



U.S. PRESIDENT'S MALARIA INITIATIVE



SUPERVISION CHECKLIST FOR ASSESSING CONTINUOUS DISTRIBUTION OF ITNS AT HEALTH FACILITIES

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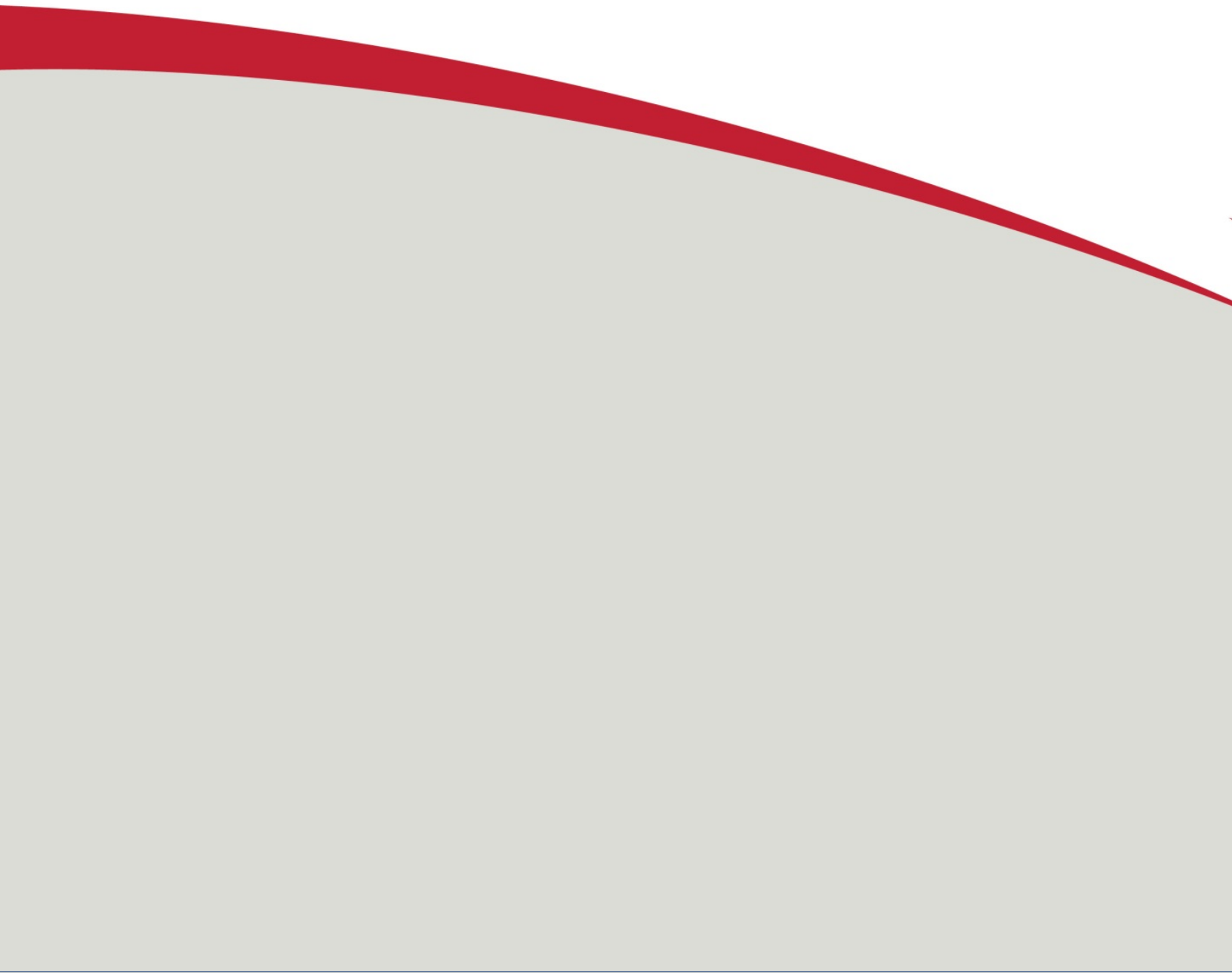
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SUPERVISION CHECKLIST FOR ASSESSING CONTINUOUS DISTRIBUTION OF ITNS AT HEALTH FACILITIES

PMI VectorLink Project

Population Services International (PSI)

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ACRONYMS

ANC	Antenatal care
ANC1	First antenatal care visit
DHIS2	District Health Information System 2
EPI	Expanded Program on Immunization
HMIS	Health Management Information System
HNQIS	Health Network Quality Improvement System
ITN	Insecticide-treated Net
LLIN	Long-Lasting Insecticidal Net
MOH	Ministry of Health
NMP	National Malaria Program
PMI	President's Malaria Initiative
PSI	Population Services International

INTRODUCTION

Many national malaria programs (NMPs) use supervision checklists to assess components of facility-based services, including quality of the service, commodity availability, logistics management, and data quality. Checklists enable supervisors to identify gaps and areas for improvement through follow-up actions, such as on-the-job training, mobilization of commodities, and provision of materials. They also help key stakeholders, such as the NMP and partners, strategically make decisions for more effective and targeted resource allocation.

The checklist developed by the U.S. President’s Malaria Initiative VectorLink Project (PMI VectorLink Project) focuses on assessing various components of continuous distribution of insecticide-treated nets (ITNs) at health facilities through on-the-job supervision. For questions that are not applicable, for example, in countries that do not distribute ITNs through the expanded program on immunization (EPI), those questions may be skipped and should not be used to calculate overall checklist and section scores.

The supervision checklist is divided into five (5) sections:

- Visit information – This section captures general information about the health facility, head of health facility (or health facility in-charge), and the supervisor. Some of this information may be automated when captured digitally, e.g. District Health Information System 2 ([DHIS2](#)).
- Service data management – This section captures information regarding data management of ITN service delivery for three months. Data on key metrics are captured per data collection and reporting tool. Satisfactory performance is considered within +/- 5%, which is a common threshold for measuring adequate data quality (though this can be adapted per context).
- Logistics data management – This section captures information regarding logistics management. ITN (commodity) data are captured at the facility using a variety of tools and are managed using logistics management processes. Performance is considered high when 80% of criteria are met; this threshold is flexible, and targets should depend on the context.
- Observation of ITN issuing – This section captures information on observation of interactions between providers and pregnant women at ANC or children (and caregivers) at EPI. Areas assessed are correct issuing of ITNs (eligibility and documentation) and education on ITN use and care.
- Action Plan – This section captures information on identified gaps, causes (knowledge, awareness, motivation, resources, etc.), actions taken, and next steps. This section may be automated when captured digitally, e.g. Health Network Quality Improvement System ([HNQIS](#)).

There are also four (4) annexes:

- Recommended list of key indicators.
- Recommended list of additional indicators that dig deeper into potential causes to poor performance.
- Recommended corrective actions dependent on identified problems.
- Recommended analyses for data management, logistics management, and observations of ITN issuing.

This checklist will also be digitized using the DHIS2 Capture app, and a metadata package will be made available for NMPs and other partners to download and import into any DHIS2 server (that is sufficiently up-to-date to

use the DHIS2 Capture app) for immediate use. The paper and digital formats will be available in English and French. It is anticipated that future work will also have the checklist metadata package in additional digital formats (e.g. HNQIS, KoboCollect) available in English and French, so other implementers and NMPs who may not be interested in using the DHIS2 Capture app (for example, those NMPs using HNQIS for supportive supervision) have a readily available format for their context.

SECTION 1. VISIT INFORMATION

Name of Health Facility

Type of Health Facility

Health Center Hospital Other

Province/Region

District/Council

Name of Head of Facility or In-Charge

Cadre of Head of Facility or In-charge

Sex of Head of Facility or In-Charge

Female Male

Signature of Head of Facility or In-Charge

Phone Number of Head of Facility or In-Charge

Date of Visit (DD/MM/YYYY)

Supervisor's Name

Supervisor's Cadre

Supervisor's Sex

Female Male

Supervisor's Signature

Supervisor's Phone Number

SECTION 2. SERVICE DATA MANAGEMENT

	N°	Question	Month 1	Month 2	Month 3
1. # of ANC Registrants	1a	Month	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December
	1b	Year (<i>Format YYYY</i>)			
	1c	Is register available? <i>If no, skip 1k.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1d	If so, # as per register	_____	_____	_____
	1e	Is tally sheet available? <i>If no, skip 1k and 1l.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1f	If so, # as per tally sheet	_____	_____	_____
	1g	Is summary reporting form available? <i>If no, skip 1l and 1m.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1h	If so, # as per summary form	_____	_____	_____
	1i	Is HMIS data available? <i>If no, skip 1m.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1j	If so, # as per HMIS	_____	_____	_____
	1k	Is the value per the tally sheet +/-5% of the value per the register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1l	Is the value per the summary reporting form +/-5% of the value per the tally sheet?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	1m	Is the value per the HMIS +/-5% of the value per the summary reporting form register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. # of pregnant women who received ITNs during ANC	2a	Month	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December
	2b	Year (<i>Format YYYY</i>)			
	2c	Is register available? <i>If no, skip 2k.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2d	If so, # as per register	_____	_____	_____
	2e	Is tally sheet available? <i>If no, skip 2k and 2l.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2f	If so, # as per tally sheet	_____	_____	_____
	2g	Is summary reporting form available? <i>If no, skip 2l and 2m.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2h	If so, # as per summary form	_____	_____	_____
	2i	Is HMIS data available? <i>If no, skip 2m.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2j	If so, # as per HMIS	_____	_____	_____
2k	Is the value per the tally sheet +/-5% of the value per the register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2l	Is the value per the summary reporting form +/-5% of the value per the tally sheet?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2m	Is the value per the HMIS +/-5% of the value per the summary reporting form register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

3. # of children under 5 eligible for an ITN through EPI	3a	Month	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December
	3b	Year (<i>Format YYYY</i>)			
	3c	Is register available? <i>If no, skip 3k.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	3d	If so, # as per register	_____	_____	_____
	3e	Is tally sheet available? <i>If no, skip 3k and 3l.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	3f	If so, # as per tally sheet	_____	_____	_____
	3g	Is summary reporting form available? <i>If no, skip 3l and 3m.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	3h	If so, # as per summary form	_____	_____	_____
	3i	Is HMIS data available? <i>If no, skip 3m.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	3j	If so, # as per HMIS	_____	_____	_____
3k	Is the value per the tally sheet +/-5% of the value per the register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3l	Is the value per the summary reporting form +/-5% of the value per the tally sheet?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3m	Is the value per the HMIS +/-5% of the value per the summary reporting form register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

4. # of children who received an ITN through EPI	4a	Month	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December	<input type="checkbox"/> January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December
	4b	Year (<i>Format YYYY</i>)			
	4c	Is register available? <i>If no, skip 4k.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	4d	If so, # as per register	_____	_____	_____
	4e	Is tally sheet available? <i>If no, skip 4k and 4l.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	4f	If so, # as per tally sheet	_____	_____	_____
	4g	Is summary reporting form available? <i>If no, skip 4l and 4m.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	4h	If so, # as per summary form	_____	_____	_____
	4i	Is HMIS data available? <i>If no, skip 4m.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	4j	If so, # as per HMIS	_____	_____	_____
4k	Is the value per the tally sheet +/-5% of the value per the register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4l	Is the value per the summary reporting form +/-5% of the value per the tally sheet?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4m	Is the value per the HMIS +/-5% of the value per the summary reporting form register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION 3. LOGISTICS DATA MANAGEMENT

N°	Questions	ANC	EPI	Facility Stores	Feedback Script if failed
1	What is the physical stock of ITNs in the unit?				
2	Is there an inventory control card available for ITNs at the unit? <i>If yes, answer 2a – 2c.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Explain importance of the inventory control card.</i>
2a	If inventory control card is available, is the inventory control card up-to-date?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Explain importance of updating the inventory control card every day</i>
2b	If inventory control card is available, what is the ITN stock as per the inventory control card?				
2c	If inventory control card is available, is the ITN stock per the inventory card +/-5% of the physical stock?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Explain importance of maintaining accurate inventory control cards.</i>
3	Does the unit know their minimum stock level?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Explain importance of knowing minimum stock for the unit.</i>
4	Is the physical stock at the unit at least at the minimum stock amount for the unit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Explain importance of keeping physical stock at least at the minimum amount.</i>

SECTION 4. OBSERVATION OF ITN ISSUING

This should be conducted as many times as the NMP recommends. The minimum suggested amount is two (2) observations of ITNs being issued (whether beneficiary eligibility was met or not).

N°	Questions	ANC	EPI	Feedback Script if failed
1	Name of provider being observed			
2	Gender of provider being observed	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other	
3	Cadre of provider being observed			
4	Which ANC visit (across facilities) is this for the patient? <i>Enter as a number, e.g. 1 for 1st ANC.</i>			
5	Is the beneficiary eligible for an ITN?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Is an ITN issued? <i>If no, skip 6a-6c.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6a	Is the ITN documented in the unit register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of documenting in the register.
6b	Is the ITN issued documented in the patient card?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of documenting in the patient card.
6c	Is the ITN documented in the tally sheet?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of documenting in the tally sheet.
7	Is issuing or lack of issuing correct?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of issuing only to eligible clients, i.e. pregnant women at 1 st ANC and pregnant women at visits who have not received an ITN.
8	Does the provider discuss the following?			
8a	How to use an ITN (knowledge)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of discussing how to use an ITN.
8b	How to care for an ITN (knowledge)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of discussing how to care for an ITN.
8c	Signs and symptoms of malaria (knowledge)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of discussing signs and symptoms of malaria.
8d	Risk of malaria (perceived risk)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of discussing the risk of malaria.
8e	Severity of malaria (perceived severity)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of discussing severity of malaria.
8f	Benefits of using an ITN (response efficacy)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of discussing the benefits of using an ITN.
8g	Benefits of caring for an ITN (self efficacy / attitude)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain importance of discussing the benefits of caring for an ITN.

SECTION 5. ACTION PLAN

Instructions: After each observation, discuss results with provider and agree on an action plan to fill in gaps. Note that critical gaps should be prioritized, as attempting to address multiple gaps at once is unlikely to bring around desired behavior change.

N°	Staff name and contact info	Identified gap(s)	Cause(s)	Action(s) taken	Next step(s), responsible person, and due date
1					
2					
3					
4					
5					

ANNEX 1. KEY MONITORING INDICATORS

Objective	Indicator	Numerator	Denominator	Notes
High performance of service data management : To monitor and ensure availability and quality of data for data-driven decision-making	Percent of supervised facilities properly conducting service data management	Number of supervised facilities with a pass mark on the service data management section	Number of supervised facilities assessed on the service data management section	Pass mark will depend on the context. 80% is a common threshold.
High performance of logistics data management : To monitor and ensure facilities are adhering to management principles	Percent of supervised facilities properly conducting logistics data management	Number of supervised facilities with a pass mark on the logistics data management section	Number of supervised facilities assessed on the logistics data management section	Pass mark will depend on the context. 80% is a common threshold.
High performance of ITN issuing: To monitor and ensure health workers are adhering to principles of ITN issuing at health facilities	Percent of supervised health workers properly conducting ITN issuing	Number of supervised health workers with a pass mark on the observation of ITN issuing section	Number of supervised health workers assessed on the observation of ITN issuing section	Pass mark will depend on the context. 80% is a common threshold.
Availability of data tools: To monitor and ensure availability of	Percent of supervised facilities with all tools available at the time of visit	Number of supervised facilities with registers, tally sheets, and summary forms available for	Number of supervised facilities assessed on	

data tools necessary for reporting		all months assessed during the supervision visit	service data management	
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ANNEX 2. ADDITIONAL MONITORING INDICATORS

Recommended disaggregations, as appropriate, include:

- Facility unit
- Facility level (e.g. hospital, health center)
- Facility ownership (e.g. public, private)
- Geographic area (e.g. by region, by district)
- Health worker cadre
- Health worker gender

Note that the unit of measure for these indicators are not facilities but rather “facility-months”, “facility units”, and health workers. These units of measure enable more granular performance monitor at the facility level (e.g. if 2 of the 3 months assessed for data quality at a facility was poor, that indicator would appear as 33% for the facility, whereas other means of analysis typically outputs 0% or 100%, i.e. Yes or No).

No	Indicator	Numerator	Denominator	Objective
	Data availability			
1	Percent of supervised facility-months with register available	Number of facility-months with register available	Number of facility-months assessed	To identify whether poor availability of data tools is due to a lack of registers
2	Percent of supervised facility-months with tally sheet available	Number of facility-months with tally sheet available	Number of facility-months assessed	To identify whether poor availability of data tools is due to a lack of tally sheets
3	Percent of supervised facility-months with summary form available	Number of facility-months with summary form available	Number of facility-months assessed	To identify whether poor availability of data tools is due to a lack of summary forms
	Data quality			
4	Percent of supervised facility-months with register and tally sheet matching +/-5%	Number of facility-months with # as per register and # as per tally sheet matching +/-5%	Number of facility-months assessed	To identify whether poor service data management is

		<i>If both values are 0, accuracy is 100%</i>		due to challenges in recording (i.e. at time of service)
5	Percent of supervised facility-months with tally sheet and summary form matching +/-5%	Number of facility-months with # as per tally sheet and # as per summary form matching +/-5% <i>If both values are 0, accuracy is 100%</i>	Number of facility-months assessed	To identify whether poor service data management is due to challenges in reporting (i.e. at time of aggregating)
6	Percent of supervised facility-months with summary form and HMIS matching +/-5%	Number of facility-months with # as per summary form and # as per HMIS matching +/-5% <i>If both values are 0, accuracy is 100%</i>	Number of facility-months assessed	To identify whether poor service data management is due to challenges in data entry
Inventory Management				
7	Percent of supervised facility units with an inventory control card for ITNs available	Number of supervised facility units with an inventory control card for ITNs available	Number of supervised facility units assessed on logistics data management	To identify whether poor logistics data management is due to a lack of ITN inventory control cards
8	Percent of supervised facility units with inventory control card for ITNs up-to-date, among those with the ITN inventory control card available	Number of supervised facility units with an inventory control card for ITNs up-to-date	Number of supervised facility units with an inventory control card for ITNs available	To identify whether poor logistics data management is due to ITN inventory control cards being outdated
9	Percent of supervised facility units with inventory control card for ITNs accurate, among those with the ITN inventory control card available	Number of supervised facility units with inventory control card and physical quantity matching +/- 5% <i>If both values are 0, accuracy is 100%</i>	Number of supervised facility units with an inventory control card for ITNs available	To identify whether poor logistics data management is due to inaccurate inventory control cards
10	Percent of supervised facility units knowing their minimum ITN stock level	Number of supervised facility units knowing their minimum ITN stock level	Number of supervised facility units assessed on logistics data management	To identify whether poor logistics data management is due to not knowing minimum stock level
11	Percent of supervised facility units with physical quantity of ITNs at least at minimum stock level	Number of supervised facility units with physical quantity of ITNs at least at minimum stock level	Number of supervised facility units with an inventory control card for ITNs available	To identify whether poor logistics data management is due to insufficient physical quantities
Observation				
12	Percent of observed health workers demonstrating correct ITN issuing behavior	Number of observed health workers who issued an ITN to eligible patients + Number of observed health workers who did not issue an ITN to non-eligible patients	Number of observed health workers	To identify whether poor issuing behavior is due to incorrect issuing

13	Percent of observed health workers who documented the issued ITN in the unit register	Number of observed health workers who documented the issued ITN in the unit register	Number of observed health workers who issued ITN	To identify whether poor issuing behavior is due to lack of documentation
14	Percent of observed health workers who documented the issued ITN in the patient card	Number of observed health workers who documented the issued ITN in the patient card	Number of observed health workers who issued ITN	To identify whether poor issuing behavior is due to lack of documentation
15	Percent of observed health workers who documented the issued ITN in the tally sheet	Number of observed health workers who documented the issued ITN in the tally sheet	Number of observed health workers who issued ITN	To identify whether poor issuing behavior is due to lack of documentation
16	Percent of observed health workers who discussed how to use an ITN and how to care for an ITN	Number of observed health workers who discussed how to use an ITN and how to care for an ITN	Number of observed health workers	To identify whether poor issuing behavior is due to lack of education

ANNEX 3. RECOMMENDED CORRECTIVE ACTIONS

Identified Problems	Recommended Corrective Action	Person Responsible	Timeline
Service Data Management			
Data inconsistencies in registers, tally sheets and end of month report, and DHIS2.	<ul style="list-style-type: none"> • Ensure daily recording and tallying of ITNs issued. • Ensure data are validated at the end of the month - #s must be consistent across all reporting forms and in the DHIS2. • Avoid using improvised registers and reporting forms that do not capture fully all indicators. • Ensure registers and tally sheets are used during service delivery at health facilities and outreaches. 	Health facility in-charge District health information officer	Daily Monthly
Logistics Management			
Unavailability/shortage of inventory control cards Differences in inventory control cards stock balance and physical count	<ul style="list-style-type: none"> • Ensure adequate supply of inventory control card. • Ensure every ITN taken from the store is recorded including losses and adjustments. • Weekly stock taking and reconciliation of stock. 	Storekeeper	Daily Weekly Monthly
Observation of ITN Issuing and Education on Use and Care			
Non observance of service delivery during supervision	<ul style="list-style-type: none"> • Plan supervision to coincide with service delivery. • Simulate service delivery/ITN issuance and education on ITN use and care. 	Supervisors Health facility in-charge	Quarterly Monthly

ANNEX 4. RECOMMENDED ANALYSES

1. Data Management

Analyses will depend on the need. However, most common is to demonstrate the most recent performance per facility. With this method, aggregate results (Figure 1 and Figure 2) will highlight which areas need more support and deeper analyses to pinpoint strategic targets for follow-up and intervention.

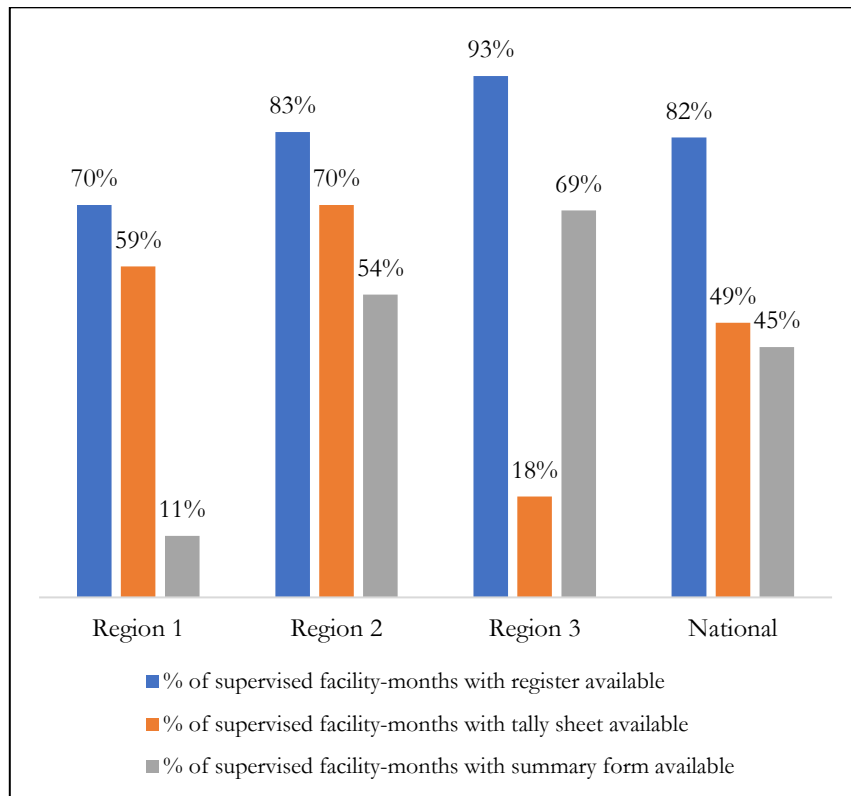


Figure 1. Availability of data tools

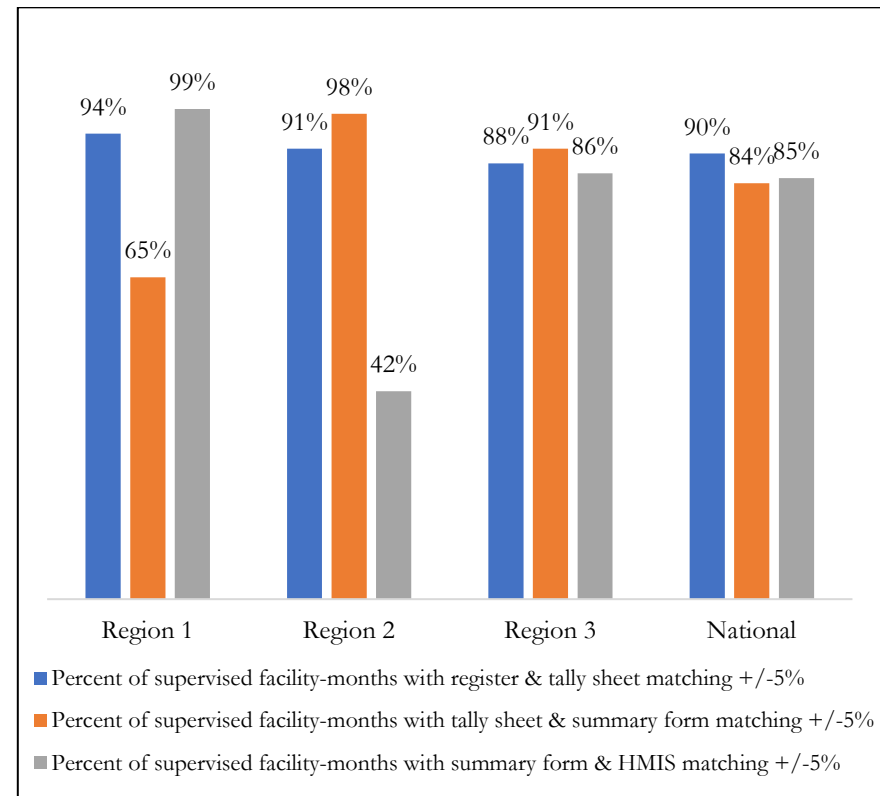


Figure 2. Data quality

2. Logistics Management

Analyses will depend on the need. However, most common is to demonstrate the most recent performance per facility. With this method, aggregate results (Figure 3) will highlight which areas need more support and deeper analyses (Table 1) to pinpoint strategic targets for follow-up and intervention.

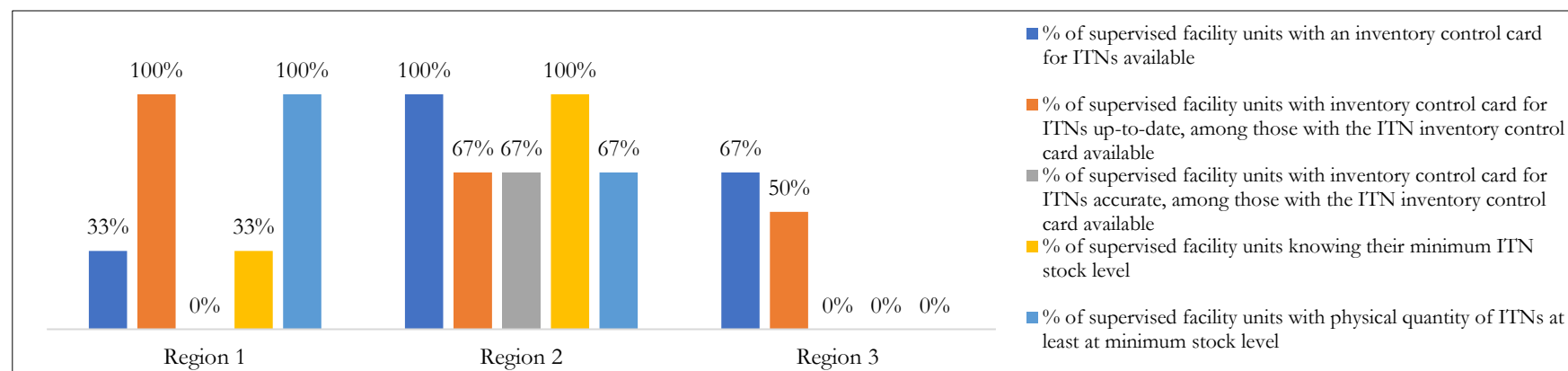


Figure 3. Supervision performance of Logistics Management at [Unit] per region

Table 1. Supervision performance of Logistics Management at [Unit] per facility

Facility	HF Score	ITN inventory control card available at the unit	ITN inventory control card completed day before visit, if available	ITN inventory control card accurate (+/- 5%) with physical quantity, if available	Unit knows their minimum stock level for the month	Physical quantity of ITNs at least minimum stock level
Facility 1a	60%	1	1	0	0	1
Facility 1b	67%	0			1	1
Facility 1c	33%	0			0	1
Facility 2a	100%	1	1	1	1	1
Facility 2b	60%	1	0	0	1	1
Facility 2c	80%	1	1	1	1	0
Facility 3a	20%	1	0	0	0	0
Facility 3b	40%	1	1	0	0	0

Facility 3c	0%	0			0	0
Grand Total	Average = 51%	6	4	2	4	5

3. Observations

Analyses will depend on the need. However, most common is to demonstrate the most recent performance per facility. With this method, aggregate results (Figure 4) will highlight which areas need more support and deeper analyses (Table 2) to pinpoint strategic targets for follow-up and intervention. It is important to remember that these type of data are measurements of health workers and not health facilities.

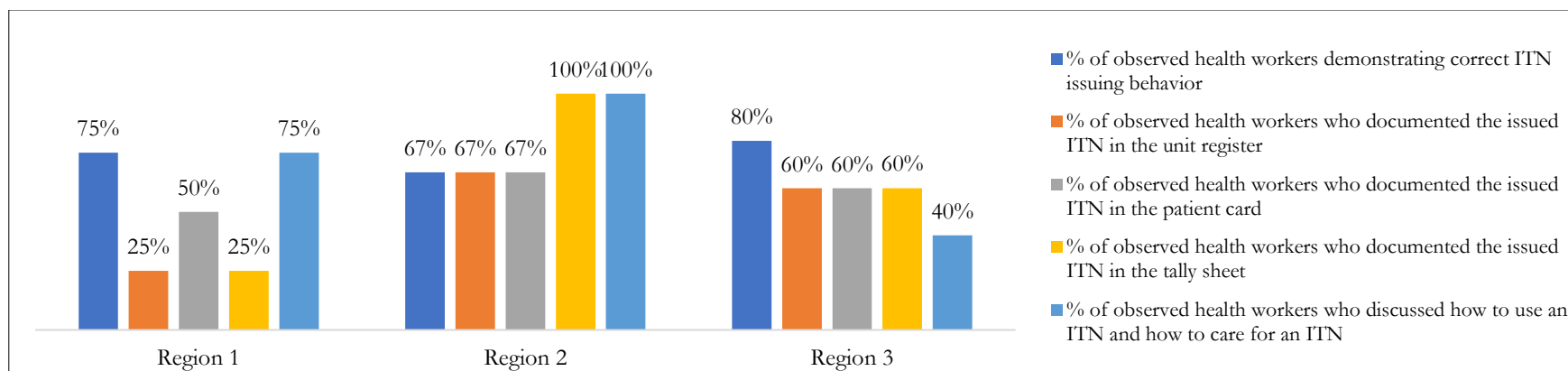


Figure 4. Supervision performance of Health Worker Observations at [Unit] per region

Table 2. Supervision performance of Health Worker Observations Management at [Unit] per facility

Facility	Average HW Score	# HWs demonstrating correct ITN issuing behavior	# HWs who documented the issued ITN in the unit register	# HWs who documented the issued ITN in the patient card	# HWs who documented the issued ITN in the patient card	# HWs who discussed how to use an ITN and how to care for an ITN
Facility 1a	20%	1	0	0	0	0
Facility 1b	70%	1	1	2	1	2
Facility 1c	40%	1	0	0	0	1
Facility 2a	100%	1	1	1	1	1
Facility 2b	80%	1	1	0	1	1

Facility 2c	60%	0	0	1	1	1
Facility 3a	70%	2	2	1	1	1
Facility 3b	60%	1	0	0	1	1
Facility 3c	50%	1	1	2	1	0
Grand Total	62%	9	6	7	7	8