

## **Annexure 1**

### ***Approved financial norms for state, district and PHC/session site activities related to Quality Management System for AEFI surveillance under UIP (FMR 13.3.2)***

Quality Management System for AEFI surveillance will be implemented at state level, district level and PHC/session site levels. The activities are mainly divided into trainings, assessments and mentoring visits.

1. **Assessments:** There are three types of assessments at state, district and PHC/session site – internal assessment, peer assessment and external assessment.

#### **1.1 Internal assessments**

S. No.	Activity	Unit cost	Frequency/Unit of Allocation	Details
1.1.1	Internal Assessment of PHC (including for all subcenter session sites under PHC)	Rs.500/-	1 per PHC in each quarter	Incidental cost for stationary, photocopying, printing reports, meetings for preparation of action plans, etc.
1.1.2	Internal Assessment of District level	Rs.2000/-	1 per District in each quarter	Incidental cost for stationary, photocopying, printing reports, meetings for preparation of action plans, etc.
1.1.3	Internal Assessment of State level	Rs.2000/-	1 per State in each quarter	Incidental cost for stationary, photocopying, printing reports, meetings for preparation of action plans, etc.

- 1.2 **Peer assessments** will be done by officers and staff at the same level but from different facilities. Budget is allocated for this assessment as follows:

- 1.2.1 **Peer assessment of PHC/session site – Rs. 5000/- per PHC (including subcenter session sites).** Peer assessment of PHC/Immunization Site will be done once a year for each PHC by another medical officer/district immunization officer of the same district.

Peer assessment of PHC/session site				
S. No.	Activity and level of activity	Unit cost	Frequency	Details
1.2.1	Peer Assessment PHC	5000/-	Once a year when at least 50% of subcentre session sites under this PHC achieves 70% scores in internal assessments	1 per PHC

#### **1.2.2 Peer assessment of district\* level**

Peer assessment of district level						
S. No.	Activity/Head	Unit cost	Number of participants	Days	Frequency/ year	Amount
1	Travel cost for Assessor Team (to and fro)/ Hiring of vehicle for the team (Reimbursement as per actual)	2500	2	1*	1*	5000
2	Honorarium for assessors	2000	2	1*	1*	4000
3	Boarding and lodging (if required)	2000	2	1*	1*	4000
	<b>Sub total</b>					<b>13000</b>
4	Contingency	3000				3000
<b>Total (for one district activity)</b>						<b>16000</b>

\*Peer assessment of district level and one subcenter session site in two PHCs and two PHCs will be done by two persons once a year for all eligible districts by district immunization officer or district quality assurance member of another district of same state.

### 1.2.3 Peer assessment of state\* level

Peer assessment of state level					
S. No.	Activity/Head	Unit cost	Number of assessors	Days	Amount
1	Travel cost for assessor (Train fare/Economy class air fare/taxi hiring as per actuals upto maximum of Rs.20000/-)	20000	2		40000
2	Honorarium for peer assessors (including one day's honorarium for travel day)	4000 for government assessors and 7000 for non-government assessors	2	2	28000 max.
3	Boarding and lodging	4000	2	2	16000
4	Local transport	2000	1	2	4000
5	Contingency (photocopies, printouts, etc.)	3000			3000
<b>Total</b>					<b>91000</b>

\* Peer assessment of State level processes will be done once a year by SEPIO/state quality assurance team of another state or the AEFI Secretariat.

**1.3 External assessment of state** will be done by certified assessors nominated by QA Division, NHSRC. States have been divided into large, medium, small and very small based on population. In addition to state level assessment, assessment of two districts (including PHC/session sites in each district) will be done in large and medium states. In small and very small states/UTs, assessment will be done at state level and one district (including PHC/session sites in that district).

External assessment of state level					
S. No.	Activity/Head	Unit cost	Number of assessors	Days	Amount
1	Travel cost for external assessor (Train fare/Economy class air fare/taxi hiring as per actuals up to Rs.20000/-)	20000	2		40000
2	Honorarium for external assessors (including honorarium for travel days as applicable)	4000 for government assessors and 7000 for non-government assessors	2	*3 (small, very small states/UTs - state and one district) *5 (large, medium states – state and two districts)	70000 max.
3	Boarding and lodging	4000	2	5	40000 max.
4	Local transport	2000	2	5	20000 max.
5	Contingency	10000			10000
<b>Total</b>					<b>180000</b>

\*In small states (Himachal Pradesh, Uttarakhand, Jammu & Kashmir, Delhi, Punjab, Kerala, Haryana) and very small states (Lakshadweep, A&N Island, Daman & Diu, D&N Haveli, Sikkim, Mizoram, Chandigarh, Goa, Puducherry, Arunachal Pradesh, Nagaland, Manipur, Tripura, Meghalaya), external assessors will assess state level processes on first day. On the second day, one external assessor will assess district level processes while the second assessor will assess two PHC/session sites.

\*In large states (Tamil Nadu, Karnataka, Gujarat, West Bengal, Rajasthan, Maharashtra, Madhya Pradesh, Bihar, Uttar Pradesh) and medium states (Chhattisgarh, Telangana, Assam, Odisha, Jharkhand,

**Andhra Pradesh**), external assessors will jointly assess the state level processes on the first day and then travel to two districts for assessment of district and PHC/session site assessment (one district a day). One extra day for travel between two districts in the state and one day more to travel to state head-quarters is budgeted.

- 2 Training on QMS in AEFI under UIP** – One day trainings will be conducted at state level and at district level.

- 2.1 State level training (up to 40 participants per batch)** on QMS in AEFI for two persons from each district (DIO, DQAU member) and select state participants (state programme officer (QA), SQAU members, AEFI committee members, etc.) -once a year.

Training at state level on QMS in AEFI surveillance for DIOs, DQAU members, state programme officers (QA), select AEFI committee members, etc.				
S. No.	Activity/Head	Unit cost	Number of participants	Amount
1	Hiring of venue	10000		10000
2	Travel cost of participants	2000	40	80000
3	DA to participants	500	40	20000
4	Refreshment and Lunch	250	40	10000
5	Per diem to faculty	1000	2	2000
6	Incidental expenses for training (Training material, job aids, photo copying, LCD projector etc.) (Rate x Days of training x no. of trainees)	250	40	10000
7	Local Mobility support	2000		2000
	Contingency	10000		10000
<b>Total</b>				<b>144000</b>

- 2.2 District level training (upto 50 participants) on QMS in AEFI for PHC Medical Officers, PHNs, ANM, supervisors, etc. (once a year)**

Training (one day) at district level on QMS in AEFI surveillance for DIOs, DQAU members, state programme officers (QA), select AEFI committee members, etc.				
S. No.	Activity/Head	Unit cost	Number of participants	Amount
1	Honorarium to Distt. Trainers	600	2	1200
2	Refreshment and Lunch	250	50	12500
3	Incidental expenses (photocopy, job aids, etc.)	300	50	15000
<b>Total</b>				<b>28700</b>

- 3 Mentoring cum monitoring visits by DIO/DQAU to PHCs/session sites for assessments and verifications**

Mentoring/monitoring visits by DQAU members to PHC/session sites				
S. No.	Activity/Head	Unit cost	Days	Total
1	Travel support (to and fro)/ Hiring of vehicle (Reimbursement as per actual)	1000	60	60000
2	DA	200	60	12000
<b>Total</b>				<b>72000</b>

## Annexure 2

Eligibility criteria for Peer and External assessment at all level will be as follows:

Eligibility criteria for assessment-QMS for surveillance					
SN	PHC/Immunization Site	Internal assessment; eligibility for peer assessment	Peer assessment	External Assessment	Responsibility of Medical Officer/ District Immunization Officer/District Quality Team
1	<ul style="list-style-type: none"> <li>QMS will be implemented in all PHCs/sub centre immunization sites.</li> <li>All PHCs/sub center immunization sites should have SOPs in place.</li> <li>Quality policy and quality objective are displayed in all PHCs/sub center immunization sites.</li> <li>Internal assessment scores and gap action plan are available at all PHC/sub centre immunization sites.</li> </ul>	<ul style="list-style-type: none"> <li>Internal assessment should be done quarterly by Medical Officer of the PHC.</li> <li>PHC becomes eligible for peer assessment if 50% of the sub centre immunization sites score at least 70% in internal assessment (using PHC/immunization site checklist).</li> </ul>	<ul style="list-style-type: none"> <li>Peer assessment of a PHC/immunization site will be conducted by Medical Officer of another PHC of the same district / District Quality Assurance Team / District Immunization Officer.</li> <li>Peer assessment will be done for the PHC and for those sub center immunization sites under the PHC which have scored at least 70% scores each in internal assessment.</li> </ul>	NA	<ul style="list-style-type: none"> <li>Medical officer will review checklists and gap action plans following quarterly internal assessment of sub center immunization sites and PHC and ensure implementation of action plans for gap closure.</li> <li>Medical officer, PHC will share internal assessment scores and gap improvement plans of the PHC and the sub centre immunization sites to the District Immunization Officer for each quarter.</li> <li>Peer assessment scores of a PHC and sub centre immunization sites will be shared by the assessor with the DIO/DRCHO.</li> </ul>
2	<b>District Level Assessment</b>	<b>Internal assessment and eligibility for peer assessment</b>	<b>Peer assessment</b>	<b>External Assessment</b>	<b>Responsibility of District Immunization Officer/District Quality Team</b>
	<ul style="list-style-type: none"> <li>QMS will be implemented at district level, all PHCs and sub center immunization sites</li> <li>District level SOPs are available and implemented</li> <li>Quality Policy and Quality Objectives are displayed at</li> </ul>	<ul style="list-style-type: none"> <li>DIO/District Quality Assessment Team will conduct internal assessment for district level using district level checklist.</li> <li>District will be eligible for peer assessment when district level achieves at</li> </ul>	<ul style="list-style-type: none"> <li>Peer assessment of the district will be done by District Immunization Officer/District Quality Assurance Team of another district.</li> <li>Peer assessor will validate internal assessment scores</li> </ul>	<ul style="list-style-type: none"> <li>External Assessment will be done for the district, if the district scores at least 70% during peer assessment using district level checklist and 50% of PHCs score at least 70% during peer assessment.</li> <li>External assessment will be done</li> </ul>	<ul style="list-style-type: none"> <li>District Immunization Officer/District Quality Team will conduct internal assessment for district level and collate and verify scores of internal and peer assessment of PHCs.</li> <li>Plans for peer assessment of PHCs/sub center immunization site will be prepared and implemented by District</li> </ul>

	district level • District gap action plan for closure and internal assessment scores are available at the district for district level, all PHCs and sub centre immunization sites.	least 70% score in internal assessment and 50% of district PHCs score at least 70% in internal assessment.	of district level and also validate two PHCs and one sub centre immunization site in each of the two PHCs scoring at least 70%.	by certified external assessors from NHSRC, MOHFW.	Immunization Officer. • Peer assessor from another district will share assessment report to state with copy to District Immunization Officer of the assessed district.
<b>3</b>	<b>State Level Assessment</b>	<b>Internal assessment and eligibility for peer assessment</b>	<b>Peer assessment</b>	<b>External Assessment for certification</b>	<b>Responsibility of State Immunization Officer/State Quality Team</b>
	• QMS is implemented at the state level • SOPs will be developed, available and implemented for state level • Quality policy and quality objectives are displayed. • Prepare and implement action plan for gap closure for state level • Prepare a line list of internal assessment of districts to track progress.	• State Immunization Officer or State Quality Assurance cell will conduct the internal assessment of state. • If state achieves at least 70% score in internal assessment and 50% of the districts in the state will get 70% score in peer assessment then the State will be eligible for peer assessment.	• Peer assessment of the state will be done by State Immunization Officer/State Quality Assurance Team of another state/AEFI Secretariat.	• State will be eligible for external assessment if the state level scores at least 70% during peer assessment and 50% districts of the state scores at least 70% scores during peer assessment. • External assessment will be done by external assessors certified by NHSRC MOHFW.	• State Immunization Officer/State Quality Assurance cell will collate and verify district level internal and peer assessment scores of all districts. • State Immunization Officer/State Quality Assurance Cell will plan and coordinate peer assessment of a district by another district.