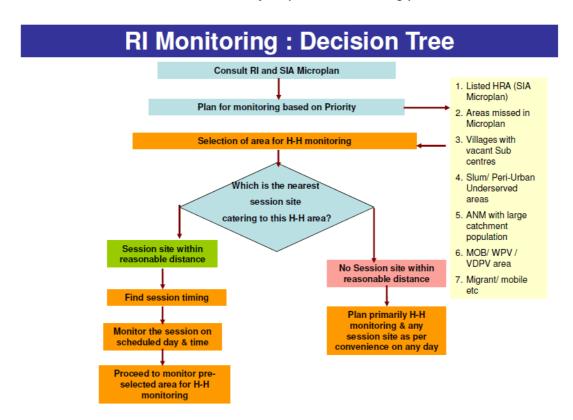
# Routine Immunization- Monitoring RI sessions: SOP for monitors

The monitor should reach the session site directly as per the monitoring plan.



### **Monitoring process:**

Monitoring should be supportive with the intention to build the capacity of the health worker.

Under designation field please write the designation of the monitor as capitalized initials (eg. SMO, BMO, IFV, FM etc). For outsourced field monitors (FM) or social mobilization coordinators (SMC), the organization should be mentioned as IPE or Others as applicable.

## If the session is not being held then

- 1. Proceed for house to house monitoring.
- 2. Ascertain the reason by visiting PHC and fill format question 1, 21 & 22.

### If the session is held

- ✓ Observe the ongoing session (e.g. who is mobilizing the children, how HW is vaccinating each child, messages provided by HWs etc).
- ✓ Interview the health workers for additional information. (e.g. supervisor visit made, MCV2 dose, MCTS register, ASHA incentive etc.)
- ✓ Interview any three caregivers to know who has mobilized them.

### Instructions for filling up the format

**Encircle** your answer wherever required.

Use CAPITAL letters only, for writing other particulars.

Q.2. **Due list:** Check to see whether the list of beneficiaries for today's session is available with the ANM. If due list is available, try to ascertain whether it's updated by looking for date of preparation,

tallying with entry of the new-born etc. Fill in accordingly. Even if the due list is not in a printed proforma or not generated through MCTS, but updated with due beneficiaries, it may be taken as "updated".

- Q. 3. **Is any mobilizer assigned**: Encircle the designation of *all* mobilizers assigned for the session.
- Q.4. **If due list available, is it with the mobiliser:** If due list is available with the mobilizer then encircle "Yes" else "No". If you are not able to meet the mobilizer since she may have gone to the field for mobilization then encircle "Not observed". If no mobilizer is assigned, the response should be "Not Applicable".
- Q. 5. **Mobilizer mobilizing:** Confirm whether the mobilizer is actually bringing children from houses or not. If he/she is bringing the children then write "Yes" else "No". If no mobilizer is assigned for this site then encircle "Not applicable".
- Q. 7. **Who delivered vaccine**: Determine how the vaccine was delivered to the session site. "Teeka Express" should not be regarded as AVD.
- Q.8 **Vaccine/diluents availability:** Encircle "No" for non-available vaccines/ diluents. Vaccines that are available in less than quantity required for due beneficiaries should be encircleed as "Inadequate". Non-JE endemic districts should encircle "NA" for JE/JE diluent. Non-pentavalent districts should encircle "NA" for Pentavalent.

For liquid vaccines, that are eligible for "open vial policy", please observe whether any open vial has been supplied from the cold chain point and record accordingly.

Q.9. **Logistics availability**: Encircle the logistics available at the session sites. This should be calculated as per estimated number of beneficiaries. Logistics that are available in less than quantity required for due beneficiaries should be encircleed as "Inadequate". If a particular logistic is not available, encircle "No". For "Red & Black" bags, if the colors are different eg. Yellow & blue, but two separate colored bags are consistently used to segregate waste as per given protocol, then accept them as adequate.

# Q.10 ANM cutting hub after use:

If ANM is cutting each syringe with hub cutter just after use then encircle "Yes".

If ANM is not cutting OR cutting hub after vaccinating multiple beneficiaries then encircle "No".

If you are not able to observe a single injectable vaccination then encircle "Not observed". Also, encircle the main reason why hub was not cut by health worker.

- Q.11. **Is ANM marking ALL vials with date/time before first use?**: Check the vials to confirm if date/time are being recorded on each vial.
- Q.12. **Using reconstituted vials:** Check whether BCG and Measles vials are being used beyond the recommended time limit of 4 hours and JE vials after 2 hours of reconstitution. If yes, specify the type of vaccine in the format

## Q.13. ANM delivering key messages:

If all the four messages are given for every beneficiary then encircle "Yes".

If any message is missed, then encircle "No".

If you are not able to observe any beneficiary being vaccinated then encircle "Not observed".

- Q.14. Wait for 30 minutes: Observe if ANM is advising caregivers to wait for 30 minutes after vaccination.
- Q.15 **Mobilization to this session site:** Elicit information by interviewing three care-givers (Parents / Grand parents / elder siblings who accompany the child) of beneficiaries about mobilizer who has mobilized him/her to <a href="mailto:this">this</a> session site. <a href="mailto:this">If more than one mobilizer has informed the care-giver, encircle all of them</a>.

- Q. 16. **Age of 2<sup>nd</sup> Measles dose**: Ask the ANM- as per National Immunization Schedule, which is the minimum age-range when she can administer 2<sup>nd</sup> Measles dose. For example, if she says 18 months, encircle 16-24 months.
- Q. 18. **Supervisor visit**: Interview ANM to ascertain if any supervisor has visited the session site **today** and check signature of the supervisor on any of the registers/ records/session site tally sheets.
- Q. 19. **Session incentive:** Ask whether ASHA has received the incentives for last session she mobilized for.
- Q. 20. **ASHA incentives**: Please enquire whether ASHA has received incentives for <u>all</u> "fully immunized" and "completely immunized" children for current fiscal year as per G.O T.12011/01/2012-CC&V dated 25<sup>th</sup> May, 2012:

ASHA incentive for full immunization per child ( upto 1 year age )	Rs 100 per child for full immunization in 1st year of age
ASHA incentive for full immunization per child upto 2 years age (all vaccination recived between 1st and 2nd year age after completing full immunization at 1 year age)	Rs 50 per child for ensuring complete immunization upto 2nd year of age of Child

Q. 21 & 22. **Reasons for sessions not held**: Please ascertain the reasons for absentee vaccinator and non-availability of vaccine/ logistics from the planning unit.

Questions on- 'Reason for monitoring', Q 3, 8, 9, 12 and 15 are multiple response questions.