



GOVERNMENT OF ODISHA  
HEALTH & FAMILY WELFARE DEPARTMENT

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ORDER

No. 16759 /H

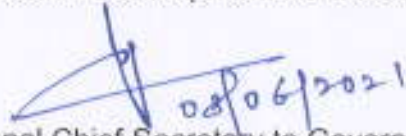
Dated, 08-6-2021

**HFW-SCH-I-EMER-0001-2020**

With reference to the H & FW Department Letter No.15158/H dated, 19.05.2021, the Statewide three months house to house survey by ASHAs & AWWs for monitoring of Covid symptoms and co-morbid conditions is being held from 24<sup>th</sup> May, 2021 to 23<sup>rd</sup> August, 2021.

In order to provide handholding support to districts & cities for successful planning and effective implementation and monitoring of the activities, 30 State Level Monitoring Teams (SLMTs) have been designated to visit the assigned district / cities at least twice during the campaign period and will submit the report within 7 days of their visit to the DPH, Odisha with a copy to Mission Director, NHM, Odisha. The list of State Monitors is attached at **Annexure-A**. The reporting format for State Level Monitoring Teams is attached at **Annexure-B**.

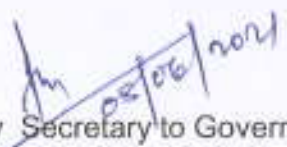
TA, DA, accommodation and mobility cost will be met out of allocation made under Programme Management Cost of respective Scheme of the Monitors. However, TA, DA, accommodation and mobility cost of representatives of Development Partners will be borne by respective Development Partners.

  
Additional Chief Secretary to Government

Memo No. 16760 /H

Dated, 08-6-2021

Copy forwarded to MD, NHM, Odisha / all Directors under control of H&FW Department for information and necessary action.

  
Deputy Secretary to Government.

Memo No. 16761 /H

Dated, 08-6-2021

Copy forwarded to All CDM&PHO-cum-District Mission Directors for information and necessary action.

  
Deputy Secretary to Government.

Memo No. 16762 /H

Dated, 08-6-2021

Copy forwarded to State Monitors for information and necessary action.

Deputy Secretary to Government.

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08/06/2021

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## State Level Monitors for Integrated Campaign - 2021

| Sl. No. | Name of the Districts | State Monitors   |
|---------|-----------------------|--|
|         | Angul                 | Dr. Prativa Pradhan, AD, CH<br>Mrs. Soumyashree Mohapatra, Cons. Maternal Health                     |
|         | Balasore              | Dr. Nirod Ku. Sahu, AD. Tech<br>Mr. Rafiq, Consultant, GKS   |
|         | Bolangir              | Dr. Suvendu Nayak, JD, SDMU<br>Mr. Narayan Behera, SPM, NIPI   |
|         | Bargarh               | Dr. Subhrajit Rao, SHAS<br>Mr. Basant Ku. Sahoo, Cons. CP  |
|         | Bhadrak               | Dr. Jyoshna Pattnaik, Consultant-NCD<br>Mrs. Anuja Behera, Consultant, NGO Affairs                   |
|         | Boudh                 | Dr. Ramakrushna Satpathy, SHAS<br>Mr. Hrudananda Rout, Cons. Training                                |
|         | Cuttack               | Dr. Sandipana Pati, JD, Training, SIHFW<br>Ms. Bibudha Bijaylaxmi, Consultant, Pre Service & Nursing |
|         | Dhenkanal             | Dr. Prameela Baral, AD, Mental Health<br>Mrs. Mithun Karmakar, Cons. M&E                             |
|         | Deogarh               | Dr. Rudra Prasad Das, UNICEF<br>Mr. Nihar Ranjan Swain, Consultant, RBSK                             |
|         | Gajapati              | Dr. Pradeep Ku. Padhi, AD, SIHFW<br>Mr. Hiralal Nayak, SPO-CH, NIPI                                  |
|         | Ganjam                | Dr. Sushant Swain, AD, NCD<br>Mr. Sukant Mishra, Prog. Manager, UH                                   |
|         | Jagatsinghpur         | Dr. Dinabandhu Sahoo, TL<br>Dr. Manoranjan Mohapatra, Cons. QA&QI                                    |
|         | Jajpur                | Dr. Puspanjali Mishra, JD. SIHFW<br>Mrs. Pujafula Pattnaik, IEC Consultant                           |
|         | Jharsuguda            | Dr. Jibana Ballav Sarangi, AD, Ophthalmology<br>Mr. Gyana Pradhan, Consultant, RKSK                  |

| Sl. No. | Name of the Districts | State Monitors   |
|---------|-----------------------|--|
|         | Kendrapara            | Dr. Bijay Kumar Swain, Cons. QA&QI (Tech.)<br>Mr. Santosh Ku. Nayak, Consultant, PPP |
|         | Kalahandi             | Dr. Murali Padhy, AD. MH<br>Dr. Ashok Ku. Samal, Training Cons. SIHFW                |
|         | Kandhamal             | Dr. R.R. Sathpathy, AD, NCD<br>Mr. Pranaya Ku. Mohapatra, Sr. Cons-PHP               |
|         | Keonjhar              | Dr. Basant Pradhan, JD, Leprosy<br>Mr. Saroj Ku. Panigrahi, Cons. RMNCH+A            |
|         | Khordha               | Dr. Subhashis Mohanty, JD, NVBDCP<br>Mrs. Anindita Pattnaik, Cons. CH                |
|         | Koraput               | Dr. Aditya Mohapatra, Consultant, Pediatric<br>Mr. Deepak Ku. Biswal, SIO, NIPI      |
|         | Malkangiri            | Dr. Sripati Das Mohapatra, SPO-MH, NIPI<br>Mr. Mrutyunjay Rath, Consultant, Training |
|         | Mayurbhanj            | Dr. K.K. Das, AD, BMW<br>Mr. Chandanesh Mishra, Cons. Adolescent Health              |
|         | Nabarangpur           | Dr. Arun Ku Mohapatra, SHAS<br>Mr. Prasant Ku. Das, Consultant, School Health        |
|         | Nayagarh              | Dr. Anjana Panda, AD, OSACS<br>Mrs. Prangya Choudhury, UNICEF                        |
|         | Nuapada               | Dr. Paresh Mishra, AD, MAR<br>Mr. Lalit Mohan Sahoo, Cons-NCD                        |
|         | Puri                  | Dr. Srutijit Pattnaik, JD, Nutrition<br>Mr. Sushant Nayak, Sr. Cons- CP              |
|         | Rayagada              | Dr. Sangram Keshri Das, Consultant, NLEP<br>Mr. Chakradhar Sahu, UNICEF              |
|         | Sambalpur             | Dr. Sambit Behera, SHAS<br>Mr. Hrushikesh Sahu, CCPM                                 |
|         | Sonepur               | Dr. P.K. Hota, AD, TB<br>Dr. Biswajit Modak, Sr. Cons. Training                      |
|         | Sundargarh            | Dr. Ashutosh Padhi, Consultant, UNICEF<br>Mr. Pratap Ku. Das, Cons. TH               |

**Monitoring Format**

(State wide three months house to house survey by ASHAs & AWWs with the support of GKS for monitoring of Covid symptoms and co-morbid conditions from 24<sup>th</sup> May, 2021 to 23<sup>rd</sup> August, 2021)

**Name & Designation of the Monitors:**

**Date of Visit:**

**Name of the District visited:**

**Name of the Village / Slum – Block / Ward:**

| Sl. No | Particulars / Activity   | Observations |
|--------|--|--------------|
| 1      | Population of the Village / Slum   |              |
| 2      | Total No. of House Holds in said Village / Slum  |              |
| 3      | Total House Hold covered till date   |              |
| 4      | Was the ASHA & AWW team doing House to House Survey on the day of visit of Monitor-Y/N if No reason/s  |              |
| 5      | Did the team have all drugs and logistics required for H to H survey <ul style="list-style-type: none"> <li>• Temp recording device (Infrared Thermometer)</li> <li>• Sputum Container</li> <li>• CBAC Form</li> <li>• ASHA Brochure</li> <li>• ASHA Dairy</li> <li>• ORS</li> <li>• Zinc</li> <li>• Any other, mention</li> </ul>   |              |
| 6      | Did the team has essential knowledge on scope & objective of the said survey and skilled to perform that (Ask relevant questions and observe interventions by the team for min one house hold to assess the knowledge level & mark your impression <ul style="list-style-type: none"> <li>• Knowledge Base- Good / Need Improvement</li> <li>• Skill Set- Good / Need Improvement</li> </ul> |              |
| 7      | Are the team doing all necessary assessment during home visits (put Y/N at appropriate place) <ul style="list-style-type: none"> <li>• Fever surveillance-Y/N</li> <li>• Screening for Common cancer-Y/N</li> <li>• TB screening-Y/N</li> <li>• Leprosy screening-Y/N</li> </ul>   |              |

|    |   |  |
|----|---|--|
|    | Observe the same at least one house hold & report   |  |
| 8  | Did she (ASHA) recorded/ line listed details of positive cases in proper format & updated regularly in her Dairy.   |  |
| 9  | Did the team attended houses of positive cases more frequently –Y/N If Yes, average no of visits per positive case (Assess the same by visiting at least 2 households with positive cases)  |  |
| 10 | <p>Do the RRT team attended positive cases &amp; provide adequate medication &amp; followed up regularly. Find out the answer of following questions:-</p> <ul style="list-style-type: none"> <li>• No of active positive cases at Village/Slum –</li> <li>• No of active positive cases attended by RRT team (collect information from survey team) -</li> <li>• Do the positive cases (recovered / active) satisfied on the work of RRT (Discuss with 2 recovered cases those have been attended by RRT &amp; mention your impression-<b>Fully Satisfied / Somewhat Satisfied / Not satisfied</b>)</li> </ul> |  |
| 11 | Did the patients with Hypertension/ Diabetes/ Tb / leprosy have adequate medicines for at least next 15 days (Visit randomly at least 2 households with patients & assess the situation).   |  |
| 12 | Did the household with U5 children given adequate no of ORS Pkt (1 pkt per house hold + 1 additional Pkt per U5 child)as per guidelines –Y/N if <b>No why.</b>  |  |
| 13 | Do the villagers practice COVID appropriate behavior (Using Mask, Social distancing etc.) at village level. ( <b>Yes all / Not at all / Partially- in % tentatively</b> )   |  |
| 14 | What is the impression of positive cases on treatment at referral centres (Discuss with 2 recovered cases those have admitted & put your impression- Mention name and mobile no of patients, referral COVID Hospital/CCH/CCC & then mention your impression against individual respondents: Fully Satisfied/Somewhat satisfied / Not satisfied )  |  |
| 15 | <p>Does AHSA &amp; GKS received one time Assistance and Untied fund respectively</p> <ul style="list-style-type: none"> <li>• One time Assistance to ASHA- Y/N</li> <li>• Additional Untied fund to GKS- Y/N</li> </ul>   |  |

|    |  |  |
|----|--|--|
| 16 | <p>Does the GKS active on managing the COVID situation at village level (Assess and provide your impression out of 5)</p> <ul style="list-style-type: none"> <li>• Have Plan to spend untied fund -2 mark</li> <li>• Executed plan: Taken all activities as per plan &amp; as per timeline -3/ Partially -1/ No-0</li> </ul> |  |
| 17 | <p>Does ASHA utilized one time assistance (Y/N). If yes, how much spent till date and for what.</p>  |  |
| 18 | <p>Any other Observations</p>  |  |

**Note:** Monitoring Team to attend 1 ASHA, minimum 2 Recovered cases, minimum 2 family members with Active case (COVID 19), minimum 2 Patients with diabetes / hypertension / TB / Leprosy, minimum 2 Households with U5 children-2 & GKS representative (Ex-Officio) in the visited village. In case of slum such of persons shall be covered for every 5000 slum population observing due COVID protocols.

|  |  | Signature of Team Members |
|--|--|---------------------------|
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### Compiled Monitoring Report

Name & Designation of the Monitors:

Period of Visit:

Name of the District visited:

Number of Village / Slum visited:

| Sl. No | Particulars  | Response | Remarks |
|--------|--|----------|---------|
|        | <b>Number of Survey Team have all Logistics required for H &amp; H Survey</b> <ul style="list-style-type: none"><li>• Total Team Attended</li><li>• Total Team having all required logistics in%</li><li>• If no, mention why in remarks column</li></ul>  |          |         |
|        | <b>Knowledge Base of survey team</b> <ul style="list-style-type: none"><li>• Total Team Attended</li><li>• No. of Teams having required knowledge base</li><li>• No. of Teams need improvement</li></ul>   |          |         |
|        | <b>Skill set of survey team</b> <ul style="list-style-type: none"><li>• Total Team Attended</li><li>• No. of Teams having required skill set</li><li>• No. of Teams need improvement</li></ul>   |          |         |
|        | <b>Areas of Assessment during survey</b> <ul style="list-style-type: none"><li>• Total Team Attended</li><li>• No. of Teams conducted fever surveillance</li><li>• No. of Teams conducted common cancer screening</li><li>• No. of Teams conducted TB screening</li><li>• No. of Teams conducted Leprosy screening</li></ul> |          |         |
|        | <b>Line listing of positive cases</b> <ul style="list-style-type: none"><li>• No. of ASHAs attended</li><li>• No. of ASHAs line listed details of positive cases in the diary</li></ul>  |          |         |



| Sl. No | Particulars  | Response | Remarks |
|--------|--|----------|---------|
|        | <p><b>Positive cases followed up by ASHA</b></p> <ul style="list-style-type: none"> <li>• Total no. of Households of recovered positive cases attended by monitor</li> <li>• Average no. of times ASHA visited the positive cases</li> </ul>   |          |         |
|        | <p><b>Performance of RRT Team</b></p> <ul style="list-style-type: none"> <li>• Total active positive case in the visited village / slum –</li> <li>• No. of them visited by RRT –</li> <li>• No. of positive cases attended by monitoring team are –</li> <li>◦ Fully Satisfied with RRT-</li> <li>◦ Somewhat Satisfied with RRT-</li> <li>◦ Not satisfied with RRT-</li> </ul>                          |          |         |
|        | <p><b>Availability of medicine with NCD, TB &amp; Leprosy cases</b></p> <ul style="list-style-type: none"> <li>• No. of above cases attended by monitoring team -</li> <li>• No. of them have adequate medicines -</li> </ul>  |          |         |
|        | <p><b>Distribution status of ORS packets</b></p> <ul style="list-style-type: none"> <li>• No. of households with under 5 children visited by monitoring team</li> <li>• No. of them have given ORS packet as per norm</li> </ul>   |          |         |
|        | <p><b>Practice of COVID appropriate behavior in visited village / slum level</b></p> <ul style="list-style-type: none"> <li>• No. of village / slum visited - <ul style="list-style-type: none"> <li>◦ Yes all practicing COVID appropriate behavior -</li> <li>◦ Not at all practicing COVID appropriate behavior -</li> <li>◦ Partially practicing COVID appropriate behavior -</li> </ul> </li> </ul> |          |         |

| Sl. No | Particulars  | Response | Remarks |
|--------|--|----------|---------|
|        | <p><b>Impression of COVID positive recovered cases on treatment at referral centers</b></p> <ul style="list-style-type: none"> <li>• No. of COVID positive recovered cases attended by monitors</li> <li>• How many of them are fully satisfied with services at treatment centers –</li> <li>• How many of them are somewhat satisfied with services at treatment centers –</li> <li>• How many of them are not satisfied with services at treatment centers –</li> </ul> |          |         |
|        | <p><b>Funds Received status by ASHA &amp; GKS</b></p> <ul style="list-style-type: none"> <li>• No. of ASHAs attended by monitors –</li> <li>• No. of them received one time assistance –</li> <li>• No. of GKS attended by monitors –</li> <li>• No. of GKS received untied fund -</li> </ul>  |          |         |
|        | <p><b>Performance of GKS on management of COVID situation :</b></p> <ul style="list-style-type: none"> <li>• No. of GKS attended by monitors –</li> <li>• No. of GKS having work plan for spending untied fund –</li> <li>• No. of GKS started spending untied fund for planned activities -</li> </ul>  |          |         |
|        | <p><b>Utilization of one time assistance by ASHAs</b></p> <ul style="list-style-type: none"> <li>• No. of ASHAs attended by monitors –</li> <li>• No. of ASHAs started spending one time assistance –</li> <li>• Types of articles purchased -</li> </ul>  |          |         |
|        | <p>Mention any other major observations districts should be informed</p>   |          |         |

Signature of Team Members