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Block-Level Routine Immunization Microplanning Tool

**INSTRUCTION MANUAL FOR USING THE MICROPLANNING TOOL TO
DEVELOP A BLOCK-LEVEL MICROPLAN**

May 2014

The Maternal and Child Health Integrated Program (MCHIP) is the USAID Bureau for Global Health's flagship maternal, neonatal and child health (MNCH) program. MCHIP supports programming in maternal, newborn and child health, immunization, family planning, malaria, nutrition, and HIV/AIDS, and strongly encourages opportunities for integration. Cross-cutting technical areas include water, sanitation, hygiene, urban health and health systems strengthening.

This report was made possible by the generous support of the American people through the United States Agency for International Development (USAID), under the terms of the Leader with Associates Cooperative Agreement GHS-A-00-08-00002-00. The contents are the responsibility of the Maternal and Child Health Integrated Program (MCHIP) and do not necessarily reflect the views of USAID or the United States Government.

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Abbreviations

ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
AWW	Anganwadi Worker
BCG	Bacillus Calmette-Guerin
BHW	Basic Health Worker
CDPO	Child Development Project Officer
CHC	Community Health Center
CMO	Chief Medical Officer
DPT	Diphtheria, Pertussis, Tetanus
ICDS	Integrated Child Development Services
JE	Japanese Encephalitis
LHV	Lady Health Visitor
MCHIP	Maternal and Child Health Integrated Program
MPW	Multi- Purpose Worker
NGO	Non Government Organization
NRHM	National Rural Health Mission
OPV	Oral Polio Vaccine
PHC	Primary Health Center
RI	Routine Immunization
TBA	Traditional Birth Attendant
TT	Tetanus Toxoid

Acknowledgements

Microplaning tool has been developed by MCHIP to assist the block managers to prepare a comprehensive microplan at the block level. Usually the preparation of the microplan is time consuming and tedious process because of manual entries. This tool is user friendly and self generates most of the formats by incorporating bare essential information and saves time. 'Instruction manual' is prepared to guide the block level health functionaries to use microplanning tool to develop comprehensive block level microplan.

The MCHIP India immunization team would like to acknowledge the support and contributions of the Ministry of Health and Family Welfare, Government of India, State Governments of Jharkhand and Uttar Pradesh, USAID India Mission, MCHIP immunization team at headquarters, colleagues who have been part of the MCHIP immunization team, health officials and frontline workers who have been a part of this endeavor and development partners from CARE, WHO, UNICEF, NIPI and PATH.

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Introduction

MCHIP (the USAID-funded Maternal and Child Health Integrated Program) devised a Microsoft Excel-based microplanning tool designed to assist Block Managers develop a microplan for routine immunization (RI) activities. The tool incorporates all possible items that are necessary for comprehensive planning as well as National Rural Health Mission provisions and recent initiatives like Hepatitis B and Japanese Encephalitis vaccinations in selected states and districts.

The tool greatly facilitates local immunization planning by automatically: estimating target beneficiaries (pregnant women and infants) – annual and monthly.

- Identifying available human resource
- Estimating vaccine requirement and other logistics on monthly basis
- Developing a detailed ANM work plan
- Developing an immunization calendar, social mobilization plan and alternate vaccine delivery plan
- Day-wise vaccine and logistic distribution plan to assist cold chain handlers
- Preparing a supervisory plan.

Home Page



ROUTINE IMMUNIZATION MICROPLANNING TOOL

PLANNING TOOL FOR PHC/CHC/URBAN HEALTH POST

- ♪ *Describing Target Population and Coverage required*
- ♪ *Analysing the Barriers (Qualitative Problem Description)*
- ♪ *Prioritizing the areas for effective use of resources*
- ♪ *Preparing Routine Immunization Activity Plan including*
Assessment of Resource Availability, Logistic Planning, Vaccine
Management and Session / Outreach / Personal Workplans
- ♪ *Preparing Supervisory Plan, Social Mobilization and Vaccine Delivery Plan*



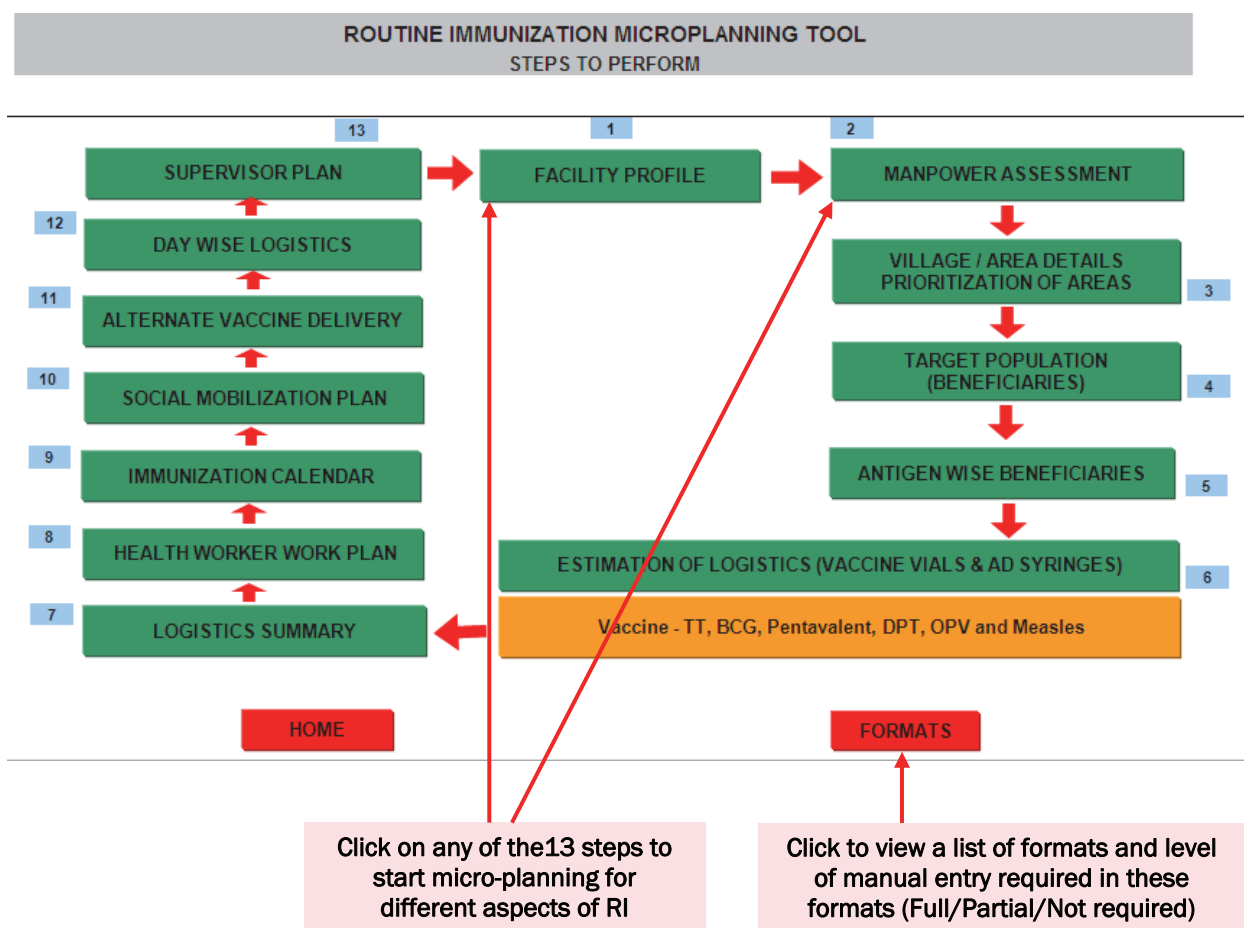
ENTER

Click to enter the tool and start micro planning

Background

Once you open the tool, first sheet is home page.
The home page introduces you to objectives and scope of the tool.

Index Page



Background

The next sheet after the home page is the menu, giving a list of steps to perform.

- This sheet provides a total of 13 steps, and access to view all the types of formats before you start developing a microplan.
- Click on the any particular step to initiate microplanning process.
- Click on “FORMATS” to view all the types of formats.
- If you are using this tool for first time, it is advisable to view all the formats so that you will have an idea of what all information is required to develop microplan

Formats for Immunization Microplanning

INDEX

START MICROPLANNING

FORMATS FOR ROUTINE IMMUNIZATION MICROPLANNING

		MANUAL ENTRY
1	PHC/CHC/Urban Health Post Basic information entry sheet	FULL
2	Resource Assessment - Available Manpower	FULL
3	Prioritization of areas (giving basic details of villages / urban areas)	FULL
4	Estimation of beneficiaries and required number of sessions	NO
5	Antigen wise estimation of beneficiaries	NO
6	Estimation of vaccine vials, AD & Reconstitution Syringes	NO
7	Logistic Requirement Summary	NO
8	Health Worker (ANM) Monthly Work Plan	FULL
9	ANM Roster (Immunization Calendar)	NO
10	Social Mobilization Plan	NO
11	Alternate Vaccine Delivery Plan	PARTIAL
12	Day wise Vaccine Distribution Plan	NO
13	Supervisor Plan	FULL

Click to view any of the formats to see information required to fill under each head for microplanning

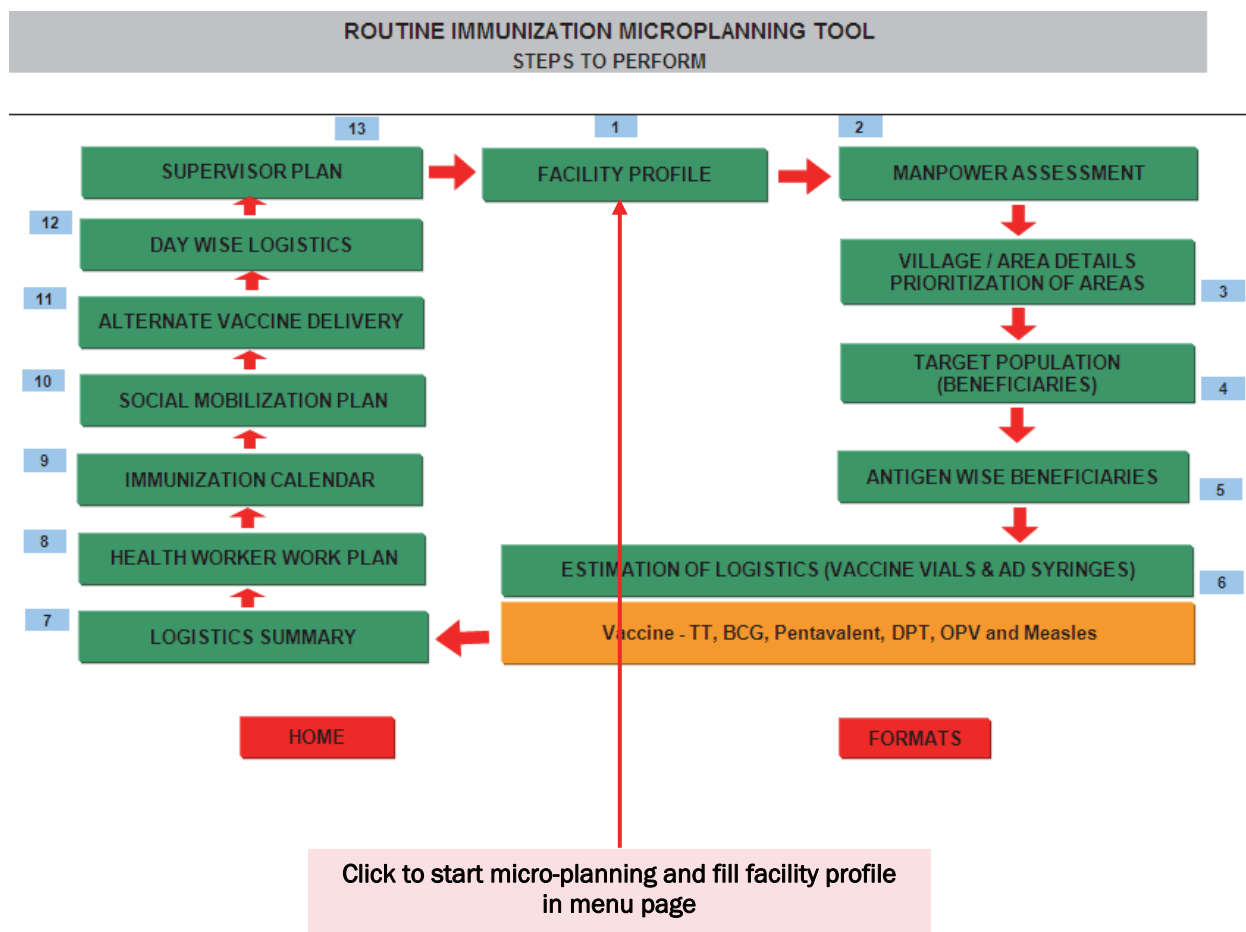
Level of manual entry required for respective formats (Full/Partial/Not required)

Background

This sheet presents a list of 13 formats in microplanning and the level of manual entry required for each format. For example, information in formats 1,2,3,8 and 13 must be filled manually; format 11 requires a few manual entries; rest of the formats does not require any manual entries self-generates the information.

This sheet provides freedom to select and view any of the formats with options to switch back to 'INDEX' or 'START MICROPLANNING'

FACILITY PROFILE



FACILITY PROFILE

BACK TO INDEX

NEXT STEP

ROUTINE IMMUNIZATION MICROPLAN

Name of State :

Name of District :

PHC/CHC/Urban Post :

Type (urban / rural / mixed) :

Name & address of Health Facility :

Total number of Subcenters (rural):

Number of urban health units :

Total Population of PHC/CHC/Urban Post area :

Year :

Birth Rate :

Infant Mortality Rate :

(per 1000 mid year population)

Priority wise distribution of village / areas in the area:

Enter Designation of Health Facility In charge (select from list) :

Enter Name of Health Facility In charge :

Write the type of population of the block, whether totally rural or mix of urban and rural.

Write the year covered by the microplan.

If the birth rate or infant mortality rate of the block is different from this, enter it. Otherwise standard rates for India, already entered, are used for estimation of beneficiaries.

Background

This sheet represents profiles of each healthcare facility (block). It includes demographic details and information about facility in-charge.

- Fill in all the details in all blank spaces (light blue cells) starting with the name of the state and name of the district, to the name of facility in-charge.
- Once you click on these empty cells, detailed instructions for each entry will appear to guide you on what information to fill in.
- Some cells have drop-down menu to fill the details from default options. The details of "total population" and "priority-wise distribution of villages" will be auto generated from other linked sheets.

The completed facility format will look like the sample given below.

[BACK TO INDEX](#)[NEXT STEP](#)

ROUTINE IMMUNIZATION MICROPLAN

Name of State :	Jharkhand	Name of District :	Jamtara			
PHC/CHC/Urban Post :	Karmatarh	Type (urban / rural / mixed) :	Rural			
Name & address of Health Facility :	Karmatarh PHC, Jamtara					
Jamtara, Pin code-815352						
Total number of Subcenters (rural):	XX	Number of urban health units :	2			
Total Population of PHC/CHC/Urban Post area :	0	Year :	2008			
Birth Rate : (per 1000 mid year population)	35	Infant Mortality Rate : (per 1000 live births)	72			
Priority wise distribution of village / areas in the area:	LOW	0	MODERATE	0	HIGH	0
Enter Designation of Health Facility In charge (select from list) :	Medical Superintendent					
Enter Name of Health Facility In charge :	Dr. XYZ					

This completes your 'BLOCK PROFILE' format, to access the next format, click on 'NEXT STEP' on the top, right hand side.

BLOCK-LEVEL HUMAN RESOURCE

BACK TO INDEX

PREVIOUS STEP

NEXT STEP

AVAILABLE HUMAN RESOURCE

State : District : Year :

Facility :

Name of Health Facility in charge :

Cadre	Sanctioned	Filled Posts	Vacant	Remarks
Health Department				
Superintendent / Deputy CMO	0	0		
Medical Officers				
- At Health Facility				
- At Additional / New PHC				
- On Contractual basis				
Health Inspector				
Health Supervisor	0	0		
- Male				
- Female (LHV)				
Staff Nurse				
Health Worker Female (ANM)				
On basis of Health Facility	0	0		
- At health facility				
- At Additional / New PHC				
- At Subcenters				
- Post partum Centers (U)				
- Health Posts / Units (U)				

Enter number of posts sanctioned for Superintendent/Deputy CMO for this particular block.

Enter number of Superintendent/Deputy CMO actually posted in the block.

If you want to make any comment, write in this cell.

Background

This format represents the human resource status at block level against the sanctioned strength. Also, information from the ICDS sector should be filled-in at the end of format. The above information will be available with the concerned block or district level official.

BLOCK-LEVEL HUMAN RESOURCE STATUS (CONTINUED)

BACK TO INDEX

PREVIOUS STEP

NEXT STEP

AVAILABLE HUMAN RESOURCE

MPW (Male) / BHW				
Immunization Officer				
Pharmacist				
Investigator cum Clerk (ICC)				
Class IV Workers				
Alternate Vaccinators				
Mobilizer				
Other Departments				
ICDS Department				
- CDPO				
- Supervisor (Mukhya sevika)				
- Anganwadi Workers				
TBA				
Self Help Groups				
Social Groups / NGOs*				

Name & Designation of person responsible for :

Cold chain maintenance :

Vaccine Distribution :

Recording & Reporting :

Logistics :

Enter number of personnel sanctioned for this block.

Enter number of MPW/BHW actually posted in the block.

Write number of social and non-government organizations working in health sector, in the block, in order to engage them in social mobilization.

A traditional birth attendant is defined as a person who assists the mother during childbirth and who initially acquired her skills by delivering babies herself or through an apprenticeship to other TBAs*.

A Self-help group (registered or unregistered) is a homogenous group with similar social and economic backgrounds for mutual aid and accomplishment of a common purpose.

*Definition by WHO

Guidance to fill information

Cadre- Medical Officer

Entries for Medical Officers (sanctioned and filled) should be made on the basis their posting, i.e. whether they are posted at health facility or at additional/new PHCs. Also, if there are any Medical Officers that have been posted on a contractual basis, they should be entered separately.

Cadre- Health Supervisor/Health Inspector

Entries for the post of Health Inspectors and Health Supervisors (sanctioned and filled) should be made separately for male and female supervisors/LHV.

Cadre- Staff Nurse

Similarly, entries for staff nurses should be made on the basis on of sanctioned numbers and actually filled posts.

Cadre- ANM

Entry for Health Worker Female (ANM) should be similar to that of Medical Officers, on the basis of posting. Enter the number of ANMs posted at different types of health facilities. The number of ANMs posted on a contractual basis should be indicated separately.

Other Cadres

Enter the number of MPW/BHW, Immunization Officers, pharmacists and investigators cum clerk posted for this particular block. Similarly, enter the numbers for alternate vaccinators and mobilizers.

**Mobilizers: Mobilizers are voluntary workers who provide assistance to health workers in mobilizing and tracking beneficiaries. Under NHM, they are named as ASHAs. They have different names in some states (i.e., Sahiya, Sahyogini and Link Worker).*

Information for ICDS department and TBA

Enter number of Child Development Project Officers, supervisors and Anganwadi Workers under ICDS department (both sanctioned and filled). Also fill the number of traditional birth attendants, self-help groups and NGOs working in the block region.

Traditional birth attendants may serve as mobilizers and may update the records of health workers regarding the new births or pregnant women in the community.

In the last section, fill in the name of persons responsible for cold chain maintenance, vaccine distribution, recording and reporting and logistics. The name and designation of In-charge will be self-generated from the information entered in previous sheet under the signature section.

PRIORITIZATION OF AREAS

	A	B	C	D	E	F	G	J	L	N	P
1	BACK TO INDEX		PREVIOUS STEP		NEXT STEP		HELP ON THIS FORMAT				
2	PRIORITIZATION OF THE AREAS										
4	District :					Facility :					
6	Name of PHC/CHC or Health Post (Urban)	S. No.	Name of Subcenter or Health Post (Urban)	S. No.	Name of Village (included under subcenter) or urban areas (inculded under health posts)	Population of Village or urban area	Distance from cold chain point (km)	PRIORITIZATION			
7						0		Type of Area / Terrain	Accessibility	RI Coverage (DPT 3)	Priority
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
21											
22											

Background

This is one of the most important formats in microplanning, so it should be filled carefully. The information entered in this format helps in generating estimates for village/urban areas of beneficiaries, logistics and prioritization of the areas as per immunization coverage and accessibility.

While filling in the information, ensure that all the areas are included in the drop down lists. All the columns in this format are to be filled manually. This format will guide you at each and every step to fill the required information (click on 'HELP ON THIS FORMAT' on the right hand side of format).

Guidance to fill information

Column A to G

- Enter the name of PHC/CHCs or Urban Health Posts for this block. In the next column enter the name of sub-centers or Urban Health Units, and in next column add the name of village or urban area. Enter the serial numbers in columns B and D.
- Enter the population of village/urban in sixth column (Column F). You can get population numbers from headcount (Survey Data) from Anganwadi Worker or from latest 'Census of India' data. Correct population numbers will give correct estimate of beneficiaries, which would help in planning to improve immunization coverage.
- In next column (Column G), enter the distance of particular village/ urban area from Block Headquarters or the Block cold chain point. If the cold-chain point is not available in the block and vaccines are distributed from an adjacent block or other area, give the distance from that particular point to the village. This is important because it assists in proper planning for 'Alternate Vaccine Delivery (AVD) mechanism'. The distance also is an important factor to prioritize the area.

Column J, L and N

- Areas are prioritized on the basis of information filled in these three columns (Column J, L & N). The priority criteria is decided on the basis of
 - Type of Area or Terrain (Column J)
 - Accessibility (Column L)
 - RI coverage for DPT 3rd dose. (Column N)
- Select one of the options from the drop down menu (with cells) in these three columns.
- Detailed scoring pattern for Prioritization is given in the following table

PRIORITIZATION			
Type of Area / Terrain	Accessibility	RI Coverage (DPT 3)	Priority
▼	▼	▼	▼
▼			
Plain			
Forest area			
River / Swamp			
Tribal inhabited			
Hilly terrain			
Urban slum			

POPULATION	SCORE	DISTANCE	SCORE	AREA/ TERRAIN	SCORE	ACCESSIBILITY	SCORE
Less than 1000	1	Less than 5 Km	1	Plain	1	Motorable	1
1000 to 3000	2	5 to 10 Km	2	Forest	2	Partially Motorable	2
More than 3000	3	More than 10 Km	3	River/Swamp	3	Mixed	3
				Tribal	4	Only cycle	4
				Hilly	5	Only Walking	5
				Urban Slum	7		

Total Score: Less than 6 Low Priority
 6 to 10 Moderate Priority
 More than 10 High Priority

- The tool calculates final scores on the basis of scoring criteria shown above. Calculated scores reflect priorities (Low/Moderate/High) in last column (Column P) with the color coding, i.e. green for low, orange for moderate and red for high priority.
- After completing the entry for one village / urban area in one row, get on to the next row for next village/area. Entries in Column A, B & C are to be repeated if the area is included under same PHC area and sub center/health unit. You can either retype the names or select the cell and press CTRL+'D' to duplicate the entry.
- Likewise enter the name of next sub-center/health unit and fill the information as detailed above. Ensure that no cell is left blank for any village/urban area.
- Once entries are completed for all villages/urban areas, you may make a printout of the plan. Go to 'VIEW' on Tool Bar and select 'Page Break Preview'. You may adjust the page breaks by stretching the blue line border breaking the pages. Give print command once you are done with page adjustments.

RI_Microplan_

Formulas Data Review View

Font Alignment Number Styles

Sort A to Z
Sort Z to A
Sort by Color
Clear Filter From "(Column A)"
Filter by Color
Text Filters

(Select All)
☒ ADD PHC CHAKRAIT
☒ ADD PHC DHANAWA
☒ ADD PHC KANJEMAU
☒ ADD PHC BARGADI
☒ CHC COLONELGANJ
☒ (Blanks)

OK Cancel

PREVIOUS STEP NEXT STEP HELP ON THIS FORMAT

PRIORITIZATION OF THE AREAS

Block : COLONELGANJ

Subcenter or Post (Urban)	S. No.	Name of Village (included under subcenter) or urban areas (included under health posts)	Population of Village or urban area	Distance from Block HQ or cold chain (km)	PRIORITIZATION			
					Type of Area / Terrain	Accessibility	RI Coverage (DPT 3)	Priority
			207968					
CHC COLONELGANJ	1	MAIN CENTRE			Urban slum	Motorable	50% to 80%	High
	2	PURWI GADI BAZAR	1065	2	Urban slum	Motorable	50% to 80%	High
	3	THATHRAHI BAZAR	1215	2	Urban slum	Motorable	50% to 80%	High
	4	NAI BAZAR	1625	2	Urban slum	Motorable	50% to 80%	High
	5	THANHA PARED	1475	2	Urban slum	Motorable	50% to 80%	High
	6	GANDHI NAGAR	1565	2	Urban slum	Motorable	50% to 80%	High
	7	KASHAI MANDI	1465	2	Urban slum	Motorable	50% to 80%	High
	8	GUDAH BAZAR	1710	2	Urban slum	Motorable	50% to 80%	High
		KATARA ROAD PAJAWA	1115	2	Urban slum	Motorable	50% to 80%	High

Step 1: Click here to see list of CHC's/PHC's entered in the format.

Step 2: Click here to see information for the particular CHC/PHC.

- Similarly, it could be done for filtering villages/areas of particular sub centers\health units and also to look into villages/areas with specific features with respect to Area/Terrain, Accessibility and RI coverage.
- By filtering out the priority areas, you can get priority-wise list of villages/ areas. It helps in close monitoring and supervision of high-priority areas.
- Click on NEXT STEP to go to next format after completing the entry in this format.

Microsoft Excel interface showing the 'PRIORITIZATION OF THE AREAS' form.

Form Header:

- BACK TO INDEX
- PREVIOUS STEP
- NEXT STEP
- HELP ON THIS FORMAT

Form Title: PRIORITIZATION OF THE AREAS

District: GONDA **Block:** COLONELGANJ

Name of Additional / New PHC or Health Unit (Urban)	S. No.	Name of Subcenter or Health Post (Urban)	S. No.	Name of Village (included under subcenter) or urban areas (included under health posts)	Population of Village or urban area	Distance from Block HQ or cold chain (km)	Type of Area / Terrain	Accessibility	RI Coverage (DPT 3)	Priority
CHC COLONELGANJ	1	MAIN CENTRE	1	PURVIGADI BAZAR	1065	2	Urban slum	Motorable	50% to 80%	High
			2	THATHRAHI BAZAR	1215	2	Urban slum	Motorable	50% to 80%	High
			3	NAI BAZAR	1625	2	Urban slum	Motorable	50% to 80%	High
			4	THANHA PARED	1475	2	Urban slum	Motorable	50% to 80%	High
			5	GANDHINAGAR	1565	2	Urban slum	Motorable	50% to 80%	High
			6	KASHA MANDI	1465	2	Urban slum	Motorable	50% to 80%	High
			7	GUDAHIBAZAR	1710	2	Urban slum	Motorable	50% to 80%	High
			8	KATAPA ROAD PAJAWA	1115	2	Urban slum	Motorable	50% to 80%	High
	2	MAIN CENTRE-2	1	BHAIRONATH-SONADAS SINGS	825	1	Urban slum	Motorable	50% to 80%	Moderate
			2	MOURYA NAGER	1680	1	Urban slum	Motorable	50% to 80%	High

Click here to visit the next format after completing entries in this sheet.

ESTIMATION OF BENEFICIARIES AND NUMBER OF IMMUNIZATION SESSIONS

	A	B	C	E	F	G	H	J	K
1	BACK TO INDEX	PREVIOUS STEP	NEXT STEP	HELP ON THIS FORMAT					
2	Estimation of Beneficiaries and number of Immunization Sessions								
3	District : GONDA			Block : COLONELGANJ		Year : 2011-2012			
4	Indicators used for Estimation of beneficiaries :			Birth Rate : 35		Infant Mortality Rate : 72			
5									
6									
7									
8	Name of Additional / New PHC or Health Unit (Urban)	Name of Subcenter or Health Post (Urban)	Name of Village (included under subcenter) or urban areas (included under health posts)	ANNUAL BENEFICIARIES		MONTHLY BENEFICIARIES		Number of Immunization Sessions required every month	Comment
9				Pregnant Women	Infants	Pregnant Women	Infants		
10									
11	TOTAL	TOTAL		8099	7110	763	680	164	
12	CHC COLONELGANJ	MAIN CENTRE	PURVI GADI BAZAR	42	36	4	3	1	
13			THATHRAHI BAZAR	47	41	4	4	1	
14			NAI BAZAR	63	55	6	5	2	
15			THANHA PARED	57	50	5	5	1	
16			GANDHI NAGAR	61	53	6	5	2	
17			KASHAI MANDI	57	50	5	5	1	
18			GUDAH BAZAR	66	58	6	5	2	
19			KATARA ROAD PAJAWA	43	38	4	4	1	
20		MAIN CENTRE-2	MOURYA NAGER	32	28	3	3	1	
21			#REF!	65	57	6	5	2	
22			C-H-C CLINIC						
23			SEDAR BEJAR,NAI BESTI	65	57	6	5	2	
24			SEKROURA PURVI	69	61	6	6	2	

Background

This is a self-generating format, i.e. the user doesn't need to fill the format. All the information entered in the previous formats will appear in this format. This format gives an estimation of beneficiaries (pregnant women and infants) in village and urban areas on an annual and monthly basis. Thus, it facilitates better planning and resource management.

Interpretation

The total numbers of estimated beneficiaries and immunization sessions required per month are given in Row 11.

- Estimated beneficiaries are calculated on the basis of population and other demographic indicators (birth rates and mortality rates).
- Immunization sessions required are calculated on the basis of the number of estimated beneficiaries to be reached out on monthly basis in a particular area.
- If “VALUE#” appears in the cells, it indicates an error and is because of some blank cells in the previous formats. To correct this, you may check for entries done in previous formats by clicking on “PREVIOUS” at the top of format.
- All other features are available as in previous formats (BACK TO INDEX, PREVIOUS STEP, NEXT STEP and HELP) at the top of the format.
- A “drop-down key” is available in Row 11 for “number of additional PHC/health units” and “number of sub centers/health posts” to select a particular area and see the results.

ANTIGEN WISE ESTIMATION OF BENEFICIARIES

BACK TO INDEX			PREVIOUS STEP			NEXT STEP			HELP ON THIS FORMAT									
Antigen wise Estimation of Beneficiaries (Doses of vaccines required every month)																		
District : GONDA																		
Block : COLONELGANJ																		
Antigen wise number of beneficiaries every month (Vaccine Doses required)																		
TT				Infants				DT				TT (10& 16)						
Pregnant Women (2 Doses)				BCG (one dose)		OPV (5 doses)		DPT (4 doses)		Hepatitis B (3 doses)		JE (one dose)		Measles (one dose)				
1526				680		3400		2720		2040		680		680				
8				3		15		12		9		3		3				
8				4		20		16		12		4		4				
12				5		25		20		15		5		5				
10				5		25		20		15		5		5				
12				5		25		20		15		5		5				
10				5		25		20		15		5		5				
12				5		25		20		15		5		5				
10				5		25		20		15		5		5				
12				5		25		20		15		5		5				
8				4		20		16		12		4		4				
6				3		15		12		9		3		3				
12				5		25		20		15		5		5				
10				5		25		20		15		5		5				
12				5		25		20		15		5		5				
10				5		25		20		15		5		5				
12				5		25		20		15		5		5				
8				4		20		16		12		4		4				
6				3		15		12		9		3		3				
12				5		25		20		15		5		5				
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SUB CENTER AND VILLAGE/AREA WISE ESTIMATION OF VACCINE VIALS AND OTHER LOGISTICS (MONTH WISE)

	A	B	C	E	F	G	H	I	J	K	L	M	N	O	P	Q	R																																																																																																																																																																																																																																																							
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7	Subcenter & Village / Area wise Estimation of Vaccine Vials and other Logistics (Month wise)																																																																																																																																																																																																																																																																							
8	District : GONDA Block : COLONELGANJ Year: 2011-2012																																																																																																																																																																																																																																																																							
9	<table border="1"> <thead> <tr> <th rowspan="2">Name of Additional / New PHC or Health Unit</th> <th rowspan="2">Name of Subcenter or Health Post (Urban)</th> <th rowspan="2">Name of Village or urban areas</th> <th colspan="6">VACCINE VIALS</th> <th colspan="2">Diluents</th> <th rowspan="2">AD Syringes (except Hepatitis B & JE)</th> <th rowspan="2">Reconstitution Syringes (For BCG & Measles)</th> <th rowspan="2">Immunization Cards</th> </tr> <tr> <th>TT (10 dose vial)</th> <th>BCG (10 dose vial)</th> <th>OPV (20 dose vial)</th> <th>DPT (10 dose vial)</th> <th>Measles (5 dose vial)</th> <th>DT (10 dose vial)</th> <th>Normal Saline</th> <th>Sterile Water</th> </tr> </thead> <tbody> <tr> <td>TOTAL</td> <td>TOTAL</td> <td>TOTAL</td> <td>474</td> <td>190</td> <td>275</td> <td>474</td> <td>274</td> <td>190</td> <td>190</td> <td>274</td> <td>867</td> <td>7729</td> <td>464</td> <td>950</td> </tr> <tr> <td>CHC COLONELGANJ</td> <td>MAIN CENTRE</td> <td>PURVI GADI BAZAR</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td>4</td> <td>36</td> <td>2</td> <td>5</td> </tr> <tr> <td></td> <td></td> <td>THATHRAHI BAZAR</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>5</td> <td>44</td> <td>3</td> <td>5</td> </tr> <tr> <td></td> <td></td> <td>NAI BAZAR</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>6</td> <td>58</td> <td>3</td> <td>7</td> </tr> <tr> <td></td> <td></td> <td>THANIHA PARED</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>6</td> <td>55</td> <td>3</td> <td>6</td> </tr> <tr> <td></td> <td></td> <td>GANDHI NAGAR</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>6</td> <td>58</td> <td>3</td> <td>7</td> </tr> <tr> <td></td> <td></td> <td>KASHAI MANDI</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>6</td> <td>55</td> <td>3</td> <td>6</td> </tr> <tr> <td></td> <td></td> <td>GUDAHI BAZAR</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>6</td> <td>58</td> <td>3</td> <td>7</td> </tr> <tr> <td></td> <td></td> <td>KATARA ROAD</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>5</td> <td>44</td> <td>3</td> <td>5</td> </tr> <tr> <td></td> <td>MA IN CENTRE-2</td> <td>MOURYA NAGER</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td>4</td> <td>33</td> <td>2</td> <td>4</td> </tr> <tr> <td></td> <td></td> <td>#REF!</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>6</td> <td>58</td> <td>3</td> <td>7</td> </tr> <tr> <td></td> <td></td> <td>C-H-C CLINIC</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>SEDAR BEJAR,NAI BESTI</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>6</td> <td>58</td> <td>3</td> <td>7</td> </tr> <tr> <td></td> <td></td> <td>SEKROURA PURVI</td> <td>4</td> <td>1</td> <td>2</td> <td>4</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>7</td> <td>66</td> <td>3</td> <td>7</td> </tr> <tr> <td></td> <td></td> <td>BABUGANJ-BALEKRAM</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> <td>2</td> <td>1</td> <td>1</td> <td>2</td> <td>6</td> <td>58</td> <td>3</td> <td>7</td> </tr> </tbody> </table>																	Name of Additional / New PHC or Health Unit	Name of Subcenter or Health Post (Urban)	Name of Village or urban areas	VACCINE VIALS						Diluents		AD Syringes (except Hepatitis B & JE)	Reconstitution Syringes (For BCG & Measles)	Immunization Cards	TT (10 dose vial)	BCG (10 dose vial)	OPV (20 dose vial)	DPT (10 dose vial)	Measles (5 dose vial)	DT (10 dose vial)	Normal Saline	Sterile Water	TOTAL	TOTAL	TOTAL	474	190	275	474	274	190	190	274	867	7729	464	950	CHC COLONELGANJ	MAIN CENTRE	PURVI GADI BAZAR	2	1	1	2	1	1	1	1	4	36	2	5			THATHRAHI BAZAR	3	1	2	3	2	1	1	2	5	44	3	5			NAI BAZAR	3	1	2	3	2	1	1	2	6	58	3	7			THANIHA PARED	3	1	2	3	2	1	1	2	6	55	3	6			GANDHI NAGAR	3	1	2	3	2	1	1	2	6	58	3	7			KASHAI MANDI	3	1	2	3	2	1	1	2	6	55	3	6			GUDAHI BAZAR	3	1	2	3	2	1	1	2	6	58	3	7			KATARA ROAD	3	1	2	3	2	1	1	2	5	44	3	5		MA IN CENTRE-2	MOURYA NAGER	2	1	1	2	1	1	1	1	4	33	2	4			#REF!	3	1	2	3	2	1	1	2	6	58	3	7			C-H-C CLINIC															SEDAR BEJAR,NAI BESTI	3	1	2	3	2	1	1	2	6	58	3	7			SEKROURA PURVI	4	1	2	4	2	1	1	2	7	66	3	7			BABUGANJ-BALEKRAM	3	1	2	3	2	1	1	2	6	58	3	7
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Background

This self-generating format generates village/urban area-wise estimations of:

- Vaccine vials required for all antigens
- Diluents for BCG & measles
- Immunization cards
- AD syringes (both 0.1 ml for BCG & 0.5 ml for other vaccines)
- Reconstitution syringes for BCG & measles

This format assists block-level Immunization Officers and cold chain handlers to estimate their monthly requirements of vaccines and logistics and therefore facilitates timely indenting (ordering) from the district. This format takes into consideration the wastage factor for logistics. All other features are same as in previous formats.

LOGISTIC REQUIREMENTS SUMMARY SHEET

1	BACK TO INDEX	PREVIOUS STEP	NEXT STEP	HELP ON THIS FORMAT
2	LOGISTIC REQUIREMENT SUMMARY SHEET			
3				
4				
5	State :	U.P.	District :	GONDA
6				
7	Block / Planning Unit :	COLONELGANJ	Year :	2011-2012
8				
9	Total Population of the Block :	207968		
10				
11	Total number of subcenters :	23	Total number of urban health units :	0
12				
13	Available Health Workers (ANMs') :	21	Available Contractual vaccinators :	0
14				
15	Number of Immunization Sessions REQUIRED / MONTH	165	PLANNED / MONTH	192
16				
22	Estimated Beneficiaries :	Annual	Monthly	
23	Pregnant Women	8099	763	
24	Infants	7110	680	
25				
26	Logistic Requirement	Monthly requirement (as per estimated targets)	Monthly requirement (as per HW Work Plan & vaccine distribution plan)	Required Monthly Stock (including 25% buffer)
28	Vaccine Requirement (in vials):			
29	BCG (10 dose)	190	190	253
30	DPT (10 dose)	474	476	634
31	OPV (20 dose)	275	276	368
33	Measles (5 dose)	274	275	366
35	DT (10 dose)	190	190	253
36	TT (10 dose)	474	524	697
38	Diluents (in ampoules):			
39	Normal Saline (for BCG)	190	190	253
40	Distilled Water (for Measles)	274	275	366

LOGISTIC REQUIREMENTS SUMMARY SHEET (CONTINUED...)

	A	B	C	D	E	F	G	H	I
1	BACK TO INDEX	PREVIOUS STEP	NEXT STEP			HELP ON THIS FORMAT			
2	LOGISTIC REQUIREMENT SUMMARY SHEET								
42	Syringes (for injectable vaccines) :								
43	0.1 ml AD syringes (for BCG)		867		870		1158		
44	0.5 ml AD syringes		7729		7765		10328		
47	Reconstitution syringes (for BCG & Measles)		464		465		619		
50	Vitamin A solution (100 ml bottles)		Annual Requirement			Annual requirement + Wastage			
51	For initial 5 doses (till 3 years of age)		640		704				
52	For subsequent 4 doses (between 3-5 years)		569		626				
53	TOTAL REQUIREMENT		1209		1330				
55	Immunization Cards - Annual Requirement		8099		Including Wastage		8909		
57	Hepatitis B Immunization Summary								
58	Hepatitis B (10 dose)		360		361		481		
59	0.5 ml AD syringes for Hepatitis B		2315		2325		3093		
61	Japanese Encephalitis Immunization Summary								
62	Japanese Encephalitis (5 dose)		274		275		366		
63	0.5 ml AD syringes for JE vaccine		867		870		1158		
64	Reconstitution syringes (for JE vaccine)		274		275		366		
65									
66									
67									
68									
69									
70									
71									
72									

DR. P. K. SINGH
Medical Superintendent

Logistic Requirements Summary Sheet

Background

This sheet summarizes logistics requirements (including vaccines, AD syringes, reconstitution syringes and vitamin A), generated from previous sheets.

- Rows at top of the sheet give basic information about health facilities covered under the block, manpower, total population, and number of immunization sessions required and planned.
- Information from Row 26 onwards shows monthly requirements for vaccine vials.
 - As per the estimated targets (obtained from sheets on Sub center and Village/area-wise Estimations of Vaccine Vials and other Logistics).
 - As per Health Worker Work Plan and Vaccine Distribution Plan (This gets filled from the Health Worker Work Plans and is obtained from the "Session Day-wise Vaccine and Logistic Distribution Plan" sheet).
 - Required Monthly Stock (including 25% buffer) – an extra 25% in buffer stock is considered necessary to prevent stock-outs caused by unforeseen shortages or demands.
- Vitamin A is estimated in 2 sections, one for the initial 5 doses and the second for doses 6 to 9.
- The last two sections give requirements for forecasting Hepatitis B & JE needs.

IMMUNIZATION WORK PLAN FOR HEALTH WORKER AND ALTERNATE VACCINATORS

	A	C	D	E	F	G	H
1	Select Number of Health Worker	BACK TO INDEX	PREVIOUS STEP	NEXT STEP	HELP ON THIS FORMAT		
2							
3		IMMUNIZATION WORK PLAN FOR HEALTH WORKER / ALTERNATE VACCINATOR					
5	HEALTH WORKER WORK PLAN						
6							
7	Name of Health Worker :				Name of Subcenter :		1
8	Name of Supervisor :				Number of sessions planned for month :		
9							
10							
11			Session - 1	Session - 2	Session - 3	Session - 4	Session - 5
12	Week Day						
13	Timing's of session						
14	Name of Village / Area						
15	Session site (address or landmark)						
16	Estimated Population to be covered by session						
17	Name of Secretary (village health & FW Committee)						
18	Name of Anganwadi worker						
19	Name of ASHA / Link Worker						
20	Mode to be used for vaccine delivery to site						

Background

This is one of the most important formats, and it has to be filled manually. The information required to complete this format should be finalized in consultation with supervisors and health workers. There are separate formats for each health worker, which allow entering information for up to 50 health workers. Please note that the format plans for immunization activities only.

The format allows planning for 10 sessions. If fewer than 10 sessions are planned, the remaining cells may be left blank. The sheet has page separators according to individual health worker's plans to make printing convenient. It is important to fill information in all the cells.

Instructions for filling the format

A	B	C	D	E	F	G	H
1	Select	BACK TO INDEX	PREVIOUS STEP	NEXT STEP	HELP ON THIS FORMAT		
2	Number of Health Worker						
3			IMMUNIZATION WORK PLAN FOR HEALTH WORKER / ALTERNATE VACCINATOR				
5			HEALTH WORKER WORK PLAN				
6			1				
7	Name of Health Worker :		Name of Subcenter :				
8	Name of Supervisor :		Number of sessions planned for month :				
9							
10							
11			Session - 1	Session - 2	Session - 3	Session - 4	Session - 5
12	Week Day						
13	Timing's of session						
14	Name of Village / Area						
15	Session site (address or landmark)						
16	Estimated Population to be covered by session						
17	Name of Secretary (Village health & FW Committee)						
18	Name of Anganwadi worker						
19	Name of ASHA / Link Worker						
20	Mode to be used for vaccine delivery to site						
Enter the day of month on which session will be organized. For e.g. 1 st Wednesday or 3 rd Saturday etc.							
Enter the time of session. For e.g. 9am-4pm or 2pm-6pm.							
Enter the name of village or urban area (or name of health facility if it is a fixed session)							
Enter the exact address of session site in village or urban area whichever you have entered above							
Enter the population which is to be served by this session. This is important to estimate session wise logistics							
Enter the name of secretary of village health and family welfare committee constituted under panchayat raj							

A	C	D	E	F	G	H
1	Select	BACK TO INDEX	PREVIOUS STEP	NEXT STEP	HELP ON THIS FORMAT	
2	Number of					
3	Health Worker					
10	IMMUNIZATION WORK PLAN FOR HEALTH WORKER / ALTERNATE VACCINATOR					
11		Session - 1	Session - 2	Session - 3	Session - 4	Session - 5
12	Week Day					
13	Timing's of session					
14	Name of Village / Area					
15	Session site (address or landmark)					
16	Estimated Population to be covered by session					
17	Name of Secretary (village health & FW Committee)					
18	Name of Anganwadi worker					
19	Name of ASHA / Link Worker					
20	Mode to be used for vaccine delivery to site					
21	Person responsible for vaccine delivery					
22	Name of locally active self help group / mahila mandal / social group					

Enter the name of Anganwadi worker of village or urban area. If no anganwadi worker is posted, leave the cell blank

Enter the name of ASHA/link worker who have responsibility for mobilization & tracking of beneficiaries

Enter the mode of vaccine transportation to the session site e.g. cycle, auto or through ANM

Write the name of person who is responsible for transportation of vaccines and logistics to session site

Write the name of Self Help Group (SHG)/mahila mandal/local NGO. If there is no such body in the area, leave the cell blank

Notes:

- **Estimated population to be covered by the session:** If total population of a village is 2700 and two sessions are to be organized (first on 1st Wednesday and second on 3rd Wednesday), then enter these two sessions in different columns. Suppose the first session serves population of 1300 living in one community cluster, and the second session population covers 1400; then enter the populations under different sessions instead of writing the total of 2700. This is important because session-wise planning of logistics and vaccines would be done for this population.
- **Name of ASHA or Link Worker:** Enter the name of mobilizer including Sahiya, Sahyogini or other local mobilizer who is supposed to receive honorarium mobilizing the beneficiaries (provision under NHM).

After completing entries for one health worker, you may move towards the next. A copy of this work plan is to be available with health worker, so that s/he is aware of session schedule in the area. To take print out, go to 'print preview', and print a single work plan per page (the print area need not be adjusted).

To view the work plan for a particular health worker (suppose for 47th health worker), the serial number of the health worker needs to be selected from the drop-down list with first left-most column (Column A). Again, to revert back to see all the work plans, select "all" from same drop-down list.

Click on "NEXT STEP" to move forward.

IMMUNIZATION CALENDAR (ANM ROSTER)

A	B	C	D	E	F	G	H	I	J
1	BACK TO INDEX	PREVIOUS STEP	NEXT STEP	HELP ON THIS FORMAT					
2	IMMUNIZATION CALENDAR (ANM ROSTER)								
3	District : GONDAL Block : COLONELGANJ Year : 2011-2012								
4									
5									
6	No.	Name of Health Worker	Name of Supervisor		Session 1	Session 2	Session 3	Session 4	Session 5
7	1	SMT DHANARAJ SINGH	D. S. TIWARI	DAY	WEDNESDAY-1	SATERDAY-1	WEDNESDAY-2	SATERDAY-2	WEDNESDAY-3
8				Village / Area	PURVI GADI BAZAR	THATHRAHI BAZAR	NAI BAZAR	THANHA PARED	GANDHI NAGAR
9	2	SMT PUSHPA AGRAWAL	D S TIWARI	DAY	WEDNESDAY-1	SATERDAY-1	WEDNESDAY-2	SATERDAY-2	WEDNESDAY-3
10				Village / Area	BHAIRO NATH;	MOURYA NAGER	C-H-C CLENIC	SEDAR BEJAR;NAI BESTI	SEKROURA PURVI
11	3	SMT GEETA SHRIVASTAV	MOHAN DUBEY	DAY	WEDNESDAY-1	SATERDAY-1	WEDNESDAY-2	SATERDAY-2	WEDNESDAY-3
12				Village / Area	C.H.C, CLINIC	CHAHATAI PURWA; JANKI	SHAKROURA PASCHIMI	BHIMBHA PURWA; KUNNU	C.H.C.
13	4	SMT URMILA DEVI MISHRA	D S TIWARI	DAY	WEDNESDAY-1	SATERDAY-1	WEDNESDAY-2	SATERDAY-2	WEDNESDAY-3
14				Village / Area	PIPERI;KAND HI;	SURYVANSA N PURWA;	RAM PURWA;	CHRIHAN PURWA;	BAKIYAN PURWA;
									LONIYAN PURWA;

Background

This format self generates the information and develops a calendar for immunization activities and a detailed roster for ANMs from every block. The format does not accept any manual entries.

A printed copy of this calendar should be displayed at health facilities and cold chain units for better execution by all concerned and also the calendar acts as a 'PULL' factor from community

SOCIAL MOBILIZATION PLAN

A	B	C	D	E	G	H	I	J
1	BACK TO INDEX	PREVIOUS STEP	NEXT STEP	HELP ON THIS FORMAT				

Social Mobilization Plan

District : GONDA

Block : COLONELGANJ

S. No. of AMM	Name of Health Worker (AMM)	Name of Subcenter or Health Post (Urban)	Day	Name of Village or urban areas	Name of Secretary (Village Health and Welfare Committee)	Name of Anganwadi Worker	Name of ASHA worker or Link worker	Name of locally active Self Help Group / Mahila Mandal / Social Group / NGO
1	SMT DHANARAJ SINGH	MAIN CENTRE-1	WEDNESDAY-1	PURVI GADI BAZAR			JANAK LALI	SONADAS SINGS PURWA
2	SMT PUSHPA AGRAWAL	MAIN CENTRE-2	WEDNESDAY-1	BHAIRO NATH			SAVITRI DEVI	BERAGI PURWA; SHURJI PURWA
3	SMT GEETA SHRIVASTAV	SAKROURA	WEDNESDAY-1	C.H.C. CLINIC				KERBIDA PURWA; BERYEAN PURWA;MALIVAN PURWA;
4	SMT URMILA DEVI MISHRA	NARAYEN PUR MAJHA	WEDNESDAY-1	PIPERI;KANDHI;		SUSHILA	SAPNA SINGH	BADLE PURWA
5	SMT URMILA YADAV	NACHANI	WEDNESDAY-1	MEHDI HATA;		ANOOOP KUMARI MAURY	REKHA RANI	MISKAUT; SHARI PURWA; NACHANI DARJI; KANJAR PURWA;
6	SMT KRISHNA SINGH	CHAKROUT	WEDNESDAY-1	AHIRAN PURWA;		SADHANA TIWARI	USHA SINGH	KORI PURWA; LALA PURWA; PANDIT PURWA; JHALIEN PURWA; TEPARA; SHADKIEN GAONI;

Click here to see drop-down menu and select a particular option to see specific information.

Background

- This format self generates a social mobilization plan on the basis of information filled in “health worker work plan” format. It provides a list of health workers, AWW, ASHA and self-help groups/NGO's who provide support to immunization activities for mobilization and tracking of beneficiaries in each village/urban area. This plan can be used by supervisors to ensure support from all concerned mobilizers and NGOs/SHGs in a particular area.
- The format has a provision to filter and view information of a particular area, health worker and immunization session day through a drop-down list in Row 8 from Columns A to D. To revert and see the complete list, select “ALL” from the same drop-down list.

ALTERNATE VACCINE DELIVERY PLAN

A	B	C	D	E	G	H	I		
1	BACK TO INDEX	PREVIOUS STEP	NEXT STEP	HELP ON THIS FORMAT					
2									
3									
4									
5									
6									
7	Plan for Alternate Vaccine Delivery to the Session sites								
8	District : GONDA Block : COLONELGANJ								
9	S. No. of ANM	Name of Health Worker	Name of Subcenter or Health Post (Urban)	Day	Name of Village (included under subcenter) or urban areas (included under health posts)	Exact address of session site (enter all sites if more than one session is organized in any area in a month)	Mode to be used for vaccine delivery (e.g. ANM, Hired Car, Rickshaw etc.)	Name of Person responsible for vaccine delivery to session site	Approximate Expenditure to be incurred in vaccine delivery (Rs.)
10	1	SMT DHANARAJ SINGH	MAIN CENTRE-1	WEDNESDAY-1	PURVI GADI BAZAR	DR.RAMTEEJ			0.00
11	2	SMT PUSHPA AGRAWAL	MAIN CENTRE-2	WEDNESDAY-1	BHAIRO NATH;	BHAIRO BABA			
12	3	SMT GEETA SHRIVASTAV	SAKROURA	WEDNESDAY-1	C.H.C. CLINIC	CHC			
13	4	SMT URMILA DEVI MISHRA	NARAYEN PUR MAJHA	WEDNESDAY-1	PIPERIKANDHI;	PIPARI S.C			
14	5	SMT URMILA YADAV	NACHANI	WEDNESDAY-1	MEHDHATA;	MEHDHATA ANNANTRAAM			
15	6	SMT KRISHNA SINGH	CHAKROUT	WEDNESDAY-1	AHIRAN PURWA;	ADD; CHAKROUT			
16	7	SMT MEERA CHAUBEY	SHISHA MAU	WEDNESDAY-1	SHISHA MAU;	UP CHANDR SISAMAOU			
17	8	REETASINGH	KANJEY MAU	WEDNESDAY-1	BAB DUDH NATH PURWA;	UP CHANDE KANJAMOW			

Enter the estimated expenditure for vaccine delivery to immunization session sites

Background

This format self generates information and helps to plan an alternate vaccine delivery mechanism for every immunization session. The format requires manual entry for “approximate expenditure to be incurred in vaccine delivery” (last column) on the basis of distance between cold chain points and immunization session sites and local rates. Total expenditure estimated for vaccine delivery would appear in the yellow cell in top of this column (Row 9).

Similar to previous formats, there is a provision to filter and see the specific information (For a particular health worker, sub center or session day) from drop-down buttons provided in Row 9 (Columns A to D). To revert back and see the complete list, select “ALL” from the same drop-down list.

SESSION DAY-WISE VACCINE VIAL AND LOGISTIC DISTRIBUTION PLAN

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V
1	BACK TO INDEX			PREVIOUS STEP			NEXT STEP			HELP ON THIS FORMAT												
2	SESSION DAY WISE VACCINE VIAL AND LOGISTIC DISTRIBUTION PLAN																					
3																						
4																						
5																						
6																						
7																						
8																						
9																						
10																						
11																						
12																						
13																						
14																						
15																						
16																						
17																						
18																						
19																						
20																						

Number of vaccine vials, diluents, AD syringes and reconstitution syringes required of a session

Background

This format self generates the distribution plan for vaccine vials and logistics per immunization session, indicating the number of vaccine vials, diluents (for BCG and measles), AD syringes and reconstitution syringes (refer to the figure). This is developed on the basis of information in previous formats.

It therefore helps to improve vaccine and logistics planning.

Similar to the previous format, provision to filter and see particular information is available in Row 9 (Column A to D). Click on "NEXT STEP" for next format.

SUPERVISION PLAN

A	B	C	D	E	F	G	H	I	J
1	BACK TO INDEX	PREVIOUS STEP	HELP ON THIS FORMAT						
2	SUPERVISION PLAN								
3									
4									
5									
6	District : GONDA			Block : COLONELGANJ					

S. No.	Name of Supervisor	Designation	Session 1 Day	Session 2 Day	Session 3 Day	Session 4 Day	Session 5 Day	Session 6 Day	Session 7 Day	Session 8 Day
1	SHRI D. S. TIWARI	H.I.	GADI BAZAR PURVI	SURY BANSON PURWA	NAI BAZAR	BHATAN PURWA	GANDHI NAGAR	LONIYEN PURWA	GUDAHI BAZAR	MALLOULI
2	SHRI D. S. TIWARI	H.I.	BHAIRO NATH	BANJARIYA	RAI PURWA	CHIRRAHAN PURWA	SAKROURA PURVI	GARWARA	JAHLI PURWA	SARF RAJ GANJ
3	MOHAN DUBEY	H.S.	ADD.P.H.C. CHAKROUT	P.P.KUTUB PUR	SAKROURA PASCHIMI	A.B.K.PAIR ORI	RAM NATH PURWA	HARDAYAL PURWA	P.P.SAKRO URA GRAMIN	BHAYA PURWA
4	MOHAN DUBEY	H.S.	NACHANI	A.B.K. TIWARI PURWA	A.B.K. KADI PUR	A.B.K. SUBBA LAL PURWA	MANIHARI	GHOSHI PURWA	A.B.K. BARWALIY A	GODIEN PURWA
5	SHRI T.B. SINGH	H.S.	GOURA SINGH PUR	KAMAL PUR	TALEY PURWA	KASHIRAM PURWA	BELAHRI	A.B.K.JHALI EN PURWA	GURWALIY A	UDIYA PUR

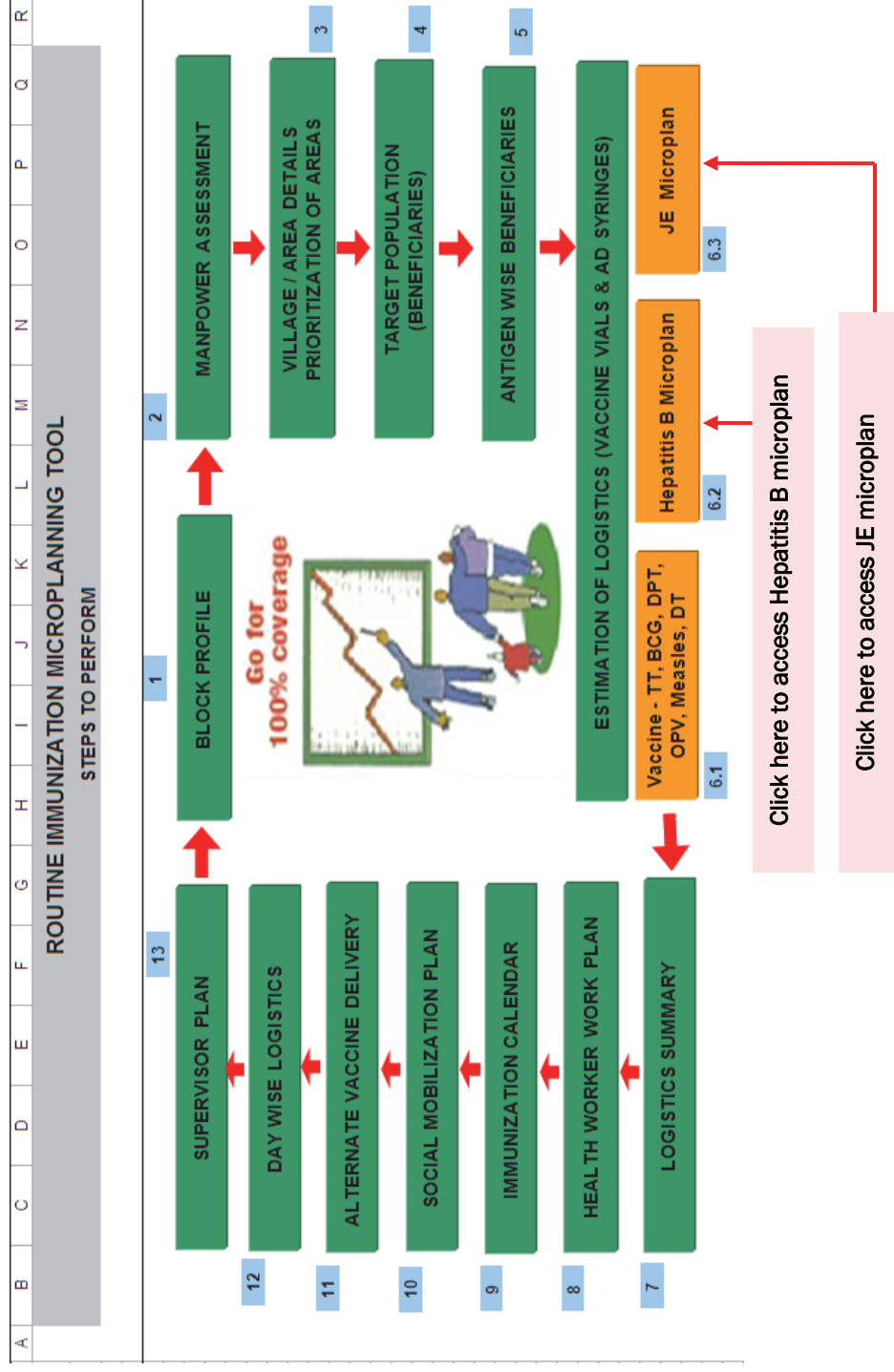
Supervisors can be Medical Officers, other non-medical supervisory staff including Health Inspectors, Health Supervisors (Male & Female), LHV or supervisory staff from ICDS and other related department or agency.

To fill the sessions to be visited, you can take help of Immunization Calendar (format no. 9), e.g. on session day 1, supervisor ABC would be visiting session sites UVW and XYZ other related Department or Agency.

Background

This format plans supervisory visits to the immunization sessions for monitoring and supervision. This is the last format in Routine Immunization Micro-planning for the block and requires manual entries. After completing the format, you can print a copy and display the same at the health facility. Click on "BACK TO INDEX" to access the Hepatitis B and JE micro-plans

HEPATITIS B AND JAPANESE ENCEPHALITIS IMMUNIZATION MICROPLANS



Background

You can take printed copies for either or both of Hepatitis B* and/or Japanese Encephalitis vaccination micro-plans, if they are included in Routine Immunization in the district/block. Neither of these self-generated formats accepts any manual entries.

* Hepatitis -B was made universalin2011.

	A	B	C	D	E	F
1	BACK TO INDEX			HELP ON THIS FORMAT		
2	HEPATITIS B IMMUNIZATION MICROPLAN					
3	District : GONDA			Block / Unit : COLONELGANJ		
4						
5						
6	Name of Additional / New PHC or Health Unit (Urban)	Name of Subcenter or Health Post (Urban)	Name of Village (included under subcenter) or urban areas (inculded under health posts)	Estimated Beneficiaries for Hepatitis B Immunization	Hepatitis B vials required (10 dose vial)	0.5 ml AD syringes required
7						
8						
9	TOTAL	TOTAL	TOTAL	2040	360	2315
10	CHC COLONELGANJ	MAIN CENTRE	PURVI GADI BAZAR	9	2	10
11			THATHRAHI BAZAR	12	2	14
12			NAI BAZAR	15	2	17
13			THANHA PARED	15	2	17
14			GANDHI NAGAR	15	2	17
15			KASHAI MANDI	15	2	17
16			GUDAH BAZAR	15	2	17
17			KATARA ROAD PAJAWA	12	2	14
18		MA IN CENTRE-2	MOURYA NAGER	9	2	10
19			#REF!	15	2	17
20			C-H-C CLENIC			
21			SEDAR BEJAR;NAI BESTI	15	2	17
22			SEKROURA PURVI	18	3	20
23			BABUGANJ;BALEKRAM PUR	15	2	17
24			C-H-C CLENIC			
25			SEFDERGANJ; EEDGAH;SU	18	3	20

Click to see the drop down menu and filter to see particular information/plan

A		B		C		D	E	F	G
1		BACK TO INDEX		JAPANESE ENCEPHALITIS		HELP ON THIS FORMAT			
2		3		4		IMMUNIZATION MICROPLAN			
4		5		6		Block / Unit : COLONELGANJ			
7		8		9		District : GONDA			
10		11		12		Name of Additional / New PHC or Health Unit (Urban)			
13		14		15		Name of Subcenter or Health Post (Urban)			
16		17		18		Name of Village (included under subcenter) or urban areas (inculded under health posts)			
19		20		21		Estimated Beneficiaries for JE Immunization			
22		23		24		JE vials required (5 dose vial)			
25		26		27		0.5 ml AD syringes required			
28		29		30		Reconstitution syringes required			
31		32		33		TOTAL			
34		35		36		TOTAL			
37		38		39		TOTAL			
40		41		42		TOTAL			
43		44		45		TOTAL			
46		47		48		TOTAL			
49		50		51		TOTAL			
52		53		54		TOTAL			
55		56		57		TOTAL			
58		59		60		TOTAL			
61		62		63		TOTAL			
64		65		66		TOTAL			
67		68		69		TOTAL			
70		71		72		TOTAL			
73		74		75		TOTAL			
76		77		78		TOTAL			
79		80		81		TOTAL			
82		83		84		TOTAL			
85		86		87		TOTAL			
88		89		90		TOTAL			
91		92		93		TOTAL			
94		95		96		TOTAL			
97		98		99		TOTAL			
100		101		102		TOTAL			
103		104		105		TOTAL			
106		107		108		TOTAL			
109		110		111		TOTAL			
112		113		114		TOTAL			
115		116		117		TOTAL			
118		119		120		TOTAL			
121		122		123		TOTAL			
124		125		126		TOTAL			
127		128		129		TOTAL			
130		131		132		TOTAL			
133		134		135		TOTAL			
136		137		138		TOTAL			
139		140		141		TOTAL			
142		143		144		TOTAL			
145		146		147		TOTAL			
148		149		150		TOTAL			
151		152		153		TOTAL			
154		155		156		TOTAL			
157		158		159		TOTAL			
160		161		162		TOTAL			
163		164		165		TOTAL			
166		167		168		TOTAL			
169		170		171		TOTAL			
172		173		174		TOTAL			
175		176		177		TOTAL			
178		179		180		TOTAL			
181		182		183		TOTAL			
184		185		186		TOTAL			
187		188		189		TOTAL			
190		191		192		TOTAL			
193		194		195		TOTAL			
196		197		198		TOTAL			
199		200		201		TOTAL			
202		203		204		TOTAL			
205		206		207		TOTAL			
208		209		210		TOTAL			
211		212		213		TOTAL			
214		215		216		TOTAL			
217		218		219		TOTAL			
220		221		222		TOTAL			
223		224		225		TOTAL			
226		227		228		TOTAL			
229		230		231		TOTAL			
232		233		234		TOTAL			
235		236		237		TOTAL			
238		239		240		TOTAL			
241		242		243		TOTAL			
244		245		246		TOTAL			
247		248		249		TOTAL			
250		251		252		TOTAL			
253		254		255		TOTAL			
256		257		258		TOTAL			
259		260		261		TOTAL			
262		263		264		TOTAL			
265		266		267		TOTAL			
268		269		270		TOTAL			
271		272		273		TOTAL			
274		275		276		TOTAL			
277		278		279		TOTAL			
280		281		282		TOTAL			
283		284		285		TOTAL			
286		287		288		TOTAL			
289		290		291		TOTAL			
292		293		294		TOTAL			