boy	No	Yes	Yes	Yes	Regular & contractual Number of ward boy working in the facility during the reporting month.	Number of ward boy who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.23	X-ray technician	No	Yes	Yes	Yes	Regular & contractual Number of X-ray technician working in the facility during the reporting month.	Number of X-ray technician who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.24	Optometrist	No	Yes	Yes	Yes	Regular & contractual Number of Optometrist working in the facility during the reporting month.	Number of Optometrist who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.25	Physiotherapis t	No	No	No	Yes	Regular & contractual Number of Physiotherapist working in the facility during the reporting month.	Number of Physiotherapist who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.26	Total class IV employees	No	Yes	Yes	Yes	Regular & contractual Number of class IV employees working in the facility during the reporting month.	Number of class IV employees who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.27	Lab technician (LT/LA)	No	Yes	Yes	Yes	Regular & contractual Number of Lab technician (LT/LA) working in the facility during the reporting month.	Number of Lab technician (LT/LA) who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record

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		sc	PHC	СНС	DH			
A1.28	Pharmacist	No	Yes	Yes	Yes	Regular & contractual Number of Pharmacist working in the facility during the reporting month.	Number of Pharmacist who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.29	ARO availaible (Y/N)	No	No	Yes	Yes	Regular Whether Assistant research officer (ARO) is available in the facility during the reporting month or not.	Whether Assistant research officer (ARO) who is currently working in the facility irrespective of his/her posting required to be reported here. The name of the ARO must be in the attendance register.	Attendance register/Biom atric record
A1.30	HEO availaible (Y/N)	No	No	Yes	Yes	Regular Assistant research officer (ARO) is available in the facility during the reporting month.	Assistant research officer (ARO) who is currently working in the facility irrespective of his/her posting required to be reported here. The name of the ARO must be in the attendance register.	Attendance register/Biom atric record
A1.31	BPM availaible (Y/N) (applicable for only BCHC/BPHC)	No	No	Yes	No	Contractual Whether Block Program Manager (BPM) is available in the facility during the reporting month or not.	Whether Block Program Manager (BPM) who is currently working in the facility irrespective of his/her posting required to be reported here in yes or no. The name of the BPM must be in the attendance register.	Attendance register/Biom atric record
A1.32	BCPM availaible (Y/N) (applicable for only BCHC/BPHC)	No	No	Yes	No	Contractual Whether Block Community Program Manager (BCPM) is available in the facility during the reporting month or not.	Whether Block Community Program Manager (BCPM) who is currently working in the facility irrespective of his/her posting required to be reported here in yes or no. The name of the BCPM must be in the attendance register.	Attendance register/Biom atric record
A1.33	BAM availaible (Y/N) (applicable for only BCHC/BPHC)	No	No	Yes	No	Contractual Whether Block Account Manager (BAM) is available in the facility during the reporting month or not.	Whether Block Account Manager (BAM) who is currently working in the facility irrespective of his/her posting required to be reported here in yes or no. The name of the BAM must be in the attendance register.	Attendance register/Biom atric record
A1.34	Data entry op./MCTS operator availaible (Y/N)	No	No	Yes	Yes	Contractual Whether data entry operator/MCTS operator is available in the facility during the reporting month or not.	Whether data entry operator/MCTS operator who is currently working in the facility irrespective of his/her posting required to be reported here in yes or no. The name of the data entry operator/MCTS operator must be in the attendance register.	Attendance register/Biom atric record
A1.35	FP counsellors	No	Yes	Yes	Yes	Contractual Number of FP counsellors working in the facility during the reporting month.	Number of FP counsellors who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.36	ARSH counsellors	No	Yes	Yes	Yes	Contractual Number of ARSH counsellors working in the facility during the reporting month.	Number of ARSH counsellors who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.37	ANMs	Yes	Yes	Yes	Yes	Regular & contractual Number of ANMs working in the facility during the reporting month.	Number of ANMs/BHWs/MPW female who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.38	MPW male	Yes	No	No	No	Regular & contractual Number of MPW (Multi Purpose Worker) male working in the facility during the reporting month.	Number of MPW (Multi Purpose Worker) male who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A1.39	GNM	Yes	No	No	No	Regular & contractual Number of GNMs (General Nursing and Midwifery) working in the facility during the reporting month.	Number of GNMs (General Nursing and Midwifery) who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record

SN	Data element	Leve	of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
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A1.40	Female sweeper	Yes	No	No	No	Contractual Number of female sweeper working in the facility during the reporting month.	Number of female sweeper who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
						HR working in blood bank		
A2.1	Pathologist	No	No	No	Yes	Regular & contractual Number of Pathologists working in the facility during the reporting month.	Number of Pathologists who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A2.2	Medical officer	No	No	No	Yes	Regular & contractual Number of Medical Officer working in the facility during the reporting month.	Number of Medical Officer who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A2.3	Staff nurse	No	No	No	Yes	Regular & contractual  Number of Staff nurse working in the facility during the reporting month.	Number of Staff nurse who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A2.4	Pharmasist	No	No	No	Yes	Regular & contractual Number of Pharmasist working in the facility during the reporting month.	Number of Pharmasist who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A2.5	SLT	No	No	No	Yes	Regular & contractual Number of senior lab technicians working in the facility during the reporting month.	Number of senior lab technicians who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A2.6	LT	No	No	No	Yes	Regular & contractual Number of lab technicians working in the facility during the reporting month.	Number of lab technicians who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A2.7	LA	No	No	No	Yes	Regular & contractual Number of lab assistants working in the facility during the reporting month.	Number of lab assistants who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A2.8	PRO/Counsello r/Medical social worker	No	No	No	Yes	Regular & contractual Number of Public Relations Officer/Counsellor/Medical social worker in the facility during the reporting month.	Number of Public Relations Officer/Counsellor/Medical social worker who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
A2.9	Class IV employee	No	No	No	Yes	Regular & contractual Number of Class IV employee in the facility during the reporting month.	Number of Class IV employee who are currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Attendance register/Biom atric record
						ASHA (applicable for only BCHC/BPHC)		
A3.1	ASHA sangini approved in block	No	No	Yes	No	Number of ASHA sangini approved in the block.	Number of ASHA Sanginis as approved in the particular financial year's RoP (Record of Proceedings)	District DHAP (District Health Action Plan)
A3.2	ASHA sangini working in block	No	No	Yes	No	Number of ASHA sangini working in the block during the reporting month.	Number of ASHA Sanginies who have submitted Form-2 in the reporting month.	ASHA Sangini payment register
A3.3	ASHA Sangini trained	No	No	Yes	No	Number of ASHA sangini trained in ASHA sangini induction.	As of now, ASHA sanginies are trained in 5 day induction training.	Training register/Atte ndance list

SN	Data element	Leve	el of r	f reporting		Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
A3.4	Urban ASHA approved	No	No	Yes	No	Number of Urban ASHA approved.	Proposed by the state Govt. and approved by the GoI as per RoP (Record of Proceedings) for the said financial year	District DHAP (District Health Action Plan)
A3.5	Urban ASHA filled	No	No	Yes	No	Number of Urban ASHA filled.	Total ASHAs as appointed will be reported here.	Urban ASHA register
A3.6	ASHA approved as per PIP	No	No	Yes	No	Number of ASHA approved as per PIP.	Total new ASHAs as proposed by the state govt. for filling vacant villages/hamlets/unserved areas in the state and as approved by the Gol based on the particular year's RoP.	District DHAP (District Health Action Plan)
A3.7	ASHA filled against approved	No	No	Yes	No	Number of ASHA filled against approved in the block.	Total ASHAs as appointed in the block will be reported here.	ASHA master register
A3.8	ASHA trained in induction/Mod ule 6 & 7	No	No	Yes	No	Induction Number of ASHA attended Induciton training in the block. Round 1 Number of ASHA attended Round 1 training in the block. Round 2 Number of ASHA attended Round 2 training in the block. Round 3 Number of ASHA attended Round 3 training in the block. Round 4 Number of ASHA attended Round 4 training in the block. Round 4 Number of ASHA attended Round 4 training in the block.	Number of ASHA who received 8 days induction training as per the new guideline of GOI which replaces the earlier 5 rounds of 23 days induction training.  Round 1 is of 5 days duration under Mod-6 and 7 HBNC training.  Round 2 is of 5 days duration under Mod-6 and 7 HBNC training.  Round 3 is of 5 days duration under Mod-6 and 7 HBNC training.  Round 4 is of 5 days duration under Mod-6 and 7 HBNC training.	Training register/Atte ndance list/Note sheet
						ASHA & AWW at SC		
A4.1	ASHA sanctioned	Yes	No	No	No	Number of ASHA sanctioned under a sub-centre.	Number of ASHAs to be selected by any district as per the figure shared with the district by the state based on the ROP.	District DHAP
A4.2	ASHA-working	Yes	No	No	No	Number of ASHA working under a sub-centre	All the ASHAs who have claimed or eligible to claim even a single incentive during the last 6 months consecutively conditional to the reception of ASHA induction training (whether of 8 days or of 23 days).	ASHA Performance Monitoring Mechanism
A4.3	AWW sanctioned	Yes	No	No	No	Number of AWW sanctioned under a sub-centre.	ANM needs to clear the sanctioned number AWW under the Sub-centre.	Sub-center register
A4.4	AWW impositioned	Yes	No	No	No	Number of AWW positioned under a sub-centre during the reporting month.		AAA register
				2.5		Section B- HR training status		Tanining C'
B.1.1	CEmOC	No	No	Yes	Yes	MO (MBBS)  Number of medical officers (MBBS) trainied in  Emergency Obstetric  Care (EmOC) at the facility.	Only medical officers are given CEmOC training by Gynaecologist and Pediatrician at medical college and identified DH for 16 weeks.	Training record. Else one needs to meet individual once to know training status.
B.1.2	BEmOC	No	Yes	Yes	Yes	MO (MBBS)  Number of medcial officers trained in BEmOC during the reporting month.	Only medical officers are given BEmOC training by Gynaecologist and Pediatrician at medical college and identified DH for 10 days.	Training record. Else one needs to meet individual once to know training status.
B.1.3	LSAS	No	No	Yes	Yes	MO (MBBS) Number of medical officers trained in Life Saving Anaesthesia Skills (LSAS).	Only medical officers are given LSAS training by Anesthetist at medical college and identified DH for 18 weeks.	Training record. Else one needs to meet individual once to know training status.

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B.1.4	SBA	Yes	Yes	Yes	Yes	MO (AYUSH) Number of medical officers (AYUSH)/ staff nurses/ANMs trained in SBA at the facility. Staff Nurse Number of staff nurses trained in SBA at the facility. ANM Number of ANMs trained in SBA at the facility.	Number of medical officers(AYUSH)/staff nurses/ANMs who are trained in SBA and currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register. ANM, LHV and SN are given SBA training by Gynaecologist, Paediatrician, Nurses and ANM tutors at DH and slected instituions for 21 days.	Training record. Else one needs to meet individual once to know training status.
B.1.5	DAKSHATA	No	Yes	Yes	Yes	MO (MBBS) Number of medcial officers (MBBS) trained in DAKSHATA at the facility. MO (AYUSH) Number of medcial officers (AYUSH) trained in DAKSHATA at the facility. Staff Nurse Number of staff nurse trained in DAKSHATA at the facility. ANM Number of ANMs trained in DAKSHATA at the facility.	The basic objective of Dakshata program is "To improve the quality of Maternal & Newborn care during the Intra and immediate post-partum care, through service providers who are confident and competent". ANM, staff nurse, and medical officers are eligible for Dakshata training. They are trained by master trainers of Dakshata. Dakshata program includes three components such as training of service providers, mentoring of service providers & facility strengthening. The training of service providers at district level is of 3 days & state ToT is of 5 days.	Training record. Else one needs to meet individual once to know training status.
B.1.6	NSSK	Yes	Yes	Yes	Yes	MO (MBBS)  Number of medcial officers (MBBS) trained in NSSK at the facility.  MO (AYUSH)  Number of medcial officers (AYUSH) trained in NSSK at the facility.  Staff Nurse  Number of staff nurse trained in NSSK at the facility.  ANM  Number of ANMs trained in NSSK at the facility.	ANM, staff nurse and MO are eligible for NSSK training. They are trained by MO and Pediatrician at at SDH, CHC and DH for two days.	Training record. Else one needs to meet individual once to know training status.
B.1.7	F-IMNCI	No	No	Yes	Yes	MO (MBBS) Number of medical officers (MBBS) trained in Facility Based Integrated Neonatal and Childhood illness (F-IMNCI). Staff Nurse Number of staff nurses trained in Facility Based Integrated Neonatal and Childhood illness (F-IMNCI).	SN, MO of 24X7 PHC/CHC/DH and Paediatrician are given FIMNCI training by Paediatrician and faculty of Community Medicine department at medical college for 11 days.	Training record. Else one needs to meet individual once to know training status.
B.1.8	IUCD	Yes	Yes	Yes	Yes	MO (MBBS) Number of medcial officers (MBBS) trained in applying Intrauterine contraceptive device (IUCD).  MO (AYUSH) Number of medcial officers (AYUSH) trained in applying Intrauterine contraceptive device (IUCD).  Staff Nurse Number of staff nurses trained in applying Intrauterine contraceptive device (IUCD).  ANM Number of ANMs trained in applying Intrauterine contraceptive device (IUCD).	ANM , LHV, SN and MO are given IUCD insertion training by Gynaecologist/master trainers at DH, SIHFW/DTC for 6 days.	Training record. Else one needs to meet individual once to know training status.

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B.1.9	PPIUCD	Yes	Yes	Yes	Yes	MO (MBBS) Number of medcial officers (MBBS) trained in applying post partum intrauterine contraceptive device (IUCD). MO (AYUSH) Number of medcial officers (AYUSH) trained in applying post partum intrauterine contraceptive device (IUCD). Staff Nurse Number of staff nurses trained in applying post partum intrauterine contraceptive device (IUCD). ANM Number of ANMs trained in applying post partum intrauterine contraceptive device (IUCD).	Gynaecologist, MO and SN are given PPIUCD insertion training by Gynaecologist at medical college/DH for 3 days.	Training record. Else one needs to meet individual once to know training status.
B.1.10	LAP	No	No	Yes	Yes	MO (MBBS) Number of medical officers (MBBS) trained in Laparoscopic sterilization (LAP).	Gynaecologist and surgeons are given Laproscopic Tubal Ligation (LAP) training by certified master trainier in laproscopic sterilization at a medical college for 12 days.	Training record. Else one needs to meet individual once to know training status.
B.1.11	Mini LAP	No	No	Yes	Yes	MO (MBBS) Number of medical officers (MBBS) trained in Minilapsterilization (Minilap).	Medical officers are given Tubal Ligation (Conventional/Minilap) training by certified master trainier in minilap at a medical college and identified DH for 12 days.	Training record. Else one needs to meet individual once to know training status.
B.1.12	DMPA (inj. Antara)	Yes	Yes	Yes	Yes	MO (MBBS) Number of medcial officers (MBBS) trained in injectable contraceptive (DMPA).  MO (AYUSH) Number of medcial officers (AYUSH) trained in injectable contraceptive (DMPA).  Staff Nurse Number of staff nurses trained in injectable contraceptive (DMPA).  ANM Number of ANMs trained in injectable contraceptive (DMPA).	Doctors (MBBS/AYUSH), Staff Nurse (SN), Lady Health Visitor (LHV), Auxiliary Nurse Midwife (ANM) are given DMPA training by MBBS and above, AYUSH, Staff Nurses at a designated site for 1 day.	Training record. Else one needs to meet individual once to know training status.
B.1.13	Immunization	Yes	No	No	No	ANM Number of ANM trained in immunization at the faciltiy.	ANM are given training of immunizaiton at block level facilty by MO for two days.	Training record
B.1.14	Comprehensiv e abotion care (CAC)	No	No	Yes	Yes	MO (MBBS) Number of medical officers trained in comprehensive abortion care.	Medical officers (MBBS) are given MTP training by State/District level trainer at State/District level training centers approved by government for two weeks.	Training record. Else one needs to meet individual once to know training status.
B.1.15	FP/RMNCH counsellors trained and working at facility	No	Yes	Yes	Yes	Number of family planning /RMNCH counsellors trained and working at facility.	Number of family planning/RMNCH counsellors who are trained and currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Training record. Else one needs to meet individual once to know training status.
B.1.16	ARSH counsellors trained and working at facility	No	Yes	Yes	Yes	Number of Adolescent reproductive and sexual health counsellors trained and working at facility during the reporting month.	Number of Adolescent reproductive and sexual health counsellors who are trained and currently working in the facility irrespective of their posting required to be reported here. Their names must be in the attendance register.	Training record. Else one needs to meet individual once to know training status.
				Secti	on C	- Availability of RMNCH+A drugs, supplies and equipr	nents as per 5x5 matrix	
C1.1	DMPA (Inj.	Yes	Yes	Yes	Yes	C 1- Reproductive Health  Number of injectable contraceptive (DMPA) available	Number of available pieces only in the store	Family
	Antara)					at the facility by the end of the reporting month.	room by the end of reporting month. Individual facility will report its own status only.	planning stock register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			Stock register  Stock register  Medicine and surgical goods stock register
C1.2	Mifepristone + Misoprostol (MMA)	Yes	Yes	Yes	Yes	Number of Mifepristone + Misoprostol (MMA) available at the facility by the end of the reporting month.	Number of available pieces only in the store room by the end of reporting month. Individual facility will report its own status only.	Stock register
C1.3	PTK (Pregnancey test kits)	Yes	Yes	Yes	Yes	Number of pregnancy test kits available at the facility by the end of the reporting month.	Number of available pieces only in the store room by the end of reporting month. Individual facility will report its own status only.	Stock register
						C 2- Maternal Health		
C2.1	Tab Alpha methyldopa	No	Yes	Yes	Yes	Number of Alpha methyldopa tablets available at the facility by the end of the reporting month.	Number of Alpha methyldopa tablets available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.2	Tab Labelatol	No	Yes	Yes	Yes	Number of Labelatol tablets available at the facility by the end of the reporting month.	Number of Labelatol tablets available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.3	Tab Nifedipine	Yes	Yes	Yes	Yes	Number of Nifedipine tablets available at the facility by the end of the reporting month.	Number of Nifedipine tablets available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.4	Sterile pads	Yes	Yes	Yes	Yes	Number of Sterile pads available at the facility by the end of the reporting month.	Number of Sterile pads available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.5	Sanitary napkins	Yes	Yes	Yes	Yes	Number of Sanitary napkins available at the facility by the end of the reporting month.	Number of Sanitary napkins available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.6	Haemoglobino meter	Yes	Yes	Yes	Yes	Number of Haemoglobinometer available at the facility by the end of the reporting month.	Number of Haemoglobinometer available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.7	Urine albumin kit	Yes	Yes	Yes	Yes	Number of Urine albumin kits available at the facility by the end of the reporting month.	Number of Urine albumin kits available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.8	IV fluid-Ringer lactate	No	Yes	Yes	Yes	Number of IV fluid-Ringer lactate available at the facility by the end of the reporting month.	Number of IV fluid-Ringer lactate available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.9	IV fluid- Dextrose (5%)	No	Yes	Yes	Yes	Number of IV fluid-Dextrose (5%) available at the facility by the end of the reporting month.	Number of IV fluid-Dextrose (5%) available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.10	IV fluid-DNS (Dextroxe normal saline)	No	Yes	Yes	Yes	Number of IV fluid-DNS (Dextroxe normal saline) available at the facility by the end of the reporting month.	Number of IV fluid-DNS (Dextroxe normal saline) available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.11	IV fluid- normal saline (500 ml)	No	Yes	Yes	Yes	Number of IV fluid- normal saline (500 ml) available at the facility by the end of the reporting month.	Number of IV fluid- normal saline (500 ml) available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.12	IV fluid- normal saline (100 ml)	No	Yes	Yes	Yes	Number of IV fluid- normal saline (100 ml) available at the facility by the end of the reporting month.	Number of IV fluid- normal saline (100 ml) available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register

SN	Data element	Level of reporting			ting	Data element definition	Guidance of data collection and validation	Data source
	13 Corticosteroid (Inj Dexamethasone) 14 Tab Paracetamol 15 Tab Calcium carbonate with D3 16 Inj. Labelatol 17 Inj. Calcium gluconate 18 Glucose (75 gram) sache/packets 19 Cord clamp 20 Labour table 21 Kelly's pad 22 Inj. Insulin 23 Inj. Anti D for Rh (-) ve PW	sc	PHC	СНС	DH			
C2.13	(Inj Dexamethason e/Betamethas	Yes	Yes	Yes	Yes	Number of Corticosteroid (Inj Dexamethasone/Betamethasone) available at the facility by the end of the reporting month.	Number of Corticosteroid (Inj Dexamethasone/Betamethasone) available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.14		Yes	No	No	No	Number of paracetamol tablets available at the facility by the end of the reporting month.	Number of paracetamol tablets available at the facility by the end of the reporting month will be reported here.	Medicine and surgical goods stock register
C2.15	carbonate	Yes	Yes	Yes	Yes	Number of Calcium carbonate with D3 tablets available at the facility by the end of the reporting month.	Number of Calcium carbonate with D3 tablets available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.16	Inj. Labelatol	No	Yes	Yes	Yes	Number of injection Labelatol available at the facility by the end of the reporting month.	Number of injection Labelatol available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.17	I -	No	Yes	Yes	Yes	Number of injection Calcium gluconate available at the facility by the end of the reporting month.	Number of injection Calcium gluconate available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.18	gram)	No	Yes	Yes	Yes	Number of glucose (75 gram) sache/packets available at the facility by the end of the reporting month.	Number of glucose (75 gram) sache/packets available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.19	Cord clamp	Yes	Yes	Yes	Yes	Number of cord clamp available at the facility by the end of the reporting month.	Number of cord clamp available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.20	Labour table	Yes	Yes	Yes	Yes	Number of labour tables available at the facility by the end of the reporting month.	Number of abour tables available in the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.21	Kelly's pad	Yes	Yes	Yes	Yes	Number of Kelly's pads available at the facility by the end of the reporting month.	Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.22	Inj. Insulin	No	Yes	Yes	Yes	Number of injection Insulin available at the facility by the end of the reporting month.	Number of injection Insulin available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.23		No	Yes	Yes	Yes	Number of injection Anti D for Rh (-) ve PW available at the facility by the end of the reporting month.	Number of injection Anti D for Rh (-) ve PW available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.24	Inj. Benzathine penicillin	No	No	Yes	Yes	Number of injection Benzathine penicillin available at the facility by the end of the reporting month.	Number of injection Benzathine penicillin available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C2.25	Blood grouping typing (Yes/No)	No	Yes	Yes	Yes	Whether blood grouping typing is available at the facility during the reporting month or not.	If blood grouping typing is available at the facility, it will be reported 'Yes' here. Individual facility will report its own status only.	By observaton

SN	Data element Level of reporting		ting	Data element definition	Guidance of data collection and validation	Data source		
		sc	PHC	СНС	DH			
C2.26	HIV screening (Yes/No)	No	Yes	Yes	Yes	Whether HIV screening is available at the facility during the reporting month or not.	If HIV screening is available at the facility, it will be reported 'Yes' here. Individual facility will report its own status only.	By observaton
C2.27	Hepatitis B screening (Yes/No)	No	Yes	Yes	Yes	Whether Hepatitis B screening is available at the facility during the reporting month or not.	If Hepatitis B screening is available at the facility, please report 'Yes' here. Individual facility will report its own status only.	By observaton
C2.28	Partograph (Yes/No)	Yes	Yes	Yes	Yes	Whether Partograph is available at the facility during the reporting month or not.	Whether partograph is available only in the store room of the facility by the end of the reporting month or not. Individual facility will report its own status only.	By observaton
C2.29	Standard 16 protocols displayed at facility (Yes/No)	Yes	Yes	Yes	Yes	Whether standard 16 protocols are displayed at facility during the reporting month or not.	Whether standard 16 protocols are displayed in the labour room of the facility. It should be reported by obervation.	By observaton
C2.30	Availability of five/seven trays as per protocol (Yes/No)	Yes	Yes	Yes	Yes	Whether five/seven trays as per protocol are available in the labour room of the facility during the reporting month.	Trays to be kept in Labour room (according to MNH toolkit): There are seven types of trays namely 1.Delivery tray, 2.Episiotomy tray, 3.Baby tray, 4.Medicine tray, 5.Emergency drug tray, 6.MVA/EVA tray & 7.PPIUCD tray. First four trays are found at L1 facilities. First five trays are found at all L2 & L3 facilites. All seven trays are found at L3 facilites with PPIUCD trained providers.	By observaton
C2.31	Facility following seven signals of FRU functionality (Yes/No)	No	No	Yes	Yes	Whether the facility is following seven signals of FRU functionality or not.	Only FRU facility will report, and it will be based on by observation.	By observaton
62.4	L=: \/:+ \/4 /4	Yes	Yes	Yes	Yes	C 3- Newborn Health Number of injection Vit K1 (1 mg/ml) available at the	North and Fig. 1. and 1. All 1	NA - di sin d
C3.1	Inj. Vit K1 (1 mg/ml)		ics	Tes	res	facility by the end of the reporting month.	Number of injection Vit K1 (1 mg/ml) available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C3.2	Inj. Gentamicin	Yes	No	No	No	Number of injection Gentamicin available at the facility by the end of the reporting month.	Individual facility will report its own status only.	Medicine and surgical goods stock register
C3.3	Amoxicillin syrup	Yes	No	No	No	Number of bottles of syrup Amoxicillin available at the facility by the end of the reporting month.	Individual facility will report its own status only.	Medicine and surgical goods stock register
C3.4	Mucus extractor	Yes	Yes	Yes	Yes	Number of Mucus extractor available at the facility by the end of the reporting month.	Number of Mucus extractor available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C3.5	Bag and mask (240 ml) with both pre & term mask (size 0,1)	Yes	Yes	Yes	Yes	Number of bag and mask (240 ml) with both pre & term mask (size 0,1) available at the facility by the end of the reporting month.	Number of bag and mask (240 ml) with both pre & term mask (size 0,1) available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C3.6	Clean linen/towels for receiving new born	Yes	Yes	Yes	Yes	Number of clean linen/towels for receiving new born available at the facility by the end of the reporting month.	Number of clean linen/towels for receiving new born available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register

SN	Data element	Leve	Level of reporting		ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
C3.7	Sterile cord cutting equipment	Yes	Yes	Yes	Yes	Number of sterile cord cutting equipment available at the facility by the end of the reporting month.	Number of sterile cord cutting equipment available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C3.8	Designated newborn care corner (Yes/No)	Yes	Yes	Yes	Yes	Whether designated newborn care corner is available in the facility during the reporting month or not.	Whether designated newborn care corner is available in the labour room or not.	By observaton
C3.9	Functional radiant warmer (Yes/No)	Yes	Yes	Yes	Yes	Whether functional radiant warmer is available in the facility during the reporting month or not.	Whether functional radiant warmer is available in the labour room or not. It is to be functional not just availability.	By observaton
C3.10	Designated space avalilable for KMC (Yes/NO)	Yes	Yes	Yes	Yes	Whether designated space for KMC is available in the facility during the reporting month or not.	It is to be reported by obervation.	By observaton
						C 4- Child Health		
C4.1	Inj. Adrenaline	No	Yes	Yes	Yes	Number of injection Adrenaline available at the facility by the end of the reporting month.	Number of injection Adrenalin available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C4.2	Syrup Salbutamol	Yes	Yes	Yes	Yes	Number of bottles of syrup Salbutamol available at the facility by the end of the reporting month.	Number of bottles of syrup Salbutamol available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C4.3	Salbutamol nebulizing solution	Yes	Yes	Yes	Yes	Number of Salbutamol nebulizing solutionl available at the facility by the end of the reporting month.	Number of Salbutamol nebulizing solution available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C4.4	Syrup Albendazole	Yes	Yes	Yes	Yes	Number of bottles of syrup Albendazole available at the facility by the end of the reporting month.	Number of bottles of syrup Albendazole available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C4.5	Syrup Vit. A	Yes	No	No	No	Number of bottles of syrup Vit. A available at the facility by the end of the reporting month.	Number of bottles of syrup Vit. A available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C4.6	Inj. Gentamicin	No	Yes	Yes	Yes	Number of injection Gentamicin available at the facility by the end of the reporting month.	Number of injection Gentamicin available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	
C4.7	Tab Amoxicillin DT (125 mg)	Yes	Yes	Yes	Yes	Number of Amoxicillin DT (125 mg) tablets available at the facility by the end of the reporting month.	Number of Amoxicillin DT (125 mg) tablets available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C4.8	Tab Amoxicillin DT (250 mg)	Yes	Yes	Yes	Yes	Number of Amoxicillin DT (250 mg) tablets available at the facility by the end of the reporting month.	Number of Amoxicillin DT (250 mg) tablets available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C4.9	Syrup Amoxicillin	No	Yes	Yes	Yes	Number of bottles of syrup Amoxicillin available at the facility by the end of the reporting month.	Number of bottles of syrup Amoxicillin available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C4.10	Inj. Ceftriaxone or Cefotaxime	No	Yes	Yes	Yes	Number of injection Ceftriaxone or Cefotaxime available at the facility by the end of the reporting month.	Number of injection Ceftriaxone or Cefotaxime available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
C4.11	Tab	No	Yes	Yes	Yes	Number of Doxycycline tablets available at the	Number of Doxycycline tablets available only in	Medicine and
C4.11	Doxycycline					facility by the end of the reporting month.	the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	surgical goods stock register
C4.12	Cap Ampicillin	No	Yes	Yes	Yes	Number of Ampicillin capsules available at the facility by the end of the reporting month.	Number of Ampicillin capsules available only in the store room of the facility by the end of the	Medicine and surgical goods stock
							own status only.	register
C4.13	Inj. Ampicillin	No	Yes	Yes	Yes	Number of injections of Ampicillin available at the facility by the end of the reporting month.	Number of injections of Ampicillin available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
C4.14	Inj. Amikacin	No	Yes	Yes	Yes	Number of injections of Amikacin available at the facility by the end of the reporting month.	Number of injections of Amikacin available only in the store room of the facility by the end of the reporting month. Individual facility will report its	Medicine and surgical goods stock
C4.15	Tab	No	Yes	Yes	Yes	Number of Metronidazole tablets available at the	own status only.  Number of Metronidazole tablets available only	
	Metronidazole					facility by the end of the reporting month.	in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	surgical goods stock register
C4.16	Inj. Metronidazole	No	Yes	Yes	Yes	Number of injections of Metronidazole available at the facility by the end of the reporting month.	Number of injections of Metronidazole available only in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	Medicine and surgical goods stock register
						C 5- Adolescent Health		
C5.1	Tab	No	Yes	Yes	Yes	Number of Dicyclomine tablets available at the	Number of Dicyclomine tablets available only in	Medicine and
	Dicyclomine					facility by the end of the reporting month.	the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	surgical goods stock register
						C 6- Vaccines		
C6.1	JE vaccine (where applicable)	No	No	Yes	Yes	Number of JE vaccine vials avilable by the end of reporting month.	Number of JE vaccine vials available only in the stock of the facility by the end of the reporting month. Individual facility will report its own status only.	Immunization stock
C6.2	IPV	No	No	Yes	Yes	Number of IPV vaccine vials avilable by the end of reporting month.	Number of IPV vaccine vials available only in the stock of the facility by the end of the reporting month. Individual facility will report its own	Immunization stock
C6.3	Pentavalent	No	No	Yes	Yes	Number of Pentavalent vials avilable by the end of reporting month.	status only.  Number of Pentavalent vials available only in the stock of the facility by the end of the reporting month. Individual facility will report its own status only.	Immunization stock
C6.4	Cold box	No	No	Yes	Yes	Whether cold box is available in the facility by the end of the reporting momth or not.	Whether cold box is available in the facility by the end of the reporting month. Individual facility will report its own status only.	Immunization stock
C6.5	ILR	No	No	Yes	Yes	Whether Ice Lined Refrigerator (ILR) is available at the facility by the end of reporting month or not.	Whether Ice Lined Refrigerator (ILR) is available and functional in the facility by the end of the reporting month or not. Individual facility will report its own status only.	Immunization stock
C6.6	Deep freezer	No	No	Yes	Yes	Whether deep freezer is available or not by the end of reporting month.	Whether deep freezer is available and functional in the facility by the end of the reporting month or not. Individual facility will report its own status only.	Immunization stock
C6.7	Vaccine carrier	No	No	Yes	Yes	Number of vaccine carriers available at the facility by the end of the reporting month.	Number of vaccine carriers available at the facility will be reported here.	Immunization stock
						C 7- Functional apparatus and logistics		
C7.1	Weighing machine (Adult)	Yes	Yes	Yes	Yes	Whether weighing machine (adult) is available at the facility by the end of reporting month or not.	be reported here. Individual facility will report its own status only.	
C7.2	Weighing machine (Infant)	Yes	Yes	Yes	Yes	Whether weighing machine (infant) is available at the facility by the end of reporting month or not.	A functional weighing machine (infant) needs to be reported here. Individual facility will report its own status only.	By observation

SN	Data element	Leve	of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
C7.3	Height scale	Yes	Yes	Yes	Yes	Whether height scale is available at the facility by the end of reporting month or not.	A functional weighing machine (infant) needs to be reported here. Individual facility will report its own status only.	By observation
C7.4	Hub cutter with needle destroyer	Yes	Yes	Yes	Yes	Whether Hub cutter with needle destroyer is available at the facility by the end of reporting month or not.	A functional Hub cutter with needle destroyer needs to be reported here. Individual facility will report its own status only.	By observation
C7.5	Refrigerator	No	Yes	Yes	Yes	Whether a refrigerator is available at the facility by the end of reporting month or not.	A functional refrigerator needs to be reported here. Individual facility will report its own status only.	By observation
C7.6	RTI/STI Kit	No	Yes	Yes	Yes	Whether a RTI/STI kit is available at the facility by the end of reporting month or not.	,	By observation
C7.7	Bleaching powder	Yes	Yes	Yes	Yes	Whether bleaching powder is available at the facility by the end of reporting month or not.	It needs to observe the availabality of bleaching powder in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	By observation
C7.8	Oxygen cylinder functional	No	Yes	Yes	Yes	Whether a funtional oxygen cylinder is available at the facility by the end of reporting month or not.	It needs to observe the functionality and report accordingly. Individual facility will report its own status only.	By observation
C7.9	BP apparatus with stethoscope	Yes	Yes	Yes	Yes	Whether a BP apparatus with stethoscope is available at the facility by the end of reporting month or not.	It needs to observe the functionality of the equipment and report accordingly. Individual facility will report its own status only.	By observation
C7.10	MVA kit/EVA	No	Yes	Yes	Yes	Whether MVA (Manual Vaccum Aspiration) kit/EVA (Electrict Vaccum Aspiration) is available at the facility by the end of reporting month or not.	Vacuum or suction aspiration uses aspiration to remove uterine contents through the cervix. It may be used as a method of induced abortion, a therapeutic procedure used after miscarriage, or a procedure to obtain a sample for endometrial biopsy. Suction is created with either an electric pump (electric vacuum aspiration or EVA) or a manual pump (manual vacuum aspiration or MVA). It is needed to observe the availability of the MVA kit/EVA in the store room and report accordingly into yes or no.	By observation
C7.11	IUCD kit	Yes	Yes	Yes	Yes	Whether intrauterine contraceptive device (IUCD) kit is available at the facility by the end of reporting month or not.	It needs to observe the availability of IUCD kit in the store room of the facility by the end of the reporting month. Individual facility will report its own status only.	By observation
C7.12	NSV kit	No	Yes	Yes	Yes	Whether No-Scalpel Vasectomy (NSV) kit is available at the facility by the end of reporting month or not.	The availablity should be observed in the store room of the facility and report accordingly in yes or no.	By observation
C7.13	Laparoscopic s terilization kit	No	No	Yes	Yes	Whether Laparoscopic sterilization kit is available at the facility by the end of reporting month or not.	The availablity should be observed in the store room of the facility and report accordingly in yes or no.	By observation
C7.14	MiniLap kit	No	No	Yes	Yes	Whether MiniLap kit is available at the facility by the end of reporting month or not.	The availablity should be observed in the store room of the facility and report accordinlgy in yes or no.	By observation
C7.15	Syphilis testing kit	No	No	Yes	Yes	Whether Syphilis testing kit is available at the facility by the end of reporting month or not.	The availablity should be reported by observation in the store room of the facility.	By observation
C7.16	PPIUCD / Kelly's forceps	Yes	Yes	Yes	Yes	Whether PPIUCD / Kelly's forceps is available at the facility by the end of reporting month or not.	PPIUCD/Kelly's forcep is a part of PPIUCD tray. If the forcep is available, it will be reported as yes. Each facility will report its own status only.	By observation
C7.17	Glucometer	Yes	No	No	No	Whether Glucomete is available at the SC or not.		By observation
C7.18	MUAC tape	Yes	No	No	No	Whether MUAC is available at the SC or not.		By observation

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	CHC	DH			
C7.19	Thermometer	Yes	Yes	Yes	Yes	Whether thermometer is available at the facility by the end of reporting month or not.	It should be reported in yes or no by observation at the facility.	By observation
C7.20	Wall mount thermometer (Yes/No)	No	Yes	Yes	Yes	Whether wall mount thermometer is available at the facility by the end of reporting month or not.	To monitor the room tremprature inside the labour room, wall mouint thermamere is used. It needs to be observed and report accordingly.	By observation
C7.21	Fetoscope/Do ppler	Yes	Yes	Yes	Yes	Whether fetoscope/doppler is available at the facility by the end of reporting month or not.	A stethoscope/a doppler is an equipment used to monitor the fetal heartbeat in maternity ward. If any one is present in the maternity ward, it will be reported as yes here.	By observation
C7.22	Autoclave/Boil er	Yes	Yes	Yes	Yes	Whether autoclave/boiler is available at the facility by the end of reporting month or not.	Autoclave is a machine used for sterilization of the equipment. Boiler is an instrument used for disinfection. If any one is present, it will be reported as yes.	By observation
C7.23	Running water	No	Yes	Yes	Yes	Whether running water is available at the facility/labour room by the end of reporting month or not.	It needs to oberve the running water supply in the tap of labour room and report accordingly.	By observation
C7.24	Soap	Yes	Yes	Yes	Yes	Whether soap is available at the facility by the end of the reporting month.	Soap needs to be observed at labour room/OT/OPD. If it is not present at any place, it needs to report no.	By observation
C7.25	Colour coded bins and bags (red/black) in sufficient quntity	Yes	Yes	Yes	Yes	Whether colour coded bins and bags (red/black) in sufficient quantiy available at the facility by the end of the reporting month or not.	There are three types of colour coded bins and bags in use. Red colour coded bins and bags are for all infected plasitc and latex, yellow colour coded bins and bags for anatomical waste and blue colour coded bins and bags for vials and glass bottoles. The definition of 'Sufficent quanity' is considered as in HMIS which means availabilty for the next two months.	By observation
C7.26	Electricity power back-up & generator	No	Yes	Yes	Yes	Whether electricity power back-up & generator are available at the facility by the end of the reporting month or not.	It needs to be reported by observation.	By observation
C7.27	Electricity power back-up & invertors	No	Yes	Yes	Yes	Whether electricity power back-up & invertors are available at the facility by the end of the reporting month or not.	It needs to be reported by observation.	By observation
C7.28	Labor room with attached toilet	No	Yes	Yes	Yes	Whether labor room is attached with toilet in the facility or not.	It needs to be reported by observation.	By observation
C7.29	MCP cards available in sufficient quantity (Yes/ No)	Yes	Yes	Yes	Yes	Whether MCP cards are available in sufficent quantity at the facility or not by the end of the reporting month.	It needs to be observed the sufficient quantity i.e., availabilty for next two months for reporting yes.	By observation
C7.30	Case sheet in sufficent quantity (Yes/No)	Yes	Yes	Yes	Yes	Whether case sheets are available in sufficent quantity at the facility by the end of the reporting month or not.	It needs to be observed the sufficient quantity i.e., availabilty for next two months for reporting yes.	By observation
C7.31	Functional safety pits available (Yes/NO)	No	Yes	Yes	Yes	Whether functional safety pit is available at the facility by the end of the reporting month or not.	It needs to be reported by observation.	By observation
C7.32	Supervisory visit format for RI (applicable for only BCHC)	No	No	Yes	No	Whether supervisory visit format for routine immunization is available at the facility by the end of the reporting month or not.	It needs to be reported by observation.	By observation
						C 8- Other functional equipment at facili	ty	

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
C8.1	X-ray machine	No	No	Yes	Yes	Whether X-ray machine is available at the facility or not by the end of the reporting month or not.	Diagnostic x rays (electromagnetic radiation) are useful in detecting abnormalities within the body. They are a painless, non-invasive way to help diagnose problems such as broken bones, tumors, dental decay, and the presence of foreign bodies. It needs to observe the availability and functionality together to report yes.	By observation
C8.2	USG machine	No	No	Yes	Yes	Whether USG machine is available at the facility by the end of the reporting month or not.	Ultrasonography (USG) is a diagnostic imaging technique based on the application of ultrasound. It is used to see internal body structures such as tendons, muscles, joints, vessels and internal organs. It needs to to observe availability and functionality both together and report into yes or no accordingly. Individual facility will report its own status only.	By observation
C8.3	CT scan machine	No	No	No	Yes	Whether CT scan machine is available at the facility by the end of the reporting month or not.	CT stands for computed tomography. It's a sophisticated X-ray device and used to obtain detailed images of internal organs. If the CT scan machine is funtional, it will be reported into 'yes' else 'no'.	By observation
C8.4	MRI machine	No	No	No	Yes	Whether Magnetic resonance imaging (MRI) machine is available at the facility by the end of the reporting month or not.	Magnetic resonance imaging (MRI) is a medical imaging technique used in radiology to form pictures of the anatomy and the physiological processes of the body in both health and disease. MRI scanners use strong magnetic fields, radio waves, and field gradients to generate images of the organs in the body. MRI does not involve x-rays, which distinguishes it from computed tomography (CT or CAT). If it is available and functional, it should be reported into yes else no.	By observation
C8.5	TMT machine	No	No	No	Yes	Whether Tread Mill Test (TMT) machine is available at the facility by the end of the reporting month or not.	TMT stands for Tread Mill Test. It is a screening tool to test the effect of exercise on the heart. In this test patient is made to walk on a treadmill and electrical activity of the heart is measured with an ECG, and blood pressure recordings are taken every few minutes. If it is available and functional, it should be reported into yes else no.	By observation
C8.6	ECG machine	No	No	No	Yes	Whether Electrocardiography (ECG) machine is available at the facility by the end of the reporting month or not.	Electrocardiography (ECG) is the process of recording the electrical activity of the heart over a period of time using electrodes placed on the skin. If it is available and functional, it should be reported into yes else no.	By observation
C8.7	Dialysis machine	No	No	No	Yes	Whether dialysis machine is available at the facility by the end of the reporting month or not.	A machine used in dialysis that filters a patient's blood to remove excess water and waste products when the kidneys are damaged, dysfunctional, or missing. The dialysis machine itself can be thought of as an artificial kidney. If it is available and functional, it should be reported into yes else no.	By observation
C8.8	Boyles trolleys	No	No	Yes	Yes	Whether Boyles trolleys is available at the facility by the end of the reporting month or not.	It's a anaesthetic machine and used to to support the administration of anaesthesia. If it is available and functional, it should be reported yes else no.	By observation

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
C8.9	Pulse oximeter	No	No	Yes	Yes	Whether pulse oximeter is available at the facility by the end of the reporting month or not.	Pulse oximetry is a noninvasive method for monitoring a person's oxygen saturation (SO2). It needs to observe the availability and functionality together to report yes.	By observation
C8.10	Semi auto analyser	No	No	Yes	Yes	Whether semi auto analyser is available at the facility by the end of the reporting month or not.	An automated analyser is a medical laboratory instrument designed to measure different chemicals and other characteristics in a number of biological samples quickly, with minimal human assistance. It needs to observe the availability and functionality together to report yes.	By observation
C8.11	Computers	No	No	Yes	Yes	Whether computer is available at the facility by the end of the reporting month or not.	It needs to observe the availability and functionality together to report yes.	By observation
C8.12	Generator	No	No	Yes	Yes	Whether generator is available at the facility by the end of the reporting month or not.	It needs to observe the availability and functionality together to report yes.	By observation
C8.13	Functional blood bank unit	No	No	Yes	Yes	Whether functional blood bank unit is available at the facility by the end of the reporting month or not.	It needs to observe the availability and functionality together to report yes.	By observation
C8.14	Blood bank refrigerator	No	No	Yes	Yes	Whether blood bank refrigerator is available at the facility by the end of the reporting month or not.	It needs to observe the availability and functionality together to report yes.	By observation
						Section -D Performance Indicator		
D1.1	Beds available	No	Yes	Yes	Yes	D 1- Hospital  Number of beds avialbale in In-patient door (IPD)	Individual facility will report its own status	Ву
		No	Yes	Yes	Yes	during the reporting month in the facility.	only.Reporting needs observation.	observation
D1.2	OPD new cases only	140	103	103	103	Number of new cases visited in the OPD during the reporting month.	Only new cases visited in the OPD during the reporting month will be reported here.	OPD register
D1.3	Lab test done for OPD cases	No	No	No	Yes	Total lab test done for OPD cases only during the reporting month.	Total laboratory tests done for OPD cases only during the reporting month wil be reported here.	Lab record
D1.4	Lab test done for IPD,LR,OT cases	No	No	No	Yes	Total lab test done for cases from in-patient door, labour room and operation theator during reporting month.	Total laboratory tests done for cases from in- patient door, labour room and operation theator during reporting month will be reported here.	Lab record
D1.5	Surgeries conducted at night	No	No	No	Yes	Total number of surgeries conducted at night during the reporting month.	All surgeries conudted during 8 pm to 8 am will be counted and reported here.	Surgery record
D1.6	Patients managed at emergency	No	No	No	Yes	Total number of patients managed at emergency in the hospital during the reporting month.	Patients managed at emergency in the hosptial during the reporting month will be reported here.	Emergency record
D1.7	Deaths occurred at emergency department	No	No	No	Yes	Number of deaths occurred at emergency department in the facility during the reporting month.	Deaths occurred at emergency department in the facility during the reporting month will be reported here.	Death register
D1.8	X-rays conducted at night	No	No	No	Yes	Number of X-ray conducted at night in the facility during the reporting month.	All the X-rays conducted during 8 pm to 8 am will be counted to report.	X-ray register
D1.9	CT scan investigations	No	No	No	Yes	Number of CT scan investigations conducted at the facility during reporting month.	All CT scan investigations conducted at the facility during reporting month will be reported here.	CT scan regisgter
D1.10	Plasters at facility	No	No	Yes	Yes	Number of plasters done at facility during the reporting month.	All plasters done at facility during the reporting month will be reported here.	Plaster record register
D1.11	Post-mortem at day	No	No	No	Yes	Number of post-mortem done in the day in the facility during the reporting month.	All post-mortem done in the day in the facility during the reporting month will be reported here.	Post-mortem record
D1.12	Post-mortem at night	No	No	No	Yes	Number of post-mortem done at night in the facility during the reporting month.	All post-mortem done at night in the facility during the reporting month will be reported	Post-mortem record
D1.13	Medico legal cases	No	No	No	Yes	Number of medico legal cases reported during the reporting month.	here. Any case of Injury or ailment where some criminality is involved is called a Medico-Legal Case (MLC)".	Medico-legal register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
D1.14	ECG	No	No	No	Yes	Number of electrocardiogram (ECG) tests performed in the facility during the reporting month.	All ECG tests performed in the facility during the reporting month will be reported here.	ECG record at the facility
D1.15	Dialysis	No	No	No	Yes	Number of times dialysis given in the facility during the reoprotng month.	People with failed or damaged kidneys may have difficulty eliminating waste and unwanted water from the blood. Dialysis is an artificial way of carrying out this process. Dialysis substitutes the natural work of the kidneys, so it is also known as renal replacement therapy (RRT).	Hospital record of dialysis
D1.16	EMG	No	No	No	Yes	Number of electromyography performed in the facility during the reporting month.	Electromyography (EMG) is a diagnostic procedure to assess the health of muscles and the nerve cells that control them (motor neurons).	EMG record
D1.17	Endoscopy	No	No	No	Yes	Number of Endoscopy performed in the facility during the reporting month.	An endoscopy is a procedure in which a doctor uses specialized instruments to view and operate on the internal organs and vessels of the body. It allows surgeons to view problems within the body without making large incisions. An endoscope is a flexible tube with an attached camera that allows the doctor to see.	Endoscopy register
D1.18	Cystoscopy	No	No	No	Yes	Number of Cystoscopy performed in the facility during the reporting month.	Cystoscopy is a procedure that allows the doctor to examine the lining of the bladder and the tube that carries urine out of the body (urethra).	Cystoscopy register
D1.19	Surgeons not conducted any surgery during the month	No	No	Yes	Yes	Number of surgeons who did not conduct any surgery during the reporting month.		Surgery register
						D 2- Maternal & Newborn Health		
D2.1	PW visited for ANC check up	Yes	Yes	Yes	Yes	Number of pregnant women visited the facility/VHND for ANC check up during the reporting month.	New pregnant women and old pregnant women all who were attended for ANC check up will be reported here.	SC: RCH register PHC/CHC/DH: ANC register
		Yes	Yes	Yes	Yes	PW ANC examination		
D2.2.1	Weight/ BP/ Per abdomen/ Blood group/ Urnine albumine	ies	ies	Tes	Tes	Number of pregnant women: -Wighted, -Measured for blood pressure, -Whose abdominal check up was performed, -Whose blood group test was performed and -Whose urine albumin test was conducted during ANC examinaiton by the end of the reporting month.		SC: RCH register PHC/CHC/DH: ANC register
						High Risk Pregnancey		
D2.3	Age 35+/ Previous history of any complication*/ Any other	Yes	Yes	Yes	Yes	Number of pregnant women -With age 35+ found, -With previous history of any complication and -With any other reason resulting high risk by the end of the reporting month.	Pregnant women aged 35+ will be counted as high risk.  Pregnant women suffered from complcations such as Antepartum hemorrhage (APH), Post-partum hemorrhage (PPH), Pregnancy induced hypertension (PIH), pre-Eclampsia, Eclampsia, sepsis, C-section, abortion, still birth, newborn death, preterm birth and low birth weight in previsous delivey will be counted here.  Any other may include pregnant women suffering form ectopic pregnancy, with more than 5th gravida, pre-eclampsia (high BP/albumin protein in urine/swelling) and mall presentation.	HRP register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
D2.4	High risk pregnancy (referral and follow up done)	Yes	No	No	No	Number of high risk pregnant women referred and followed up by the end of the reporting month.		HRP register
D2.5	Pregnant women Hb<7 gm received iron sucrose	No	Yes	Yes	Yes	Number of pregnant women with Hb<7 gm received iron sucrose by the end of the reporting month.		HRP register
D2.6	ANC screen for Thalassemia	No	No	No	Yes	Number of pregnant women screened for Thalassemia during the reporting month.	Thalassemia is a inherited blood disorder characterized by abnormal hemoglobin production causing anemia. Number of pregnant women sreened for Thalassemia during the reporting month can be reported from the regsiter of Lab techincian.	LT register
D2.7	Rh (-) ve pregnant women received inj. Anti D	No	Yes	Yes	Yes	Number of rh (-) ve pregnant women received inj. Anti D by the end of the reporting month.	Number of rh (-) ve pregnant women received inj. Anti D by the end of the reporting month will be reported here.	ANC register
D2.8	Pregnant women delivered before 37 weeks of pregnancy	No	Yes	Yes	Yes	Number of pregnant women delivered before 37 weeks of pregnancy by the end of the reporting month.	All pregnant women delivered before 37 weeks of pregnancy by the end of the reporting month will be reported here.	Labour room register
D2.9	Pregnant women with true labour pain before 34 weeks of pregnancy	No	Yes	Yes	Yes	Number of pregnant women with true labour pain before 34 weeks of pregnancy.	All pregnant women with true labour pain before 34 weeks of pregnancy will be reported here.	Labour room register
D2.10	Case sheet filled for deliveries conducted at the facility	No	Yes	Yes	Yes	Number of case sheets filled for deliveries counducted at the facility during the reporting month.	All case sheets filled for deliveries conducted at facility will be reported here.	By observation and varification
D2.11	PW in the last trimester contacted by ASHA	Yes	No	No	No	Number of pregnant women contacted by ASHA in the last trimester during the reporting month.	Number of pregnant women contacted by ASHA in the last trimester during the reporting month will be reported here. ANM will collect the information from ASHAs in the meeting.	VHIR
D2.12	Pregnant women birth plan prepared/revie wed (third trimester of pregnancy)	Yes	No	No	No	Number of pregnant women whose birth plan have been prepared and reviewed during third trimester of pregnancy by the end of the reporting month.	Number of pregnant women whose birth plan have been prepared and reviewed during third trimester of pregnancy will be reported here.	ANC register/RCH register
D2.13	PW received full ANC check- ups	Yes	No	No	No	Number of pregnant women received full ANC check- ups (4 visits, 2 TT, 180 IFA Tablets, 360 Calcium tablets, 1 Albendazole in the 2nd trimester) by the end of the reporting month.	Full ANC check up includes four visits, 2 TT/Booster, 180 IFA tablets, 360 Calcium tablets and 1 Albendazole in the second trimester here.	ANC register/RCH register
<u></u>		V-	. Y-		ν.	Pregnant women status		
D2.14. 1	Arrived in the facility	Yes	Yes	Yes	Yes	In labour Number of pregnant women arrived in the faciltiy in true labour pain during the reporting period.  Not in labour Number of pregnant women arrived in the faciltiy in any maternal complication during the reporting period.	In labour Number of pregnant women arrived in the faciltiy in true labour pain during the reporting period wll be reported here.  Not in labour Number of pregnant women arrived in the faciltiy in any maternal complication like PIH, preclampsia, APH, etc will be reported here. False pain will not be included in 'not in labour'.	Admission/La bour room register

SN	Data element	Level of reporting			ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
D2.14. 2	(If referred,) referred from :							
D2.14. 2.1	sc	No	Yes	Yes	Yes	In labour Number of pregnant women in true labour pain referred from sub-center during the reporting month.  Not in labour Number of pregnant women in any maternal complication referred from sub-center during the reporting month.	Number of pregnant women in labour pain referred from sub-center with a referral slip during the reporting month will be reported here.  All pregnant women in any maternal complication referred from sub-center with a referral slip will be reported here.	Referral-in register
D2.14. 2.2	РНС	No	Yes	Yes	Yes	In labour Number of pregnant women in true labour pain referred from PHC during the reporting month. Not in labour Number of pregnant women in any maternal complication referred from PHC during the reporting month.	Number of pregnant women in labour pain referred from PHC with a referral slip during the reporting month will be reported here.  All pregnant women in any maternal complication referred from PHC with a referral slip will be reported here.	Referral-in register
D2.14. 2.3	СНС	No	Yes	Yes	Yes	In labour Number of pregnant women in true labour pain referred from CHC during the reporting month. Not in labour Number of pregnant women in any maternal complication referred from CHC during the reporting month.	Number of pregnant women in labour pain referred from CHC with a referral slip during the reporting month will be reported here.  All pregnant women in any maternal complication referred from CHC with a referral slip will be reported here.	Referral-in register
D2.14. 2.4	Private	No	Yes	Yes	Yes	In labour Number of pregnant women in true labour pain referred from any private hospital during the reporting month.  Not in labour Number of pregnant women in any maternal complication referred from a private center during the reporting month.	Number of pregnant women in labour pain referred from any private hospital with referral slip during the reporting month will be reported here.  All pregnant women in any maternal complication referred from any private hospital with referral slip will be reported here.	Referral-in register
D2.14. 2.5	Others (other public hospitals, AWW, ASHA etc.)	No	Yes	Yes	Yes	In labour Number of pregnant women in true labour pain referred from others public hospitals, AWW and ASHA during the reporting month.  Not in labour Number of pregnant women in any complication referred from others public hospitals, AWW and ASHA during the reporting month.		Referral-in register
D2.14.	Admitted in the facility	No	Yes	Yes	Yes	In labour Number of pregnant women admitted in the faciltiy in true labour pain during the reporting period.  Not in labour Number of pregnant women admitted in the faciltiy in any maternal complication during the reporting period.	In labour Number of pregnant women admitted in the facility in true labour pain during the reporting period.  Not in labour Number of pregnant women admitted in the facility in any maternal complication like PIH, preeclampsia, APH, etc during the reporting period will be reported here. False pain will not be included in 'not in labour'.	Admission/La bour room register
D2 14	Doformod t-	Yor	Vor	Ver	Vec	Outcome among arrival	Number of program was a section of the let	Doformal - · · +
D2.14. 4.1	Referred to higher facility	Yes	Yes	Yes	Yes	Women Number of pregnant women referred to higher facility against total arrived women (in labor & not in labour both). Newborn Number of newborns referred to higher facility during the reporting month.	Number of pregnant women referred to higher facility against arrived pregnant women in labour and not in labour both to the facility needs to be reported during the reporting period.  All newborns, delivered in the facility & visited, referred to higher facility will be considered for reporting here. Each facility will report its own status only.	Referral-out register

SN	Data element	Level of reporting			ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
D2.14. 4.2	Sent home healthy	Yes	Yes	Yes	Yes	Women Number of pregnant women sent home healty against total arrived women (in labor & not in labour both) during the reporting month.  Newborn Number of newborns sent home healthy during the reporting month.	All pregnant women (in labor & not in labour both) sent home healthy will be reported here.  All newborns, delivered in the facility & visited, sent home healthy will be considered for reporting here.	Labour room register/Admi ssion register
D2.14. 4.3	Deaths at facility	Yes	Yes	Yes	Yes	Women Number of pregnant women died against total arrived women (in labor & not in labour both) at the facility. Newborn Number of newborns died at facility during the reporting month.	Women Number of pregnant women died against total arrived women (in labor & not in labour both) at the facility will be reported here.  Newborn Number of newborns died at facility during the reporting month will be reported here.	Labour room register/Admi ssion register
D2.14. 4.4	Facility based death review conducted	No	Yes	Yes	Yes	Women Number of facility based maternal death review conducted. Newborn Number of facility based newborn death review conducted during the reporting month.	Women Number of facility based maternal death review conducted during the reporting month will be reported here Newborn Number of facility based newborn death review conducted during the reporting month will be reported here	MDR register
						Newborn		
D2.15.	Still birth : Fresh	Yes	Yes	Yes	Yes	Number of fresh still birth conducted in the facility during the reporting month.	As per the operational guideline Child Death Review August 2014, still birth is defined as "Still Birth: Still birth is the birth of a new born after 20th completed week of gestation, weighing 500gm or more, when the baby does not breath or show any sign of life after delivery". Fresh still birth appears fresh, no skin change and died during or just before delivery. It might be preventable based on changes in care, resources, education, or medical access.	Labour room register
D2.15. 2	Still birth : Macerated	Yes	Yes	Yes	Yes	Number of macerated still birth conducted in the facility during the reporting month.	Macerated still birth occurs before delivery and has sign of maceration e.g., skin wrinkles, skin colour, nacrosis and smelling will be there.	Labour room register
D2.15.	Newborn where delayed cord cutting procedure followed	Yes	Yes	Yes	Yes	Number of newborns where delayed cord cutting procdure followed in the facility during the reporting month.	g .	Labour room register
D2.15. 4	Newborn received skin to skin care immidiately after delivery	Yes	Yes	Yes	Yes	Number of newborn received skin to skin care immidiately after delivery in the facility during the reporting month.	Under esssential newborn care the baby is given skin to skin care immediately after delivery to prevent from hypothermia.	Labour room register
D2.15. 5	Newborn weighted at birth less than 1800 gram	Yes	Yes	Yes	Yes	Number of newborns weighted at birth less than 1800 gram in the facility during the reporting month.	All newborns weighted at birth less than 1800 gram in the facility during the reporting month will be reported here.	Labour room register
D2.15.	LBW received KMC as per the guideline	Yes	Yes	Yes	Yes	Number of low birth weight newborns received Kangaroo monther care (KMC) in the facility by the end of the reporting month.	Newborn weighted less than 2500 gram is considered as low birth weight child. All LBW child who received Kangaroo monther care (KMC) will be reported here.	Labour room register
D2.16 D2.16.	Mothers	No	No	Yes	Yes	Number of cases where JSY incentive paid Number of cases where JSY incentive paid to mothers during the reporting period.	Number of cases where JSY incentive paid to mothers during the reporting period will be reported here.	Payment record

SN	Data element	Leve	of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
D2.16. 2	ASHAs	No	No	Yes	Yes	Number of cases where JSY incentive paid to ASHAs during the reporting period.	Number of cases where JSY incentive paid to ASHAs during the reporting period wil be reported here.	Payment record
						mber of deliveries which are to be incentivised (as pe		
D2.17.	SC (>5 deliveries)	Yes	No	No	No	Number of deliveries which are to be incentivised from SC (>5 deliveries)	Number of deliveries which are to be incentivised from SC (>5 deliveries) will be reported here.	
D2.17. 2	APHC/PHC (>15 deliveries)	No	Yes	No	No	Number of deliveries which are to be incentivised from APHC/PHC (>15 deliveries)	Number of deliveries which are to be incentivised from APHC/PHC (>15 deliveries) will be reported here.	
D2.17.	BPHC/NFRU CHC (>50 deliveries)	No	No	Yes	No	Number of deliveries which are to be incentivised from BPHC/NFRU CHC (>50 deliveries)	All deliveries which are to be incentivised from BPHC/NFRU CHC (>50 deliveries) will be reported here.	
						C-sections at FRUs conducted by on call for Govt	specialists	
D2.18. 1.1	Anaesthetists	No	No	Yes	Yes	Number of C-sections at FRUs conducted by on call Govt specialists- Anaesthestists		
D2.18. 1.2	Gynaecologists	No	No	Yes	Yes	Number of C-sections at FRUs conducted by on call Govt specialists- Gynaecologists		
	C-sections at FRUs conducted by on call for Pvt. Specialists  19. Apporthaticts No. No. Yes Yes Number of C-sections at FRUs conducted by on call							
D2.18. 2.1	Anaesthetists	No	NO	Yes	Yes	Number of C-sections at FRUs conducted by on call private specialists- Anaesthestists		
D2.18. 2.2	Gynaecologists	No	No	Yes	Yes	Number of C-sections at FRUs conducted by on call private specialists- Gynaecologists		
						C-sections which are to be incentivised as per g		
D2.19. 1	CHC-FRU (> 5th C-section)	No	No	Yes	No	Number of C-Sections at rural facilities (> 5th C-section) which are to be incentivised ( Only for CHC-FRU)	All C-Sections at rural facilities (> 5th C-section) which are to be incentivised ( Only for CHC-FRU) will be reported here.	
D2.19. 2	SDH (> 5th C- section)	No	No	No	Yes	Number of C-Sections at rural facilities (> 5th C-section) which are to be incentivised (SDH)	Number of C-Sections at rural facilities (> 5th C-section) which are to be incentivised ( SDH) will be reported here.	
D2.19.	DWH/DCH ( >110% of same month during last year )	No	No	No	Yes	Number of C-Section at DWH/DCH ( >110% of same month during last year )	Number of C-Section at DWH/DCH ( >110% of same month during last year ) will be reported here.	
						Maternal complication		
	A maternal complication to a pregnant woman occurring during delivery will be reported in this section. Number of pregnant women with any complication/complications during delivery will equate with number of reported maternal complications. Therefore, severe most complication in case of having multiple high risk symptoms will be reported.							
D3.1	Prolonged labour	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with prolonged labour during delivery, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of pregnant women diagnosed with prolonged labour, left the facility against medical advice.  Died at facility Number of pregnant women diagnosed with prolonged labour, died at the facility.  In case of out-referral- Survive	Prolonged labor:-After onset of regular, rhythmical painful contractions accompanied by cervical dilation i.e. true labour where labour is longer than 24 hours.	Labour room register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
						Number of pregnant women diagnosed with prolonged labour, managed, referred and survived after 3 days (from the date of referral).  In case of out-referral- Died  Number of pregnant women diagnosed with prolonged labour, managed, referred and died after 3 days (from the date of referral)  In case of out-referral- status unknown  Number of pregnant women diagnosed with prolonged labour, referred and survival status unknown.		
D3.2	Obstructed labour	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with obstructed labour during delivery, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of pregnant women diagnosed with obstructed labour, left the facility against medical advice.  Died at facility Number of pregnant women diagnosed with obstructed labour, died at the facility. In case of out-referral- Survive Number of pregnant women diagnosed withobstructed labour, managed , referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of pregnant women diagnosed with obstructed labour, managed , referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of pregnant women diagnosed with obstructed labour, referred and survival status unknown.	disproportion) occurs when a baby's head or body is too large to fit through the mother's pelvis. In spite of true labour pain, foetal head does not descend, and it results in foetal/ maternal distress.	Labour room register
D3.3	Rupture of membrane>12 hours without labour	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with rupture of membrane>12 hours without labour during delivery, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of pregnant women diagnosed with rupture of membrane>12 hours without labour, left the facility against medical advice.  Died at facility Number of pregnant women diagnosed with rupture of membrane>12 hours without labour, died at the facility.  In case of out-referral- Survive Number of pregnant women diagnosed with rupture of membrane>12 hours without labour, managed, referred and survived after 3 days (from the date of referral).  In case of out-referral- Died Number of pregnant women diagnosed with rupture of membrane>12 hours without labour, managed, referred and died after 3 days (from the date of referral)  In case of out-referral- status unknown Number of pregnant women diagnosed with rupture of membrane>12 hours without labour, referred and survived status unknown Number of pregnant women diagnosed with rupture of membrane>12 hours without labour, referred and survival status unknown.	the vagina.  If rupture occurs before 37 weeks, called preterm premature rupture of membranes (PPROM), the fetus and mother are at greater risk for complications.  It is defined as Prolonged rapture of membrane > 12 hrs (without labor).	Labour room register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
D3.4	Rupture of membrane>18 hours in labour	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with rupture of membrane>18 hours in labour during delivery, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of pregnant women diagnosed with rupture of membrane>18 hours in labour, left the facility against medical advice.  Died at facility Number of pregnant women diagnosed with rupture of membrane>18 hours in labour, died at the facility. In case of out-referral- Survive Number of pregnant women diagnosed with rupture of membrane>18 hours in labour, managed , referred and survived after 3 days (from the date of referral).  In case of out-referral- Died Number of pregnant women diagnosed with rupture of membrane>18 hours in labour, managed , referred and died after 3 days (from the date of referral)  In case of out-referral- status unknown Number of pregnant women diagnosed with rupture of membrane>18 hours in labour, referred and survival status unknown.	Prolonged rapture of membrane > 18 hrs in labor will be reported here.	Labour room register
D3.5	Pregnancy induced hypertension (PIH)	Yes	Yes	Yes	Yes	Sent home healthy after discharge  Number of pregnant women diagnosed with pregnancy induced hypertension during delivery, managed and sent home healthy.  LAMA (Left against Medical Advice)  Number of pregnant women diagnosed with pregnancy induced hypertension, left the facility against medical advice.  Died at facility  Number of pregnant women diagnosed with pregnancy induced hypertension , died at the facility. In case of out-referral- Survive  Number of pregnant women diagnosed with pregnancy induced hypertension, managed , referred and survived after 3 days (from the date of referral).  In case of out-referral- Died  Number of pregnant women diagnosed with pregnancy induced hypertension, managed , referred and died after 3 days (from the date of referral)  In case of out-referral- status unknown  Number of pregnant women diagnosed with pregnancy induced hypertension, referred and bied after 3 days (from the date of referral)  In case of out-referral- status unknown  Number of pregnant women diagnosed with pregnancy induced hypertension, referred and survival status unknown.	If hypertension occurs for the first time after 20 weeks of gestation, during labour and/or within 48 hours of giving birth, it is considered as PIH. Protein is absent in urine.	Labour room register
D3.6	Mild/severe pre-eclampsia	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with mild/severe pre-eclampsia, managed and sent home healthy. LAMA (Left against Medical Advice) Number of pregnant women diagnosed with mild/severe pre-eclampsia, left the facility against medical advice. Died at facility Number of pregnant women diagnosed with mild/severe pre-eclampsia, died at the facility. In case of out-referral- Survive	When hypertension (BP ≥ 140/90 But < 160/110 mmHg) accompanied with mild trace of protein in urine (2+) is considered mild/severe preelampsia. Danger signs are absent.	Labour room register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
						Number of pregnant women diagnosed with mild/severe pre-eclampsia, managed , referred and survived after 3 days (from the date of referral).  In case of out-referral- Died  Number of pregnant women diagnosed with mild/severe pre-eclampsia, managed , referred and died after 3 days (from the date of referral)  In case of out-referral- status unknown  Number of pregnant women diagnosed with mild/severe pre-eclampsia, referred and survival status unknown.		
D3.7	Eclampsia	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with Eclampsia during delivery, managed and sent home healthy. LAMA (Left against Medical Advice) Number of pregnant women diagnosed with Eclampsia, left the facility against medical advice. Died at facility Number of pregnant women diagnosed with Eclampsia, died at the facility. In case of out-referral- Survive Number of pregnant women diagnosed with Eclampsia, managed , referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of pregnant women diagnosed with Eclampsia, managed , referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of pregnant women diagnosed with Eclampsia, referred and survival status unknown.	Sypmtoms of Eclampsia are as follows:  1. BP ≥ 160/110  2. Present danger signs –headache, blurring of vision, epigastric pain and convulsions fits  3. Urine albumin trace – 3+	Labour room register
D3.8	Antepartum hemorrhage (APH)	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with antepartum hemorrhage, managed and sent home healthy. LAMA (Left against Medical Advice) Number of pregnant women diagnosed with antepartum hemorrhage, left the facility against medical advice. Died at facility Number of pregnant women diagnosed with antepartum hemorrhage, died at the facility. In case of out-referral- Survive Number of pregnant women diagnosed with antepartum hemorrhage, managed, referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of pregnant women diagnosed with antepartum hemorrhage, managed, referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of pregnant women diagnosed with antepartum hemorrhage, referred and survival status unknown.	Bleeding from genital tract after 20 weeks of gestation due to abruptio placenta or placenta previa or rapture of uterus leads APH.	Labour room register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
D3.9	Infection/sepsi s	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with sepsis during delivery, managed and sent home healthy. LAMA (Left against Medical Advice) Number of pregnant women diagnosed with sepsis, left the facility against medical advice. Died at facility Number of pregnant women diagnosed with sepsis, died at the facility. In case of out-referral- Survive Number of pregnant women diagnosed with sepsis, managed , referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of pregnant women diagnosed with sepsis, managed , referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of pregnant women diagnosed with sepsis, referred and survival status unknown.	Maternal sepsis in general also called Puerperal Sepsis is an infection of the genital tract at any time between the onset of rupture of membranes or labour and the 42nd day following delivery or abortion in which any two or more of the following signs and symptoms are present:  Fever of >100.5 Fahrenheit (>38°C) Abnormal, Foul smelling vaginal discharge Lower abdominal pain and tenderness	Labour room register
D3.10	Preterm labour	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with preterm labour during delivery, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of pregnant women diagnosed with preterm labour, left the facility against medical advice.  Died at facility Number of pregnant women diagnosed with preterm labour, died at the facility. In case of out-referral- Survive Number of pregnant women diagnosed with preterm labour, managed , referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of pregnant women diagnosed with preterm labour, managed , referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of pregnant women diagnosed with preterm labour, referred and survival status unknown.	changes in the cervix that start before 37 weeks of pregnancy.  • Contractions of four in 20 minutes or eight in 60 minutes.	Labour room register
D3.11	Premature rupture of membrane	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with premature rupture of membrane during delivery, managed and sent home healthy. LAMA (Left against Medical Advice) Number of pregnant women diagnosed with premature rupture of membrane, left the facility against medical advice. Died at facility Number of pregnant women diagnosed with premature rupture of membrane, died at the facility. In case of out-referral- Survive Number of pregnant women diagnosed with		Labour room register

SN	Data element	Lev	el of r	repor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
						premature rupture of membrane, managed , referred and survived after 3 days (from the date of referral).  In case of out-referral- Died  Number of pregnant women diagnosed with premature rupture of membrane, managed , referred and died after 3 days (from the date of referral)  In case of out-referral- status unknown  Number of pregnant women diagnosed with premature rupture of membrane, referred and survival status unknown.		
D3.12	Post-partum hemorrhage (PPH)	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with postpartum hemorrhage during delivery, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of pregnant women diagnosed with postpartum hemorrhage, left the facility against medical advice.  Died at facility Number of pregnant women diagnosed with postpartum hemorrhage, died at the facility. In case of out-referral- Survive Number of pregnant women diagnosed with postpartum hemorrhage, managed, referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of pregnant women diagnosed with postpartum hemorrhage, managed, referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of pregnant women diagnosed with postpartum hemorrhage, referred and survival status unknown.	Early PPH  • Bleeding from the vagina is during the first 24 hours after delivery  • Blood loss greater than 500 ml ( if the women is bleeding continuously for 10 minutes after delivery or soaks 1 pad in less than 5 min, she has PPH)  Delayed PPH  • Bleeding from the vagina is after the first 24 hours after a delivery  • Blood loss greater than 500 ml for a vaginal delivery.	Labour room register
D3.13	Anemia (severe)	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with severe anemia during delivery, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of pregnant women diagnosed with severe anemia, left the facility against medical advice.  Died at facility Number of pregnant women diagnosed with severe anemia, died at the facility. In case of out-referral- Survive Number of pregnant women diagnosed with severe anemia, managed , referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of pregnant women diagnosed with severe anemia, managed , referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of pregnant women diagnosed with severe anemia, managed , referred and died after 3 days (from the date of referral)	Pegnant women with severe aneima (Hb <7gm) during delivey will be considered here.	Labour room register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
D3.14	Other complication	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of pregnant women diagnosed with other complication during delivery, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of pregnant women diagnosed with other complication, left the facility against medical advice.  Died at facility Number of pregnant women diagnosed with other complication, died at the facility.  In case of out-referral- Survive Number of pregnant women diagnosed with other complication, managed , referred and survived after 3 days (from the date of referral).  In case of out-referral- Died Number of pregnant women diagnosed with other complication, managed , referred and died after 3 days (from the date of referral)  In case of out-referral- status unknown Number of pregnant women diagnosed with other complication, referred and survival status unknown.		Labour room register
		-				Newborn complications vill be reported here. Number of reported new born co ltiple complications. The severe most new born compl		
	available) will b	_		-				
D4.1	Preterm birth (<37 weeks gestation)	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of newborns diagnosed with preterm birth (<37 weeks gestation) at facility, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of newborns diagnosed with preterm birth (<37 weeks gestation), left the facility against medical advice. Died at facility Number of newborns diagnosed with preterm birth (<37 weeks gestation), died at the facility. In case of out-referral- Survive Number of newborns diagnosed with preterm birth (<37 weeks gestation), managed, referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of newborns diagnosed with preterm birth (<37 weeks gestation), managed, referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of newborns diagnosed with preterm birth (<37 weeks gestation) at facility, referred and survival status unknown.		Labour room register
D4.2	Low birth weight (<2500 grams)	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of newborns diagnosed with low birth weight at facility, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of newborns diagnosed with low birth weight, left the facility against medical advice.  Died at facility Number of newborns diagnosed with low birth weight, died at the facility.  In case of out-referral- Survive Number of newborns diagnosed with low birth weight, managed, referred and survived after 3 days (from the date of referral)		Labour room register

SN	Data element	SC   PHC   CHC   D			ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
						In case of out-referral.  In case of out-referral- Died  Number of newborns diagnosed with low birth weight, managed, referred and died after 3 days (from the date of referral)  In case of out-referral- status unknown  Number of newborns diagnosed with low birth weight at facility, referred and survival status unknown.		
D4.3	Asphyxia	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of newborns diagnosed with Asphyxia at facility, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of newborns diagnosed with Asphyxia, left the facility against medical advice.  Died at facility Number of newborns diagnosed with Asphyxia, died at the facility. In case of out-referral- Survive Number of newborns diagnosed with Asphyxia, managed, referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of newborns diagnosed with Asphyxia, managed, referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of newborns diagnosed with Asphyxia at facility, referred and survival status unknown.	Asphyxia (shortage of oxygen) in the uterus is due to an inadequate supply of oxygen from the mother's blood or a problem in the placenta. It is defined as slow gasping breathing/No breathing at 1-minute of age. The asphyxiated newborns generally presents with no crying immediately after birth.	Labour room register
D4.4	Infection/sepsi s	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of newborns diagnosed with sepsis at facility, managed and sent home healthy. LAMA (Left against Medical Advice) Number of newborns diagnosed with sepsis, left the facility against medical advice. Died at facility Number of newborns diagnosed with sepsis, died at the facility. In case of out-referral- Survive Number of newborns diagnosed with sepsis, managed, referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of newborns diagnosed with sepsis, managed, referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of newborns diagnosed with sepsis at facility, referred and survival status unknown.	It is defined as a newborn presenting with hypothermia/hyperthermia, unable to feed, unconsciousness, abdominal distension, rashes(>10),etc	Labour room register
D4.5	Birth anomalies	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of newborns diagnosed with birth anomalies at facility, managed and sent home healthy.  LAMA (Left against Medical Advice) Number of newborns diagnosed with birth anomalies, left the facility against medical advice.  Died at facility Number of newborns diagnosed with birth anomalies , died at the facility. In case of out-referral- Survive Number of newborns diagnosed with birth anomalies , managed , referred and survived after 3	If there are birth defects like  • Cleft Lip & Palate  • Spina bifida/swelling at the back/tuft of hair  • Hernia: Diaphragmatic or Umbilical Hernia  • Club foot  • Polydactyly/extra finger/toe  • Imperforate Anus  • Ambiguous genitalia  will be considered here.	Labour room register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
						days (from the date of referral).  In case of out-referral- Died  Number of newborns diagnosed with birth anomalies, managed, referred and died after 3 days (from the date of referral) In case of out-referral- status unknown  Number of newborns diagnosed with birth anomalies at facility, referred and survival status unknown.		
D4.6	Other newnborn complication	Yes	Yes	Yes	Yes	Sent home healthy after discharge Number of newborns diagnosed with other complication at facility, managed and sent home healthy. LAMA (Left against Medical Advice) Number of newborns diagnosed with other complication, left the facility against medical advice. Died at facility Number of newborns diagnosed with other complication, died at the facility. In case of out-referral- Survive Number of newborns diagnosed with other complication, managed , referred and survived after 3 days (from the date of referral). In case of out-referral- Died Number of newborns diagnosed with other complication, managed , referred and died after 3 days (from the date of referral) In case of out-referral- status unknown Number of newborns diagnosed with other complication at facility, referred and survival status unknown.		Labour room register
						Child health services		
D5.1	OPD	Yes	Yes	Yes	Yes	Children aged upto 5 years (PHC/CHC/DH)  Number of children aged upto 5 years visited in the outpatient department (OPD) during the reporting month.  Diarrhoea (2 months- 5 years) (SC/PHC/CHC/DH)  Number of children aged 2 months to 5 years diagnosed with diarrhoea in the out patient door (OPD) during the reporting month.  Pneumonia (2 months- 5 years) (SC/PHC/CHC/DH)  Number of children aged 2 months to 5 years diagnosed with pneumonia in the out patient door (OPD) during the reporting month.	Children aged upto 5 years All children aged upto 5 years visited the facility in outpatient door will be reported here. Diarrhoea (2 months - 5 years) Children aged (2 month - 5 years) diagnosed with Diarrhoea will be reported here. Pneumonia (2 months - 5 years) Children aged (2 month - 5 years) diagnosed with Pneumonia will be reported here. Each facility will report its own status only.	
D5.2	Suspected/dia gnosed by ASHA	Yes	No	No	No	Pneumonia Number of pneumonia cases suspected/diagnosed by AHSA during the reporting month. <u>Diarrhoea</u> Number of diarrhoea cases suspected/diagnosed by AHSA during the reporting month.	Pneumonia ANM will compile the information in the monthly meeting from ASHA on IAPPD format. <u>Diarrhoea</u> Children aged (2 month - 5 years) diagnosed with Diarrhoea by ASHA during home visits will be reported here. Each facility will report its own status only.	IAPPD form 1A for Pneumonia & IAPPD form 1 B for Diarrhoea

SN	Data element	Lev	el of	repoi	rting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
D5.3	Diagnosed by ANM	Yes	No	No	No	Pneumonia Number of pneumonia cases suspected/diagnosed by ANM during the reporting month.  Diarrhoea Number of diarrhoea cases suspected/diagnosed by ANM during the reporting month.	Pneumonia Children aged (2 month - 5 years) diagnosed with Pneumonia by ANM during VHND and home visits will be reported here. Diarrhoea Children aged (2 month - 5 years) diagnosed with Diarrhoea by ANM during VHND and home visits etc. will be reported here. Each facility will report its own status only.	Pneumonia & IAPPD form 1 B for
D5.4	IPD	No	Yes	Yes	Yes	Children aged upto 5 years  Number of children aged upto 5 years admitted in the facility during the reporting month.  Diarrhoea (2 months- 5 years)  Number of admitted children aged 2 months to 5 years diagnosed with diarrhoea in the facility during the reporting month.  Pneumonia (2 months- 5 years)  Number of admitted children aged 2 months to 5 years diagnosed with pneumonia in the facility during the reporting month.	Children aged upto 5 years All children aged upto 5 years admitted in the facility, as conformed by issuance of bed head tickets, will be reported here.  Diarrhoea (2 months- 5 years) Children aged (2 month - 5 years) admitted in the facility due to Diarrhoea will be reported here.  Pneumonia (2 months- 5 years) Children aged (2 month - 5 years) admitted in the facility due to Pneumonia will be reported here. Each facility will report its own status only.	Bed head tickets
D5.5	Received Inj.Gentamycin	No	Yes	Yes	Yes	Children aged upto 5 years  Number of children aged upto 5 years received injection Gentamycin in the facility during the reporting month.  Pneumonia (2 months- 5 years)  Number of children aged 2 months to 5 years diagnosed with pneumonia received injection Gentamycin in the facility during the reporting month.	Children aged upto 5 years Children aged upto 5 years given injection Gentamycin during the reporting month will be reported here. Pneumonia (2 months- 5 years) Children aged 2 months to 5 years diagnosed with pneumonia given injection Gentamycin will be reported here.	OPD register
D5.6	Received Tab/Sy. Amoxicillin	Yes	Yes	Yes	Yes	Children aged upto 5 years  Number of children aged upto 5 years received tablet/syrup Amoxicillin in the facility during the reporting month.  Pneumonia (2 months- 5 years)  Number of children aged aged 2 months to 5 years diagnosed with pneumonia received tablet/syrup Amoxicillin in the facility during the reporting month.	Children aged upto 5 years Children aged upto 5 years given Tab/Syrup Amoxicillin during the reporting month will be reported here. Pneumonia (2 months- 5 years) Children with Pneumonia given Tab/Syp Amoxicillin during the reporting month will be reported here.	SC: IAPPD form 1A PHC/CHC/DH: OPD register
D5.7	Only ORS	Yes	Yes	Yes	Yes	Number of children aged 2 months to 5 years diagnosed with diarrhoea given only ORS in the facility during the reporting month.	SC: Children with Diarrhoea given only ORS by ASHA/ANM during the reporting month will be reported here. PHC/CHC/DH: Children with Diarrhoea given only ORS in the facility in the reporting month will be reported here.	SC: IAPPD form 1 B PHC/CHC/DH: OPD register
D5.8	Only Zinc	Yes	Yes	Yes	Yes	Number of children aged 2 months to 5 years diagnosed with diarrhoea given only Zinc in the facility during the reporting month.	SC: Children with Diarrhoea given only Zinc by ASHA/ANM during the reporting month will be reported here. PHC/CHC/DH: Children with Diarrhoea given only Zinc in the facility in the reporting month will be reported here.	SC: SC: IAPPD form 1 B PHC/CHC/DH: OPD register

SN	Data element	Leve	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
D5.9	ORS and Zinc	Yes	Yes	Yes	Yes	Number of children aged 2 months to 5 years diagnosed with diarrhoea given both ORS & Zinc in the facility during the reporting month.	SC: Children with Diarrhoea given both ORS and Zinc by ASHA/ANM during the reporting month will be reported here. PHC/CHC/DH: Children with Diarrhoea given both ORS and Zinc in the facility in the reporting month will be reported here.	SC: SC: IAPPD form 1 B PHC/CHC/DH: OPD register
D5.10	Referred out	Yes	Yes	Yes	Yes	Children aged upto 5 years (PHC/CHC/DH) Number of children aged upto 5 years referred out from the facility during the reporting month.  Diarrhoea (2 months- 5 years) (SC/PHC/CHC/DH) Number of children, aged 2 months to 5 years diagnosed with diarrhoea, referred out from the facility during the reporting month.  Pneumonia (2 months- 5 years) (SC/PHC/CHC/DH) Number of children, aged 2 months to 5 years diagnosed with pneumonia, referred out from the facility during the reporting month or by ASHA/ANM (SC only).	Children aged upto 5 years Children aged upto 5 years referred out to the higher facility due to any disease will be reported here. Diarrhoea (2 months- 5 years) Children aged (2month -5 years) referred to the higher facility due to Diarrhoea will be reported here. Pneumonia (2 months- 5 years) Children aged (2 months- 5 years) referred to higher facility due to pneumonia will be reported here. At sub-center level children will be referred out by ANM/ASHA. Each facility will report its own status only.	SC: SC: IAPPD form 1 B PHC/CHC/DH: Referral-out register
D5.11	Number of ASHA with amoxicillin supply	Yes	No	No	No	Number of ASHA with amoxicillin supply during the reporting month. (for 2 cases of Pneumonia i.e., 20 Dispersible tablets and 2 Syrup)	ANM will compile information in the monthly meeting from ASHA on IAPPD format.	IAPPD form 1A
D5.12	Number of ASHA with ORS & Zinc stock	Yes	No	No	No	Number of ASHA with ORS & Zinc stock during the reporting month.	Number of ASHAs with 10 packets of ORS and 70 tablets of zinc by the end of reporting month will be reported as ASHAs with ORS & Zinc stock.  ANM will compile information in the monthly meeting from ASHA on IAPPD format.	IAPPD form 1A VHIR
D5.13	Number of young infants (0-2 month) diagnosed with sepsis by ANM	Yes	No	No	No	Number of young infants (0-2 month) diagnosed with sepsis by ANM during the reporting month.	Infants diagnosed with sepsis by ANM during the reporting month will be reported here. Each sub centre will report its own status only.	Sepsis management card IAPPD reporting format for SC
D5.14	Number of young infants given pre- referral dose	Yes	No	No	No	Number of young infants given pre-referral dose during the reporting month.	Infants given pre-referral dose of inj. Gentamycin and Sy. Amoxicillin by ANM during the reporting month will be reported here. Each sub centre will report its own status only.	Sepsis management card IAPPD reporting
D5.15	Number of young infants who completed 7- day antibiotic	Yes	No	No	No	Number of young infants who completed 7-day antibiotic treatment during the reporting month.	Infants treated with inj. Gentamycin and Sy. Amoxicillin for seven days by ANM during the reporting month will be reported here. Each sub centre will report its own status only.	Sepsis management card IAPPD reporting
D5.16	Number of young infants who were treated by ANM and	Yes	No	No	No	Number of young infants who were treated by ANM and survived during the reporting month.	Infants treated with inj. Gentamycin and Sy. Amoxicillin by ANM and survived during the reporting month will be reported here. Each sub centre will report its own status only.	Sepsis management card IAPPD reporting
						Child death		

SN	Data element	Lev	el of ı	repoi	rting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
D5.17	Number of Children died	No	Yes	Yes	Yes	O-28 days (Neonatal death)  Number of children died aged 0-28 days (Neonatal death) at the facility during the reporting month.  29 days-1 year (Post natal death)  Number of Children died aged 29 days-1 year (Post natal death) at the facility during the reporting month.  1-5 years (Child death)  Number of Children died aged 1-5 years (Child death) at the facility during the reporting month.	0-28 days (Neonatal death)  Neonatal deaths in the facility in the reporting month will be reported here.  29 days-1 year (Post natal death)  Post natal deaths in the facility in the reporting month will be reported here.  1-5 years (Child death)  Child deaths in the facility in the reporting month will be reported here.	Death register
D6					<u> </u>	Family planning		
D6.1						1st Dose of DMPA		
D6.1.1	Women	Yes	Yes	Yes	Yes	Post Abortion Total number of women aged 15-49 years receiving the first dose of DMPA (Inj. Antara) after abortion during the reporting month.  Post Partum Total number of women aged 15-49 years receiving the first dose of DMPA (Inj. Antara) after delivery (post partum) during the reporting month.  Interval Interval Interval Total number of women aged 15-49 years receiving the first dose of DMPA (Inj. Antara) in 'interval' period (6 weeks after delivery or any time when the woman is not pregnant) during the reporting month. This is apart from post-partum or post-abortion.	Post Abortion Women aged 15-49 years received the first dose of DMPA (Inj. Antara) after abortion during the reporting month will be reported here.  Post Partum All women aged 15-49 years received the first dose of DMPA (Inj. Antara) after delivery (post partum) during the reporting month will be reported here.  Interval All women aged 15-49 years received the first dose of DMPA (Inj. Antara) in 'interval' period (6 weeks after delivery or any time when the woman is not pregnant) during the reporting month will be reported here.	DMPA Register
						Fix days for family planning services at the fa	acility	
D6.2.1	Planned	No	Yes	Yes	Yes	Fix days services (FDS)  Number of fixed days for family planning services planned in the reporting month.  Fix days outreach services (FDOS)  Number of fixed days (Outreach) for family planning services planned in the reporting month.		FDS Calender
D6.2.2	Held	No	Yes	Yes	Yes	Fix days services (FDS)  Number of fixed days for family planning services held in the reporting month.  Fix days outreach services (FDOS)  Number of fixed days (Outreach) for family planning services held in the reporting month.		Camp report or Beneficiary payment register
						Family planning services given in FDS and F	DOS	
D6.3.1	LAP	No	Yes	Yes	Yes	Fix days services (FDS)  Number of laparoscopic operation conducted on the FDS days in the reporting month.  Fix days outreach services (FDOS)  Number of laparoscopic operation conducted on the FDOS days during the reporting month.	Laparoscopic tubal occlusion is a procedure performed by specially trained providers using endoscopic equipment. Laparoscopic tubal occlusion is usually performed in the 'interval' period (6 weeks after delivery or any time when the woman is not pregnant) or following first trimester abortion. For interval procedures, laparoscopy may be performed at any time in the menstrual cycle although it is preferable to do it at the end of the menstrual period or shortly thereafter to ensure that the client is not pregnant.	Sterilisation register
D6.3.2	ML	No	Yes	Yes	Yes	Fix days services (FDS)  Number of minilap operation conducted on the FDS days in the reporting month.  Fix days outreach services (FDOS)  Number of minilap operation conducted on the FDOS days in reporting month.	Minilap Tubectomy is an abdominal surgical approach to reach the fallopian tubes by means of an incision 2-3 cm in length.	Sterilisation register

SN	Data element	Lev	el of r	repor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
D6.3.3	NSV	No	Yes	Yes	Yes	Fix days services (FDS)  Number of NSV operation conducted on the FDS days during the reporting month.  Fix days outreach services (FDOS)  Number of NSV operation conducted on the FDOS days in reporting month.	NSV is a short time process of Male sterilisation. It is done with ringed clamp and dissecting forceps. Peri-vasal block is used and needs only one needle puncture. Not closure needed after the surgery. It is single step procedure. Traditional or incisional vasectomy is another process of Male Vasectomy. It is done under local anaesthesia. Scalpel incision in the scrotum in needed for the entry. Stiches required after surgery.	Sterilisation register
D6.3.4	IUCD	No	Yes	Yes	Yes	Fix days services (FDS)  Number of IUCD inserted on the FDS days during the reporting month.  Fix days outreach services (FDOS)  Number of IUCD inserted on the FDOS days in reporting month.	The copper bearing intrauterine contraceptive device (Cu IUCD) is a small, flexible plastic frame containing copper, which a specifically trained provider inserts into a woman's uterus. IUCD provides very effective, safe, and long-term, yet reversible protection from pregnancy.  Currently there are 2 types of Cu IUCDs available under the national programme—  1. Cu IUCD 380 A, which is effective up to 10 years  2. Cu IUCD 375, which is effective up to 5 years	IUCD Register
D6.3.5	DMPA (Inj. Antara)	No	Yes	Yes	Yes	Fix days services (FDS)  Number of DMPA (Inj, Antara) given on the FDS days during the reporting month.  Fix days outreach services (FDOS)  Number of DMPA (Inj, Antara) given on the FDOS days in reporting month.	Injectable Contraceptive (DMPA) is an aqueous suspension of microcrystal for depo injection of pregnane 17 alfa – hydroxyprogesterone – derivative progestine medroxyprogesterone acetate. DMPA is a Progestogen-only Injectable (POI) given deep intra-muscular every three months (one dose = one vial of 150 mg, aqueous suspension of DMPA). It has been launched under brand name Inj. Anatara by Government of India. DMPA acts for 3 months with a grace period of 4 weeks.	DMPA Register
D6.3.6	Centchroman	No	Yes	Yes	Yes	Fix days services (FDS)  Number of centchroman tablets given on the FDS days during the reporting month.  Fix days outreach services (FDOS)  Number of centchroman tablets given on the FDOS days in reporting month.  Follow-up/complications	A non-steroidal, non-hormonal contraceptive method, taken twice a week on fixed days for the first three months, followed by once a week thereafter. Safe for breastfeeding women. It is in tablet form.	Facility Register
D6.4.3.	Follow-up cases	Yes	Yes	Yes	Yes	Male Sterilization Number of cases of Male sterlisation followed up during the reporting month. Female Sterilization Number of cases of Female sterlisation followed up during the reporting month. PPIUCD	Each client of Male Sterlisation is called for follow-up after 48 hours for check-up, on the 7th day for stitch removal (for conventional vasectomy), a fter 3 months for semen analysis. In an emergency as and when required. Female sterliation is called for follow-up visit at the facility on 7th day after surgery and after one	Family Planning Registers / OPD Register
						Number of cases of PPIUCD insertion followed up during the reporting month.  IUCD  Number of cases of IUCD insertion followed up during the reporting month.  DMPA  Number of cases of DMPA given followed up during the reporting month.	month of surgery. The recommended follow up schedule after PPIUCD/IUCD insertion is first visit after one month, preferably after next menstrual period. Subsequent visits after 3 months and 6 months. Unscheduled visits as and when required. After DMPA injection follow up is schedules at from first dose to second dose every month and from second dose every third month.	

SN	Data element	Lev	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	CHC	DH			
D6.4.4. 1	Complications	Yes	Yes	Yes	Yes	PPIUCD  Number of cases of complications after PPIUCD insertion during the reporting month.  DMPA  Number of cases of complications after DMPA given during the reporting month.	There are no serious side effects of DMPA, however a few women may experience some menstrual irregularities in the form of irregular bleeding, prolonged bleeding or amenorrhea. Counselling should resolve concerns of the women; however, if provider feels that the changes are of a serious nature, client should be referred to a higher centre.	PPIUCD/ DMPA registers
D6.4.5	Beneficiaries received counselling for FP	Yes	Yes	Yes	Yes	Number of beneficiaries who were counselled on FP by the counsellor during the reporting month.	Eligible couples are counselled for the choice of method of contraception. It is done by the counsellor at the facility level.	Counselling register
D6.4.6	Beneficiaries presented with complete basket of choice	Yes	Yes	Yes	Yes	Number of beneficiaries who were told and discussed about each and every method of contraception by the counsellor during the reporting month.	The counsellor explains each method of family planning (Male Sterlisation, Female Sterlisation, IUCD, PPIUCD, OCP, ECP, Condoms etc.). Pros and Cons of each method is explained to the benefeciary. This helps them to arrive at a decision.	Counselling register
			le.		1	JSSK (Beneficiaries received free services unde	I .	
D7.1.1	Drugs and Consumables	Yes	Yes	Yes	Yes	Pregnant women  Number of pregnant women received drugs and consummables under JSSK at the facility during the reporting month.  Newborn  Number of newborns received drugs and consummables under JSSK at the facility during the reporting month.	Pregnant women Number of pregnant women receiving free drugs and consummables will be reported here. Newborn Number of newborns receiving free drugs and consummables at the facility will be reported here.	JSSK register
D7.1.2	Ultrasound test	No	Yes	Yes	Yes	Number of pregnant women received ultrasound test under JSSK at the facility during the reporting month.	Pregnant women received ultrasound test at the facility or out of facility paid by the facility for during the reporting period, will be reported here.	JSSK register
D7.1.3	Diet	No	Yes	Yes	Yes	Number of pregnant women received diet under JSSK at the facility during the reporting month.	All mothers who received free diet during post partum stay at the facility during the reporting period will be reported here.	JSSK register
D7.1.4	Blood transfusion	No	Yes	Yes	Yes	Number of pregnant women received blood transfusion under JSSK at the facility during the reporting month.	Pregnant women received blood transfusion at the facility during the reporting period will be reported here.	JSSK register
D7.1.5	Diagnostic services	No	Yes	Yes	Yes	Pregnant women Number of pregnant women received diagnostic services under JSSK at the facility during the reporting month.  Newborn Number of newborns received diagnostic services under JSSK at the facility during the reporting month.	Pregnant women and newborns are offered free diagnostic services under JSSK.	JSSK register/ Diagnostice record in the lab
D7.1.6	Transported from lower to higher hospitals	No	Yes	Yes	Yes	Pregnant women  Number of pregnant women transported from lower to higher hospitals (IFT) under JSSK at the facility during the reporting month.  Newborn  Number of newborns transported from lower to higher hospitals (IFT) under JSSK at the facility during the reporting month.	Pregnat women/newborns are transported from lower to higher hospitals in case of referral by 102/108 Ambulance.	JSSK register or record of 102/108 abulance

SN	Data element	Lev	el of r	epoi	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
D7.1.7	Transported from home to hospital	No	Yes	Yes	Yes	Pregnant women Number of pregnant women transported from home to hospital under JSSK during the reporting month. Newborn Number of newborns transported from home to hospital under JSSK during the reporting month.	Pregnant women/newborns transported from home to hospital by 102/108 ambulance will be reported here.	JSSK register or record of 102/108 abulance
D7.1.8	Drop back	No	Yes	Yes	Yes	Pregnant women Number of pregnant women received drop back under JSSK from the facility during the reporting month.  Newborn Number of newborns received drop back from the facility during the reporting month.	Pregnant women/newborns given drop back from the hospital will be reported here.	JSSK register or record of 102/108 abulance
D7.2.9	Free treatment	No	Yes	Yes	Yes	Number of newborns received free treatment under JSSK at the facility during the reporting month.	Number of newborns received free treatment under JSSK at the facility during the reporting month will be reported here.	JSSK register
		<u> </u>				JSSK grievance redressal		
D7.3.1	Complaints received	No	Yes	Yes	Yes	Number of complaints from the beneficiaries received at the facility during the reporting month.		
D7.3.2	Complaints resolved	No	Yes	Yes	Yes	Number of complaints resolved in JSSK grievance redressal at the facility during the reporting month.		
						Process indicator		
E1	Misbehaviour incidents by patients & relatives	No	Yes	Yes	Yes	Number of misbehaviour incidents by patients & relatives at the facility during the reporting month.	Misbehaviour incidents by patients & relatives at the facility during the reporting month will be reported here.	
E2	Employees reported absent during inspections	No	Yes	Yes	Yes	Number of employees reported absent during inspections at the facility during the reporting month.	Number of employees reported absent during inspections at the facility during the reporting month will be reported here.	
E3	Is the agency hired for bio medical waste management at facility? (Yes/No)	No	Yes	Yes	Yes	Whether an agency is hired for bio medical waste management at facility or not by the end of the reporting month.		
E4	Contract rate per bed (in Rs.)	No	Yes	Yes	Yes	What is the contract rate per bed?	Contract rate per bed (In Rs.) for the agencey collecing bio medical waste will be considered here.	Finance person record or related resgister
E5	Bio-medical waste lifted by agency during the month	No	Yes	Yes	Yes	Whether bio-medical waste is lifted by any agency during the reporting month or not.		
E6	Indents made as per rate contract at facility	No	No	Yes	Yes	Number of indents for drugs and consumables made as per rate contract at facility during the reporting month.	Indents for drugs and consumables made as per rate contract at facility during the reporting month will be reorted here.	

SN	Data element	Lev	el of r	epoi	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
E7	Value (Rs.) of purchase orders placed as per rate contract.	No	No	Yes	Yes	Value of purchase orders placed as per rate contract at the facility by the end of the reporting month.	Value of purchase orders placed as per rate contract will be reported here for the the reporting month.	Finance person record or related resgister
E8	Indent made as per rate contract against which supply not received at facility	No	No	Yes	Yes	Number of indents, made as per rate contract, with no supply at facility during the reporting month.	Indents for drugs and consumables made as per tate contract against which supply was not received at facility during the reporting month will be reorted here.	
E9	Indents made for local purchase at facility	No	No	Yes	Yes	Number of indents made for local purchase at facility during the reporting month.	Indents for drugs and consumables made for local purchase at facility will be reported here.	
E10	Value (Rs.) of purchase orders placed as per local purchase	No	No	Yes	Yes	Number of value of purchase orders placed as per local purchase at the facility by the end of the reporting month.	Value of purchase orders placed as per local purchase will be reported here for the the reporting month.	Finance person record or related resgister
E11	Drugs expired during the month	No	Yes	Yes	Yes	Number of drugs expired during the reporting month.	Number of drugs in the store expired during the reporting month need to be reported here.	Stock register
E12	Stock out	No	Yes	Yes	No	Number of medicines stock out including emergency		Stock register
E12	including emergency medicines					medicines at the facility during the reporting month.		Stock register
E13	Has the HMIS/MCTS validation committee constituted ? (Yes/No)	No	No	Yes	Yes	Whether the facility (PHC/CHC/DH) has constituted HMIS/MCTS validation committee or not.	Government order was released in August 2015 for the constitution of validation committee at district and block levels for the purpose of improving data quality of HMIS/MCTS and timely uploading the data on portal.	Vaidation committee meeting minute register
E14	HMIS/MCTS validation committee meeting held for the month (Yes/No)	No	No	Yes	Yes	Whether HMIS/MCTS validation committee meeting was held at the facility (PHC/CHC/DH) or not.		Vaidation committee meeting minute register
E15	Purchase committee meeting held for the month (Yes/No)	No	No	Yes	Yes	Whether purchase committee meeting was held at the facility (PHC/CHC/DH) during the reporting month or not.		
E16	Physical verification of stock held in the facility during the month (Yes/No)	No	No	Yes	Yes	Whether physical verification of stock was held in the facility (PHC/CHC/DH) during the reporting month.		
E17	Grievance redressal cell functional at facility (Yes/No)	No	Yes	Yes	Yes	Whether grievance redressal cell is functional at the facility during the reporting month or not.		

SN	Data element	Lev	el of ı	repoi	rting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
E18	Complaints/gr eivances of patients' received	No	No	No	Yes	Number of complaines/greivances of patients' received at the facility during the reporting month.	All complaines/greivances of patients' received at the facility during the reporting month will be reported here.	Complaint/gr eivance register
E19	Complaints /greivances of patients' resolved	No	No	No	Yes	Number of complaines/greivances of patients' resolved at the facility during the reporting month.	Number of complaines/greivances of patients' resolved at the facility during the reporting month will be reported here.	Complaint/gr eivance register
E20	Citizen charter available at facility (Yes/No)	No	Yes	Yes	Yes	Whether Citizen charter is available at the facility or not.	A Citizens' Charter represents the commitment of the organisation towards standard, quality and time frame of service delivery, grievance redress mechanism, transparency and accountability.  Citizens' charter is written on the wall in the entrance area or in waiting area. It needs to be observed and reported accordingly.	By observation
E21	MAS approved (applicable for only UPHC)	No	Yes	No	No	MAS (Mahila Arogya Samiti) approved (applilcable for only UPHC)		
E22	MAS formed (applicable for only UPHC)	No	Yes	No	No	MAS (Mahila Arogya Samiti) formed (applilcable for only UPHC)		
E23	AAA meeting planned (Yes/No)	Yes	No	No	No	Whether AAA meeting planned at the facility during the reporting month or not.	AAA meeting is planned monthly at sub-center where front line workers such as ASHA, ANM and Anganwadi meet together.	AAA Meetingminu tes recording reg.
E24	AAA meeting held (Yes/No)	Yes	No	No	No	Whether AAA meeting was held at the facility during the reporting month or not.	AAA meeting is conducted monthly at sub-center where front line workers such as ASHA, ANM and Anganwadi meet together.	AAA Meetingminu tes recording reg.
E25	ASHAs present in meeting	Yes	No	No	No	Number of ASHAs who are in position and working against the sanctioned number in the sub center area attended the meeting with their VHIR	ASHAs, who are in position and working against the sanctioned number in the sub center area attended the meeting with their VHIR, need to be reported here.	AAA Meetingminu tes recording reg.
E26	AWWs present in meeting	Yes	No	No	No	Whether all AWWs who are in position in the sub center area attending the meeting with their concerned pregnant women and under 5 children register	AWWs, who are in position in the sub center area attended the meeting with their concerned pregnant women and under 5 children register, need to be reported here.	AAA Meetingminu tes recording reg.
E27	VHSNC formulated/co nstituted	Yes	No	No	No	Number of Village Health Sanitation and Nutrition Committees constituted in the particular Sub center area based on the number of Gram Panchayats	Number of Village Health Sanitation and Nutrition Committees constituted in the particular Sub center area need to be reported here.	VHSNC meeting regitser
E28	VHSNC meeting held	Yes	No	No	No	Number of the VHSNC meeting held in the SC area during the reporting month (with proper quorum meaning at least 2/3 members attended the meeting)	VHSNCs are mandated to conduct one meeting per month where ASHA act as member secretary, ANM as Vice President in the absence of Pradhan who acts as the President of the VHSNC apart from the 6 members of the committee.	Compiled ASHA Incentive Claim submissions
E29	VHND/RI sessions supported by AVD	Yes	No	No	No	Number of VHND sessions where vaccine was supplied by the AVD system	Vaccine carriers and related paraphernalia are transported by the Alternate Vaccine Delivery mechanism from the original pick-up point to session conduction site in the village.	RI reports

SN	Data element	Lev	el of r	epor	ting	Data element definition	Guidance of data collection and validation	Data source
		sc	PHC	СНС	DH			
E30	Whether microplan review exercise	Yes	No	No	No	Whether VHND microplan was reviewed or not.	VHND microplan review exercise is done biannually .	
E31	ASHA complaints	No	No	Yes	No	Received Number of ASHA Complaints received in the reporting month by the Block ASHA Grievance Reddressal Committee in written.  Resolved Number of ASHA Complaints resolved in the reporting month Not reslovled > 21 days Number of ASHA Complaints not reslovled > 21 days in the reporting month Referred to higher committee Number of ASHA Complaints referred to higher committee in the reporting month.	Number of ASHA Complaints received in the reporting month by the Block ASHA Grievance Reddressal Committee in written. The Committee is constituted at the block level apart from district and state levels for escalation in cases where it remains unresolved at the previous levels.  Number of ASHA Complaints not reslovled > 21 days in the reporting month by the Block ASHA Grievance Reddressal Committee including complaints pending from last month.	Block ASHA Grievance Reddressal Committee Register
E32	ASHA sangini meeting held in Block (Yes/No)	No	No	Yes	No	Whether ASHA SANGINI meeting held or not in the reporting month.	A monthly ASHA SANGINI meeting has been mandated to be held every month for review of ASHA Sanginis performance which is primarily addressed by the BCPM and supported by other block officials like HEO, MOIC, ARO etc.	ASHA Sangini monthly review meeting
E33	No. of ASHA sangini attended review meeting	No	No	Yes	No	Number of ASHA sangini attended the monthlty review meetying against the number in position	Number of ASHA sangini attended the monthlty review meetying will be reported here.	ASHA Sangini monthly review meeting
E34	ASHA cluster meeting planned	No	No	Yes	No	Number of ASHA Cluster meetings planned for the reporting month.	ASHA Cluster meetings are planned to be held preferably on Mondays or Thursdays of the week	ASHA Monthly Cluster meeting
E35	ASHA cluster meeting held	No	No	Yes	No	Number of ASHA Cluster meetings held in the reporting month	ASHA Cluster meetings are held monthly.	ASHA Monthly Cluster meeting
E36	ASHA participated in cluster meetings	No	No	Yes	No	Number of ASHAs participated in the cluster meeting with their VHIRs agaisnt the number targetted	Generally ASHAs under ASHA SANGINIS are targetted to attend the cluster meeting held either at the block PHC/CHC or any PHC whichever is feasible, more accessible and less in distance from the residences of the ASHAs.	ASHA Monthly Cluster meeting Register
E37	ASHA submitted vouchers for the payment of incectives	No	No	Yes	No	Number of ASHAs who submitted the incentive claim vouchers against the total ASHAs working in any SC area	ASHAS are required to submit their Incentive Claim vouchers on the prescribed structured vouchers distributed among the ASHAs to their respective ANMs who after verification submit the same to ASHA sanginies for further submission to BCPM for procesisng and payment transfer to the acounts of ASHAs.	Compiled ASHA Incentive Claim submissions Register- Block ASHA Payment Master Register
E38	ASHA received incentives against submitted vouchers	No	No	Yes	No	Number of ASHAs who reported incentive amount realisation in their accounts against the number of ASHAs who submitted their claims	ASHA incentive amounts are transfrred electronically through a common bank advisory through the PFMS system on a monthly basis based on the vvouchers submitted by them as per the verification done by the ANMs.	Block ASHA Payment Master Register

SN	Data element	Level of reporting			ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
E39	RI quarterly review meeting conducted (Yes/No)	No	No	Yes	No	Whether RI quartely review meeting conducted at the facility during the reporting month or not.	RI Report	RI quarterly review meeting minutes register
E40	Wether the funds for consolidation of micro plan utilized (Yes/No)	No	No	Yes	No	Whether the funds for consolidation of micro plan were utilized or not at the facility during the reporting month.	MFR	Monthly Physical & Financial Report
		Yes	No	No	No	HBNC		
F.1	ASHAs having complete and functional HBNC kit	res	NO	NO	NO	Number of ASHAs having complete and functional HBNC kit under a sub-center during the reporting month.	A complete and functional HBNC kit includes neonates weighing machine with bag, digital thermometer, digital watch and blanket for neonates.	HBNC reporting format -3
F.2	ASHAs having complete HBNC drug kit	Yes	No	No	No	Number of ASHAs having complete HBNC durg kit under a sub-center during the reporting month.	HBNC drug kit includes paracetamol syrup, Amoxicillin syrup and Gentian Violet Paint Skin Solution. G. V. Paint is used for Fungal infections of the skin, Ringworm infections, Athlete's foot, Minor cuts and scrapes and other conditions.	HBNC reporting format -3
F.3	Number of HBNC visit forms submitted by ASHA	Yes	No	No	No	Number of HBNC visit forms submitted by ASHA at sub-center by the end of the reporting month.	Number of HBNC visit forms submitted by ASHA duirng the reporting period will be reported here.	HBNC reporting format -3
F.4	Number of ASHA submitted HBNC visit forms	Yes	No	No	No	Number of ASHA submitted HBNC visit forms to ANM during the reporting month.	Number of ASHA submitted HBNC visit forms to ANM during the reporting month will be reported here.	HBNC reporting format -3
F.5.1	Newborn male	Yes	No	No	No	Visited Number of new-borns (male) visited by ASHA under a sub-center areas by the end of the reporting month.  Birth defect Number of new-borns (male) identified with birth defect Weight <2500 gm Number of new-borns (male) weighing <2500 gm Weight <1800 gm Number of new-borns (male) weighing <1800 gm Referred Number of new-borns (male) referred by ASHA Deaths Number of new-borns (male) died	ANM will take details of visits by ASHA to report here.  A birth defect is a problem that occurs when a baby is developing in utero (in the womb).  Common birth defects are cleft lip or palate (when there's an opening or split in the lip or roof of the mouth), clubfoot (when the foot points inward instead of forward), etc.  During home visits ASHA is to weigh newborns. She will report all newborns with less than 2500 gm/ 1800 gm to ANM.  ASHA can refer the newborn to the hospital in case of any complication observed in the baby during home visit.	HBNC reporting format -3

SN	Data element	Level of reporting			ting	Data element definition	Guidance of data collection and validation	Data source
		SC	PHC	СНС	DH			
F.5.2	Newborn female	Yes	No	No	No	Visited Number of new-borns (female) visited by ASHA under a sub-center areas by the end of the reporting month.  Birth defect Number of new-borns (female) identified with birth defect Weight <2500 gm Number of new-borns (female) weighing <2500 gm Weight <1800 gm Number of new-borns (female) weighing <1800 gm Referred Number of new-borns (female) referred by ASHA Deaths Number of new-borns (female) died	ANM will take details of visits by ASHA to report here. A birth defect is a problem that occurs when a baby is developing in utero (in the womb). Common birth defects are cleft lip or palate (when there's an opening or split in the lip or roof of the mouth), clubfoot (when the foot points inward instead of forward), etc. During home visits ASHA is to weigh newborns. She will report all newborns with less than 2500 gm/ 1800 gm to ANM. ASHA can refer the newborn to the hospital in case of any complication observed in the baby during home visit.	HBNC reporting format -3
F.6	Low birth weight newborns followed up by ASHAs after discharge from SNCU	Yes	No	No	No	Number of low birth weight newborns followed up by ASHAs after discharge from SNCU (Special Newborn Care Unit) under a sub-center area during the reporting month.	Number of low birth weight newborns followed up by ASHAs after discharge from SNCU (Special Newborn Care Unit) during the reporting month will be reported here.	HBNC reporting format -3
F.7	ASHAs supported by ASHA Sanginis in HBNC visit	Yes	No	No	No	Number of ASHAs supported by ASHA Sangini/Sanginis in HBNC visits under a sub-center area during the reporting month.	ASHA Sanginis who are appointed as mentor of ASHAs. They are also supposed to support ASHAs during HBNC visits by ASHA. Number of ASHAs who were supported by ASHA Sangini during HBNC visits will be reported here for the reporting month.	HBNC reporting format -3
F.8	HBNC visit forms verified by ANM during VHND/ Home visits	Yes	No	No	No	Number of HBNC visit forms verified by ANM during VHND/Home visits during the reporting month.	Number of HBNC visit forms verified by ANM during VHND/Home visits during the reporting month will be reported here.	HBNC reporting format -3
						Village Health & Nutrition Day/Community p	rocess	
G1	Number of beneficiaries under social marketing products distributed by ASHA	Yes	No	No	No	Condom in pieces Number of condoms distributed by ASHA under social marketing under the sub-center areas.  OCP (Oral contraceptive pills) (in cycle) Number of beneficiaries given OCP (in cycle)  ECP (Emergency contraceptive pills) Number of beneficiaries given ECP under social marketing Sanitary napkins for women Number of beneficiaries (women) given sanitary napkins under social marketing Sanitary napkins for adolescent girls Number of adolescent girls given sanitary napkins under social marketing PTK Number of beneficiaries given PTK (pregnancy testing kit) in the reporting month.	ANM will collect the information from ASHA in their meetings.  Number of condoms distributed to eligible couples against mentioned in the due list.  Number of beneficiaries given Oral contraceptive pills (in cycles) to eligible curretnly married women against mentioned in the due list.  ANMs by the help of PTK determines pregancy of the expected pregnant women at VHNDs	VHIR

SN	Data element	Level of reporting				Data element definition	Guidance of data collection and validation	Data source
G2	Number of adolescent girls rendered by ANM	Yes	No No	No	No	Health check up Number of adolescent girls provided TT shots at 10 & 16 year. Adoelscent aging 10- 19 years tested for HB.  Girls (<7 hb/dl) Number of adolescent girls tested HB and found to be (<7 hb/dl) who were referred to higher facility for treatment and management.  Girls (>=7 and <11hb/dl) Number of adolescents girls tested HB and found to be (>=7 and <12gm/dl)  Girls IFA tablet Number of out of school girls both married and unmarried registered under AWW given IFA tablets on VHND.	Adolescent girls are provided TT shots at 10 & 16 years of age and adoelscent girsl aging 10-19 yrs tested for HB.  Adolescent girls tested for HB and found to be (<7 hb/dl) are referred to higher facility for treatment and management.  Adolescents girls tested HB and found to be (>=7 and <12gm/dl) are counselled for iron rich diet and provided weekly iron supplementation on the VHND.  Out of school girls both married and unmarried registered under AWW are given weekly IFA tablets on VHND.	VHND Tally sheet
G3	Number of beneficiaries counselled by ANM	Yes	No	No	No	Pregnant women Number of PW counselled on birth planning, institutional delivery, ANC, PNC against those mentioned in the due list. Parents/guardians for 0-5 year children Number of parents/guardians of 0-5 year children counselled for BF, EBF, CF, Complete Imm., Vacc, etc. Eligible couples Number of eligible couples counselled on use of contraceptves. Adolescents Number of adolescents counselled on management of menstrual hygiene ,health and Nutrition, TT Immunisation. Other beneficiaries Number of other beneficiaries given couselling by ANM during the reporting month.	Number of PW counselled on birth planning, institutional delivery, ANC, PNC against those mentioned in the due list.  Number of parents/guardians of 0-5 year children counselled for breast feeding, early breast feeding, complimentary feeding, complete Immunization, etc.  Eligible Couples counselled on use of contraceptives and on compensation for loss of wages resulting from sterilization.  Adolescents counselled on management of menstrual hygiene ,health and Nutrition, TT Immunisation.	VHND Tally Sheet
G4	Number of beneficiaries rendered by AWW on VHND	Yes	No	No	No	Children weighted Number of children weighed by AWW on VHND during the reporting month.  Weight updated in Growth chart Number of children weighed on VHND for whom growth chart was plotted during the reporting month.  THR distributed to children Number of children to whom THR (Take Home Ration) distributed during the reporting month.  THR distributed to PW Number of pregnant women to whom THR distributed during the reporting month.	All children 0-5 years should be weighed every month as per the guideline. Growth chart is plotted for children weighed on VHND. All 7 months to 3 years old children to be distributed THR. All pregnant women and lactating monthers to be distributed THR.	VHND Tally sheet
G5	Low weight children referred to higher facility for blood & stool test	Yes	No	No	No	Number of low weight children referred to higher facility for blood & stool test by AWW during the reporting month.	Number of low weight children referred to higher facility for blood & stool test by AWW during VHND will be reported here.	VHND Tally sheet
G6	SAM / severely underweight children referred to facility for treatment	Yes	No	No	No	Number of SAM/severely underweight children referred to higher facility for treatment by AWW during the reporting month.	Number of SAM/severely underweight children referred to higher facility for treatment by AWW during VHND will be reported here.	VHND Tally Sheet