

REPUBLIC OF KENYA – MINISTRY OF HEALTH



MINISTRY OF HEALTH



Community
Health Services
"Afya Yetu, Jukumu Letu"

SERVICE DELIVERY LOG BOOK MOH514

NAME OF CHU:		COUNTY:	
MCHUL CODE:		SUB COUNTY:	
LINK FACILITY:		DIVISION:	
NAME OF CHV:		LOCATION:	
NUMBER OF HH:		SUB LOCATION:	
START DATE:		END DATE:	

INSTRUCTIONS ABOUT THE USE OF THE TOOL

DESCRIPTION

- ✓The Service Delivery Log Book is **a diary** that is used to collect information from the household during the period of offering a health service, health messages or defaulter traced.
- ✓The Service Delivery Log Book gives the numerator for measuring the effort of the CHV.

What type of information is collected?

- ✓The basic information collected is factual data based on what was done or identified in the community, among households and/or individual (s) served. The Service Delivery Log Book measures the actual CHV's effort and should be written or filled during the household visitation.

Who should fill?

- ✓CHVs

When and to whom it should be submitted?

- ✓The Service Delivery Log Book should be submitted to the CHEW for summarization by 2nd of the following month.

COLUMN TITLE		DATA DEFINITIONS / EXPLANATIONS
Basic Information		
A	Date	The date when the household member receives a service from a Community Health Volunteer. It is recorded as DD/MM/YY, for example, 31/07/14
B	Village Name	The name of the village where the household is located
C	Household number	This is a unique identification number, which is assigned to a household during registration
D	Name of household member	Record the individual names that identify a household member - Record at least THREE names FOR EXAMPLE James Karani Bosire.
Mother Information		
E	Pregnant	Record by Indicating with a tick (✓) when a household female member is pregnant or (X) if the household female member is not pregnant. The CHV should observe or ask the woman in the household. Record N/A if the member is not a woman of reproductive age (15-49 years)
F	Pregnant woman counselled on Individual Birth Plan (IBP)	Record by Indicating with a tick (✓) when the pregnant woman has been counselled on Individual Birth Plan (IBP) or (X) if not. Record N/A if the member is not a pregnant woman
G	Woman delivered by unskilled attendant	Record by marking with a tick (✓) if delivery since the last visit was by an unskilled attendant. Note – traditional birth attendants (TBA) are considered unskilled. Record N/A if the member is not a woman who delivered since last visit
H	Woman delivered by skilled attendant	Record by marking with a tick (✓) if delivery since the last visit was by skilled attendant. Note – traditional birth attendants (TBA) are considered not skilled attendants. Record N/A if the member is not a woman who delivered since last visit
I	New-born visited at home within 48 hours of delivery	Record by Indicating with a tick (✓) if New-born (0-28 days) was visited at home within 48 hours of delivery or (X) if not. Record N/A if the member is not a new-born
J	Mother with new-born counselled on Exclusive Breast Feeding (EBF)	Record by Indicating with a tick (✓) if a mother with new-born (0-28 days) is counselled on Exclusive Breast Feeding (EBF) or (X) if not. Record N/A if the household member is not a mother of a new-born
K	Woman 15-49yrs provided with Family Planning commodities by CHVs	Record by Indicating with a tick (✓) if a Woman 15-49 years is provided with Family Planning commodities by CHVs or (X) if a woman of 15-49 years was not provided. Record N/A if the member is not a woman of reproductive age (15-49 years)
Child Information		
L	Child 0-59 months participating in growth monitoring	Record by Indicating with a tick (✓) if a child 0-59 months is participating in growth monitoring or (X) if not. Record N/A if the household member is not a child of 0-59 months
M	Child 6-59 months with MUAC (Red) indicating severe malnutrition	Record by Indicating with a tick (✓) if a child 6-59 months has MUAC (Red) indicating severe malnutrition or (X) if not. Record N/A if the household member is not a child of 6-59 months
N	Child 6-59 months with MUAC (Yellow) indicating moderate malnutrition	Record by Indicating with a tick (✓) if a child 6-59 months has MUAC (Yellow) indicating moderate malnutrition or (X) if not. Record N/A if the household member is not a child of 6-59 months
O	Child 12-59 months dewormed	Record by marking a tick (✓) when the child 12-59 months in the household was dewormed in the last 6 months or (X) if the child was not. Record N/A if the household member is not a child of 12-59 months
Referrals Information		
P	Pregnant woman referred for ANC	Record by marking a tick (✓) when the pregnant woman is referred for ANC or (X) if not. Record N/A if the household member is not a pregnant woman
Q	Pregnant women referred for skilled delivery	Record by marking a tick (✓) when the pregnant woman is referred for skilled delivery or (X) if not. Record N/A if the household member is not a pregnant woman
R	Woman referred for family planning services	Record by marking a tick (✓) when the woman of 15-49 years is referred for family planning services or (X) if not. Record N/A if the household member is not a woman of 15-49 years
R	Home delivery referred for Post Natal Care (PNC) Services	Record by marking a tick (✓) if a home delivery is referred for Post Natal Care (PNC) Services or (X) if not. Record N/A if the household member is not a mother who delivered at home
S	Child 0-11 months referred for immunization	Record by marking a tick (✓) if a child 0-11 months is referred for immunization services or (X) if not. Record N/A if the household member is not a child of 0-11 months
T	Child 6-59 months referred for Vitamin A supplementation	Record by marking a tick (✓) if a child between 6-59 months of age is referred for Vitamin A supplementation or (X) if not. Record N/A if the household member is not a child of 6-59 months
U	Cough more than 2 weeks referred	Record by marking a tick (✓) if a chronic cough for two or more weeks is referred to a health facility or (X) if not. Record N/A when the household member has not had chronic cough or had had it for less than 2 weeks
V	Referred for HIV Counselling and Testing (HCT)	Record by marking a tick (✓) if the household member is referred for HIV Counselling and Testing (HCT) or (X) if not. Record N/A for a small child

COLUMN		TITLE	DATA DEFINITIONS / EXPLANATIONS
W	Elderly (60 +) referred for routine health check-ups	Record by marking a tick (✓) if elderly (60 years and above) is referred to a health facility for routine check-ups or (X) if not. Record N/A if the member is not elderly with 60 or more years	
X	Known cases of chronic illness referred a=Diabetes, b=Cancer, c=Mental Illness, d=Hypertension, e=Others (specify in remarks), f=None	Indicate one or more numbers for a type of chronic illness with a corresponding tally of known cases of individuals referred to a health facility with that with illness: a=Diabetes, b=Cancer, c=Mental Illness, d=Hypertension, e=Other, f=None. For example, e.g. d-2 for two people suffering from hypertension in the household. It is a chronic illness if someone has been unwell for 1 year or more without healing	
Defaulters Information			
Z	ANC defaulter referred	Record by marking a tick (✓) if an ANC defaulter is referred to a health facility or (X) if not. Record N/A if the member is not an ANC defaulter	
AA	Immunization defaulter referred	Record by marking a tick (✓) if a child 0-59 months of age who defaulted on immunization has been referred for immunization or (X) if not. Record N/A if the member is not a child of 0-59 months or is a child of 0-59 months but did not default on immunization	
AB	TB treatment defaulter traced and referred	Record by marking a tick (✓) if a Tuberculosis (TB) defaulter is referred to a health facility or (X) if not. Record N/A if the member has not had TB or has had TB but did not default	
AC	ART defaulter traced and referred	Record by marking a tick (✓) if an ART defaulter is traced and referred to a health facility or (X) if not. Record N/A if the member has not been on ART or has been on ART but has not defaulted	
AD	HIV exposed infant (HEI) defaulters traced and referred	Record by marking a tick (✓) if an HIV exposed infant (HEI) defaulter is traced and referred to a health facility or (X) if not. Record N/A if the member is not an HIV exposed infant (HEI) defaulter	
Death Information			
AE	Number of deaths in the month	a: 0-28 days - Record all deaths between zero to 28 days of age which occurred in the month	
		b: 29 days-11 months - Record all deaths between 29 days to 11 months of age which occurred in the month	
		c: 12-59 months - Record all deaths between 12-59 months of age which occurred in the month	
		d: Maternal - Record all deaths of women during pregnancy or child birth or within 42 days after delivery which occurred in the month	
		e: Other deaths - Record all deaths in the household and not counted above which occurred in the month	
Others			
AF	Remarks/other services provided	Write any remark which you think is important for follow-up or any other services provided not recorded among the indicators in the columns provided e.g. jigger management	
Household Information			
AG*	Date of Data Collection (repeated from last page)	The date when the household member receives a service from a Community Health Volunteer, recorded as DD/MM/YY. For example, 31/07/14	
AH*	Village Name (repeated from last page)	The name of the village where the household is located	
AI*	Household Number	This is a unique identification number, which is assigned to a household during registration	
AJ	Household has a functional latrine in use	Observe and record with a tick (✓) if the household has a functional latrine in use or (X) if the household does not have a functional latrine in use. This also includes all types of toilets and whether they are functional or not	
AK	Household with hand washing facilities	Observe and record with a tick (✓) if the household has hand washing facilities (e.g. hand wash basin, tippy tap, leaky tin) or (X) if the household does not have hand washing facilities	
AL	Household using treated water	Ask and record with a tick (✓) if the household is always using treated water for drinking or (X) if the household is not always using treated water for drinking	

HOUSEHOLD LEVEL INDICATORS					
Date of Data Collection	Village Name	Household Number	Household has a functional latrine in use (✓/X)	Household with hand washing facilities (✓/X)	Household using treated water (✓/X)
AG*	AH*	AI*	AJ	AK	AL

AG*, AH*, AI* contain data similar to A, B and C respectively.

Service Delivery Log Book

MOH514

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HOUSEHOLD LEVEL INDICATORS					
Date of Data Collection	Village Name	Household Number	Household has a functional latrine in use (✓/X)	Household with hand washing facilities (✓/X)	Household using treated water (✓/X)
AG*	AH*	AI*	AJ	AK	AL

AG*, AH*, AI* contain data similar to A, B and C respectively.