# **District Tour Report**

***For one district only***

***(To be submitted at PPIU, DPIU and DGHS Sindh)***

**INSTRUCTIONS**:

1. *For FPOs: The Tour report of the last month should be submitted to the PPIU during the monthly review. However, in case immediate action is required, the intimation should be done on an urgent basis by telephone etc.*
2. *The other Supervising Officers should submit the original report to their headquarters and copies to be submitted to the other relevant offices within one week of visit.*

**Part A**

**Section 1: Identification**

Name of reporting Officer: Designation:

District: Province: Reporting month:

Total days in Office (DPIU): Total days in Field:

Total Health Facilities visited: Total LHSs visited:

Total Health Houses Visited:

# **Section 2: Follow up of the previous visit**

**(Should be filled from section 3 part B of the previous visit’s tour report)**

|  |  |  |  |
| --- | --- | --- | --- |
| Critical issues identified  (not more than three) | Resolved  (Y/N) | Reasons if not resolved | Suggestions for intervention & mention level applicable |
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|  |  |  |  |
|  |  |  |  |

# **Part B: OBSERVATIONS OF THE CURRENT VISIT**

***Section 1:***

***(a) Status of LHW`s***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Program | Allocated | Recruited | Dropouts | Terminated | Presently working | Training Status | | | Remarks |
| (after 3 months Training) | Under 3 months | Under 12 months | Completed |  |
| NP |  |  |  |  |  |  |  |  |  |

***(b) Lady Health Supervisors***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Program | Required | Recruited | Dropouts | Terminated | Presently working | Training Status (Phase) | | | Remarks |
| (after 3 months Training) | Under 3 months | Under 9 months | Completed |  |
| NP |  |  |  |  |  |  |  |  |  |

***(c) Drivers***

|  |  |  |
| --- | --- | --- |
| Required | Working | Remarks |
|  |  |  |

***(d) Vehicles***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Levels | No. Received | No. Available | No. Functional | Remarks |
| DPIU |  |  |  |  |
| Supervisors |  |  |  |  |

***(e) Output/outcome indicators***

|  |  |  |
| --- | --- | --- |
| **Indicator** | **Source** | **Value** |
| Contraceptives Prevalence Rate | MIS Chart |  |
| Total number of deliveries | DMR |  |
| Total number of deliveries by SBA | DMR |  |
| Total number of pregnant women seen at the facility that month (check for double counting) | MIS Chart |  |
| Number of pregnant women who received TT | MIS Chart |  |
| Number of pregnant women given iron tablets | DMR |  |
| Number of post natal visits made | DMR |  |
| Number of post natal cases visited 24 hours after deliveries. | DMR |  |
| EPI Coverage (fully immunized) | MIS Charts/Jaiza Karkardagi JK |  |
| Number of of ARI cases under 5 seen per LHW/month | DMR |  |
| Number of diarrhea cases under 5 seen per LHW/month | DMR |  |
| Average District Performance (score) | LHS Performance Report/JK |  |

***(f) Major strengths of the Program found in the present visit:***

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***Section 2: Issues Identified***

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| --- | --- | --- | --- |
| Issues identified in the present visit  (not more than seven ) | Level  applicable | Action taken by  Supervisor | Action required at  DPIU/PPIU  (if required) |
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***Section 3: Critical Issues to be followed on next visit (pick three most important from the issues identified in section2)***

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|  |
|  |

Dated: Signature:

Copy to:

DPIU District:

PPIU Province:

**User Guide for**

**District Tour Report**

**Part A**

**Section I: Identification**

The reporting officer will mention his full name and designation along with district, province, reporting month, total days in office District Program Implementation Unit (DPIU), total days in field, total Health Facilities visited, No. of total Health Houses visited and total health supervisors visited.

**Section II: Follow up of the Previous Visit**

Critical issues identified will be listed and will be seen whether these have been resolved or not. If not resolved, then give the reasons along with suggestions for intervention at the level applicable means it can be resolved at facility, district or provincial level and indicating the officials responsible to resolve the issue within timeframe specified.

**Part B: Observations of the Current Visit**

**Section 1 (Please fill all columns of each table)**

1. Status of LHWs *(In this table the supervisor will mention the information about National Program*

* Allocated means total number of seats of LHWs allocated for the district.
* Recruited means till date number of LHWs recruited including dropouts and terminated. Dropout means total number of LHWs dropped out of total recruited till date.
* Terminated means total number of LHWs terminated out of total recruited till date.
* In the column of presently working write total number of LHWs that are presently working. This also includes those who have completed training of three months. Those who are under training but have not completed training period of three months will not be counted.
* In the three sub-columns of training status in these columns mention the number of total LHWs, who are either under training (under 3 months, under 12 months) or have completed the training.
* In the column of Remarks the supervisor will be mentioning any relevant finding/observation about LHWs status.

(b) Lady Health Supervisors (Please refer to aforementioned instructions.)

(c) Drivers

Mention the number of drivers both that are required and working. In the Remarks column also highlight gaps and issues related to the drivers.

(d) Vehicles

Mention the number of vehicles received, available and functional related to District Coordinator LHW program and LHSs.

(e) Output/Outcome Indicators

All the indicators given in this table will be deduced from the sources mentioned.

(f) Major strengths of program

Enlist the major strong points found during the present visit. The points essentially shall highlight the LHWs doorstep services, referral, involvement in EPI, Polio and Measles campaign and also take into account the initiatives launched for community mobilization.

**Section 2: Issues Identified**

The reporting officer will enlist the issues identified during the present visit along with their levels applicable and actions taken by supervisors. He will also make recommendations for resolving the left over issues and their prevention in future. These must be communicated at appropriate levels and quarters.

**Section 3:** **Critical issues to be followed on next visit**

The reporting officer will prioritize three problems based on their implications of service delivery.

The reporting officer will sign it along with date and will send the copy to DPIU and PPIU.