



Proforma for Monitoring of ICDS Project for Anganwadi worker

Details of ICDS Project/ AWCs monitored

A. Background Information:

1. Name of the State/UT:
2. Name of the District:
- 2.1. Whether District is High Burden District: Yes No
3. Name of the Project:
4. Name of Anganwadi Worker:
5. Name of Helper:
6. Name and Number code of AWC:
7. Address of AWC:
- Telephone: [With STD code] Mobile:

B. Anganwadi Centre Information:

1. Type of the Project: Rural Urban Tribal
2. Year of Starting AWC:
3. Experience of AWW in ICDS: Up to one Year 2- 5Years 5-10 years 10 Years & above
4. Educational qualification: Below Matric Matriculate 10+2 Graduate
 Post Graduate
5. Monthly Honorarium:
6. Weather AWW belongs to the same Village/Locality Yes No
7. Training of AWW

Type of Training	Duration (No. of working days)	Month/ Year of Training
Job		
Ref		
Skill Training		
a) WHO Growth Standards		
b)		
c).....		
d).....		
IGMSY		

SABLA		
Others		

C. Physical Infrastructure of AWC:

1. Type of Building: Kuchcha Pucca Semi Pucca

2.1 Ownership of AWC Building: Constructed by Government Rent free Govt. building

School building Community/Panchayat building without rent Rented building

AWW's Own House Helper's House

2.2 (a) Is electricity available at AWC? Yes No

(b) If yes, whether electrical points are above five feet from floor? Yes No

3. Is the sign board of AWC displayed? Yes No

a) Is the sign board visible from the road Yes No

b) Condition of sign board Good Satisfactory Poor

4. Distance of AWC from the village:

Within Village

Nearby Village area

5. Total built size of AWC:

(30sq meter for thirty children) Outdoor Space - Adequate Inadequate

(35sq. meter for thirty children) Indoor Space - Adequate Inadequate

5.1 Number of rooms in AWC? One Two Three More

6. Is Separate Kitchen Available at AWC? Yes No

6.1 If No, what are the cooking arrangements?

Cooking is done under covered space Cooking is done in open space

Cooking is done by SHGs At AWW's house Any Other (Specify) _____

6.2 Is there a provision of cooking gas at AWC? Yes No

7. Is there a separate space for storage : Available Not Available

8. If No, what are the arrangement for storage:

- In the Anganwadi itself
 - At school
 - AWW/AWH House
 - Any other place [Please specify]
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9. What is the source of Drinking Water:

- Hand pump available in AWC campus
- Hand pump available nearby AWC
- Well/ Pond
- Tap water supply from PHD/local Admn.

10. What is the Drinking Water Storage facility available at the AWC? [Observe]

- Directly from the source (Tap)
- Stored in covered utensils with ladle
- Stored in uncovered utensils
- Stored in un-cleaned utensil in unhygienic condition

11. Is Toilet Facility available in the AWC? Available Not Available Available but not usable
(without water facility)

11.1 If Toilet available whether child friendly: Yes No

12. Is there a separate toilet facility for Girls and Boys Yes No

13. Current position of toilet facility:[Observation by investigator]

- Toilet available with water facility in usable condition
- Toilet available without water facility but usable
- Toilet available but not usable

14. Arrangement where toilet facility is not available/usable

- Facility provided by community
- Go to road side
- Go to nearest house
- Go to own house

D. ECCE

1. Status of Early Childhood Care and Education:

Total number of children (3-6 yrs) in the AWC area as per Records	Total number of children (3-6yrs) registered in AWC	Average number of children attending AWC for last three months

2. Does AWW apply Thematic Approach - Yes No

3. Availability ECCE Material available at AWC

Material/ Aids	Availability [Yes / No]
Availability of time table for PSE at AWC	Yes / No
Availability of appropriate & adequate PSE material	Yes / No
Availability of appropriate & adequate PSE Kit	Yes / No
Availability of any Handbook for AWW issued by State Govt. for PSE	Yes / No

4. Enrollment status of AW children in primary school as on the date of visit

Total number of children eligible for enrollment in Primary School	Total number of children Enrolled in Primary School on the last occasion		
	Pvt School	Govt School	No idea

5. Are you aware of ECCE day? Yes No

5.1 How many ECCE days have been conducted in the last two quarters before the visit?

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5.2 Do you receive support of Parents and Community in organizing PSE activities?

Yes No

5.3 If yes what type of support is received?

1. Preparation of PSE Material/Aids
2. Help in Story Telling
3. Monitoring the activities of AWCs
4. By giving Fund
5. Involved in giving awards and Incentives to:
 - a) Children
 - b) AWW/AWH
6. Donation Corner (Toys, Books, Puppet and other play and Learning Materials)
7. Celebration of Girl child Day/Fancy Dress Competition/ Sports Competition
- 8 Any Other

5.4 Do you receive support from CDPO/Supervisors in holding ECCE Day: Yes No

If Yes then how?

- a) Ensure sanction of required budget on time to each AWC.
- b) Ensure timely supply of required amount of PSE Kit, activity booklet and assessment card etc.
- c) Ensure Proper arrangements of folk artisans and audio visual aids if required.

- d) Alternative arrangement of AWW if she is on leave.
- e) Alternative arrangement of space if it is not sufficient

6. What is the Role of Helper in PSE Programme –

- a) Provide help in handling/care of Children
- b) Collect the children
- c) Looks after children in the absence of AWW
- d) Coordinate with AWW during PSE or other additional Task
- e) No help provided by AWH

7. Efforts made by AWW to improve Early Childhood Stimulation?

- a) Number of mothers of children age group (birth- 1 year)
- b) Number of mothers of children age group (1-3 Years)

8. Whether PSE materials developed and nature walk conducted in last three months by AWW to improve PSE? i) PSE materials developed: Yes No

ii) Nature Walk Conducted: Yes No

If Yes then:

Materials developed (Prepared by AWW) (Name them)	Nature walk conducted (By AWW) (what places she took children)

E. Supplementary Nutrition:

1. Beneficiaries availing SN

Category	Total No. in the area covered by AWC	Total No. of beneficiaries registered	Total No. of beneficiaries Availing
Pregnant women			
Lactating mothers			
Children (6mo - 3 yrs)			
Children (3-6 years)			
Adolescent girls			

2. Type of Food Supplied to beneficiaries:

Categories	Morning Snacks	HCM	THR	Others*	Average Quantity given per beneficiary, per day basis
6 months-3yrs.					
3yrs.-6yrs.					

Pregnant Women & Nursing Mother					
Adolescent Girls					

* Please mention Morning snacks, energy dense, micronutrient, Fortified food etc.

3. Is the quality of the supplementary nutrition satisfactory Yes No
4. Is the supplementary nutrition acceptable to the beneficiaries Yes No
5. Is the quantity of the supplementary nutrition as per norm/menu (as observed by investigator) Yes No
6. Does AWW have adequate cooking utensils Yes No
7. Does AWW have adequate serving utensils Yes No
8. Any interruption in supplementary nutrition in the last six months Yes No
9. If yes, (I) Interruption in no. of working days:

(II) Reasons for interruption

- i Shortage of Supply
- ii Lack of Fund
- iii Transport Problem
- iv Any Other Specify

F. Growth monitoring

1. Has new WHO Growth standards been implemented in the AWC? Yes No
2. Type of Weighing Scales being used at AWC:
 - a). Salter Scale/ Spring Balance
 - b). Weighing Pan
 - c). Bar Scale
 - d). Weighing Machine (Bathroom/ Electronic)
 - e).MUCA Tap
 - f).Any other
3. Skills of AWW for growth monitoring of children [observation]

a) Weighing	<input type="checkbox"/> Accurate	<input type="checkbox"/> Inaccurate
b) Plotting	<input type="checkbox"/> Accurate	<input type="checkbox"/> Inaccurate
c) Interpretation	<input type="checkbox"/> Accurate	<input type="checkbox"/> Inaccurate
d) Counselling mothers/care givers	<input type="checkbox"/> Accurate	<input type="checkbox"/> Inaccurate

[AWW should be asked to demonstrate the skill]

4. If weighing scales are not available then how do you weigh children?

- a) Borrowing from another AWCs
 b) ANM brings along
 c) Any Other

5. Status of Growth monitoring of the children of the AWC visited:

Category	Number of children (latest from the Record)		
	Boy	Girl	Total
Normal			
Moderately underweight			
Severely Underweight			
Total			

6. Do you give extra meal to the severely underweight children Yes No
7. Are you aware of the Nutrition Rehabilitation Centre (NRC)? Yes No
8. Is there any NRC in your project area? Yes No Do not know
9. Do you refer severely underweight children? Yes No
10. If yes, whether refer is made to -- Health Centers NRC
11. Number of children referred during last 3 months:
 a) NRC b) Health Centre
12. Has State initiated Sneha Shivirs? Yes No

[Sneha Shivir- 12 day nutrition counseling programme for underweight children]

13. Number of children referred to Sneha Shivir during last 3 months:

14. Please discuss the 12 day counseling programme with AWW
 [Topics & suggestions given by them/ no. of beneficiaries attended programme etc.]?

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G. Immunization

1. Status of vaccination among children & pregnant women:

S.No.	Vaccines	Last month or (latest from the Record)			
		No. of eligible children	No. of eligible women	Total Children immunized	Total women immunized
1.	BCG				
2.	DPT/OPV(First dose)				
3.	DPT/OPV(Second dose)				
4.	DPT/OPV(Third dose)				
5.	Measles (First dose)				

6.	Measles (Second dose)				
7.	Vitamin A				
8.	Hepatitis B				
9.	MMR(Introduced only in 2 states)				
10.	Hib(Available in some States only)				
11.	TT (First dose)				
12.	TT (Second dose)				
13.	Pentavalent(In selected states only)				
14.	Japanese Encephalitis (in select endemic districts after the campaign)				
15.	Any other (specified by State Govt.)				

[The immunization schedule is adapted from MOHFW 2011, and IAP, 2013]

2. At which place immunization for children and pregnant women are conducted?

- Sub centre
- Primary Health centre
- Anganwadi centre
- Others (please Specify.....)

H. Health Check-Up

1. Frequency of Health check- up of children:

- i. Monthly
- ii. quarterly
- iii. six monthly
- iv. unplanned
- v. never during last six month

2. How many Children got Health Check up (last six months)

3. Average number of ANCs / Health check- up provided to pregnant women in your area? [Please ✓]

- One
- Two
- Three
- Four
- Five

4. What is the average month for first ANC/ Health check- up of pregnant women in your area?

- < 3 months
- 3-4 months
- 5-6 months
- 7-8 months
- 9th months

5. Are the adolescent girls given following services (consult ASHA/ANM/AWW):

- a) IFA tablets
- b) Deworming Tablets

I. Referral Services

1. Do you refer beneficiaries to health facility? Yes No
2. Do you have referral slip to refer beneficiaries to health facilities? Yes No
3. Do you use these referral slips? Yes No
4. Number of referral case:

S.No.	Category of beneficiaries	No. of beneficiaries referred during last six months
1.	Pregnant women	
2.	Lactating mothers	
3.	Children (7-36 months)	
4.	Children (3-6 years)	
5.	Adolescent girls	

5. Number of cases has been followed up by AWW

J. Nutrition and Health Education (NHE)

1. Number of NHE Sessions conducted during last - three months
2. List of major topics covered in the NHE sessions conducted in the last three months: (Changed)
 1. Nutrition and Health Care of Infants
 2. Immunization
 3. Personal Hygiene and Environmental Sanitation
 4. ICDS Services
 5. Health Care of Pregnant Women and Adolescent Girls
 6. Infant Death Rate
 7. Family Planning and Spacing
 8. Anemia
 9. Balance Diet and Use of Green Leafy vegetables
 10. Importance of Vitamins and Minerals (Vit A, Vit C, Iron, Iodine and IFA etc.)
 11. Common Illness (Seasonal Fever, Diarrhea, ARI etc)
 12. Any Other
3. Are the Adolescent Girls given counseling on Reproductive and Sexual Health: Yes No

K. Mother & Child Protection Card:

1. Availability of MCP Card at AWC: Yes No
2. Has the MCPC been provided to the eligible beneficiaries? Yes No
3. Who filled the MCP card: ANM ASHA AWW
4. Has the MCPC been filled properly with right information by them (AWW, ASHA and ANM)?
Yes No

5. If no, indicate the gap/the information not filled-up.

- 1.....
- 2.....
- 3.....
- 4.....

6. Has the MCPC been used by women/mothers (Discussions to be held with women)? Yes No

7. Has MCPC been timely updated? Yes No

L. IGMSY:

1. Is IGMSY implemented in the project? Yes No

2. No of registered beneficiaries under IGMSY [Please write No. in the box provided]

3. Status of reimbursement of installments [from last one year]:

Total No. of Pregnant women	Total No. of Pregnant women enrolled in IGMSY	First Installment		Second Installment		Third Installment	
		No. of Pregnant women entitled	No. of Pregnant women actually received payment	No. of Pregnant women entitled	No. of Pregnant women actually received payment	No. of Pregnant women entitled	No. of Pregnant women actually received payment

4. a) Are you aware of the cash incentives to AWW and AWH under IGMSY? Yes No

b) If yes, indicate the amount of cash incentive

AWW	
AWH	

5. Problems if any, in implementation of IGMSY?

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6. Is MCP card used as tool for verification for IGMSY? Yes No

M. SABLA/KSY

1. Does this project implement SABLA/KSY scheme? Yes No

2. How many adolescent girls are registered under SABLA/KSY(Scheme)?

[Number]

3. No. of Kishori Samooh formed as on date of visit. [Please write No. in the box provided] (SABLA)

4. Status of Kishori diwas & Kishori card:

Total No. of Adolescent girls	No. of girls having kishori card	No. of kishori cards having updated information	Number of Kishori Diwas conducted in the last one year	No. of Kishori Diwas attended by health officials
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

N. Medicine Kit

1. Is medicine kit available at AWC during the visit? Yes No

2. When the medicine kit was supplied last? Date

3. List the medicines mostly given to the beneficiaries?

- 1.
- 2.
- 3.
- 4.
- 5.

4. List the medicines that are rarely given to the beneficiaries?

- 1.
- 2.
- 3.
- 4.
- 5.

5. List the medicines that are never given to the beneficiaries?

- 1.
- 2.
- 3.
- 4.
- 5.

O. Involvement of Community

1. Perception of the community on delivery of ICDS services

[Discussion with at least 10 beneficiaries / non-beneficiaries to be held for getting their views and record their perception]

- I. ECCED: Very Good Good Satisfactory Average Poor
- II. SN: Very Good Good Satisfactory Average Poor
- III. Counseling: Very Good Good Satisfactory Average Poor
- IV. Health: Very Good Good Satisfactory Average Poor
- V. Advocacy: Very Good Good Satisfactory Average Poor
- VI. Village Health & Sanitation: Very Good Good Satisfactory Average Poor
Committees [Community based monitoring]

2. List the efforts made by AWW to involve community in the implementation of ICDS programme?
(Put mark in front of the options)

- 1. Conducting Meetings with Parents / Community/PRI
- 2. Celebrating Special Day with Community
- 3. Home Visits and Counselling
- 4. Motivating Children to send children to AWC
- 5. Inviting Community and PRI members at the time of launching new Schemes
- 6. Involve Community in Anganwadi day to day activity (including Monitoring)
- 7. During imparting NHed, advocacy Campaign
- 8. By inviting local Leaders
- 9. Meeting with Sakhi/ Saheli
- 10. Any Other

3. Please enlist the contribution made by the community and their involvement in implementation of ICDS? By giving :

- 1. Toys
- 2. Food Items
- 3. Chair
- 4. Study Materials
- 5. Fund
- 6. Any Other

4. What is the role of community in monitoring activities of AWC?

- a) Distribution of SN b) Help in GM and Child Health Check- up c) Quality of SN
- d) AWCs Timing e) PSE/NHed f) Giving Suggestion for improvement of AWC

g) Maintaining the Cleanliness around AWC h) Any Other

5. Is Community involved in monitoring of Village Level Committee? Yes No

P. Records & Registers:

1. Are the new records and registers available at AWC? Yes/ No

2. If No, what are the reasons?

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.....
.....

3. Have you been trained for filling up and maintaining new records and registers? Yes No

4. Are the records and registers been updated? Yes/ No

5. If No, what are the reasons?

.....
.....
.....

Q. Home visit

1. Number of home visits made by AWW per week as per the guidelines?

2. Number of home visits made by AWW in the last week (Before monitoring visit)?

3. List down the purpose and activities during home visits made last week:

1.
2.
3.
4.
5.

4. Does the AWW use Home Visit Planner for conducting home visit? Yes No

R. Additional Work

1. Name of additional work performed by AWW in the last six months indicating the working days?
(Put ✓ mark in front of the options)

1. Survey(Toilet, SHG, Cleanliness, I stri shakti, MGNREGA etc)
2. Census
3. Voter ID
4. Adhar Card/Smart Card/ BPLCard
5. Ration Card
6. Election Duty
7. Any Other

S. Crèche facilities

1. Is it Crèche cum AWC Yes No

1.1.If yes, what are working hours of the crèche?

Upto 2 hrs

Upto 4 hrs

Upto 6 hrs

Upto 8 hrs

Upto 10 hrs

1.2. Is Mother of those children coming in crèche working Yes No

2. Type of building for AWC- cum – Crèche? Own Rented

3. Is there an additional worker? Yes No

4. If No, Who manages the crèche?

.....

5. What is the monthly honorarium provided by State Government to additional worker or to you for providing crèche facilities at AWC? Rs _____/-

6. As an additional crèche worker what are your roles & responsibilities?

Providing care & attention

Providing supplementary nutrition for children under 3

Conducting play way activities

Making them sleep/rest

Overall management

Any other (Please Specify)

7. Total no. of children present in the centre for full day (on the day of visit)?

8. Average number of children in the current month.

9. What is the cost of SN per child provided at AWC- cum- crèche? Rs _____/-

10. For how many days SN is provided in a year?

11. Does the AWC- cum- crèche has adequate space? Yes No [6-8 sq-ft/child]

12. Has the additional worker received basic care training for children under six? Yes No

13. If yes, please specify the place of training with address

.....
.....

14. What was the focus of child care training for children under six?

- PSE for 3-6 yrs
- Crèche management
- Care & stimulation of under 3
- None of the above
- All of the above

15. Is there any non – government organisation implementing this model? Yes No

16. If Yes, Specify (Name & Address)

.....
.....
.....

17. Do you get support from other local bodies as well AWC- cum- crèche? Yes No,

If yes please ✓ from whom

- Panchayat
- Local NGO
- MNREGA
- Primary school teacher
- Any Other

18. Does the AWC- cum- crèche have adequate supply of the following:

- Care items (Soap, Towel, Diapers, Antiseptic)
- Soft toys/ Playing Material
- Cleaning material
- Medicine Kit
- Cradles
- Sleeping & Rest material
- Additional Bed
- Cooking & Food

T. Problems and suggestions

1. Problems experienced by AWWs and her suggestions for effective implementation of ICDS?
(Please put ✓ mark on the given option)

Problems :

- a) No Drinking Water Facility
- b) No Electricity at AWC
- c) No Toilet Facility
- d) No Adequate Space at AWC
- e) No proper Infrastructure to run AWC
- f) No fuel Provided
- g) Lack of Fund
- h) Lack of Support from Community
- i) Lack of Interest of ANM
- j) Inadequate Supply of Material/ Kit
- k) Inadequate Training
- l) Low Honorarium
- m) Low Attendance of children
- n) Excess work load
- o) Weighing scales not in working conditions
- p) Surroundings not Clean
- q) Lack of Utensils for serving
- r) Political Interference
- s) Any other (specify)

Suggestion:

- a) Increase honorarium
- b) Regular Supply of Food items insured
- c) Provide Uniform to the children
- d) Require Fund for the maintenance for the AWC
- e) No additional work should be given
- f) PSE Kit/ material should supply on time
- g) Training required in New Revised MIS/ SABL A
- h) Training required in Growth Monitoring
- i) Regular Supply of Medicine Kit should be ensured
- j) Any Other (specify)

Signature:

Name of the Investigator:

Date of visit: