Monitoring Cell
HSD, Ministry of Health & Family Welfare
www.mohfw.gov.bd

Reporting Template:A : DGHS

Reporting authority: DGHS Submitting to: JS Admin & Per of HSD. MOHFW

Area a. : Reporting about Absentee Service providers

1. Number of Report Received from Div Director & CS
2. Type of Action initiated among Absentee
3. Number of Action taken
4. Follow up action taken to the previous report
5. Number of departmental procedures initiated
6. Number of Doctors staying on writ petition
7. Number of actions provided for Writ petition
8. Number of reported cases not addressed in last 6 month

Area b: Supervision & Monitoring:

1. Number of Institution visited
2. Number of video conference & Skype call
3. Number of complain Received
4. Number of complain resolved
5. Number of absentee doctors identified
6. Number of action initiated on the basis of visit
7. Number of doctors transferred as a result of spot check
8. Number of Institution verified for performance after 2 pm
9. Type of action initiated against poor performance
10. Report of nonfunctioning logistics
11. Action taken for nonfunctioning logistics

NB: **a. Monthly report will be submitted to MOHFW (Within 10th day of the month)**
b. Communicating copy will be provided to Monitoring Cell of MOHFW
C. DGHS will provide necessary feedback to the respective Director/CS

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Reporting Template: B :Div Director

Reporting authority: Div Director ➡️ **Submitting to: Director Admin, DGHS**

Area : Reporting about Absentee Service providers

1. Number of Report Received from CS regarding Service provider absentee
2. Type of Action initiated among Absentee
3. Number of Action taken
4. Follow up action taken to the previous report
5. Number of departmental procedures initiated
6. Number of Doctors staying on writ petition
7. Number of actions provided for Writ petition
8. Number of reported cases not addressed in last 6 month
9. Report of nonfunctioning logistics in the facilities
10. Action taken for nonfunctioning logistics
11. Report of low performing RMNCAH areas
12. Number of complain resolved received by SMS/phone call

NB : **a. Monthly report will be submitted to DGHS (Within 5ᵗʰ day of the month)**
b. Communicating copy will be provided to Monitoring Cell of MOHFW
C. Div. Director will provide necessary feedback to the respective CS

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Reporting Template: C: Civil Surgeon

Reporting authority: Civil Surgeon ➡️ **Submitting to :Div Director, Health**

1. Number of UHC ,Sub center& CC visited
2. Number of Absentee doctor detected
3. Onward transmission of absentee doctors list within 48 hours to higher authority
4. Initiated legal action for the absentee doctors within 7 days
5. Follow up of action of the absentee list which communicated previously
6. Number of delivery conducted in UHC(Upazilla wise)
7. Number of maternal & neonatal death in all Upazilla
8. Performance of OT (OT list) for Upazilla
9. Quality Improvement Committee (QIC) meeting held in last month.
10. Number of CS after 2pm in UHC
11. Number of ANC coverage 4+ ANC low performing areas in UHC
12. Mention initiative to take the increase the number of ANC, delivery
13. Number of patient managed for PPH & Eclampsia in UHC
14. Function of OT, Pathology, Radiology, Blood Transfusion, Ambulance in UHC
15. Measure taken for non functioning Logistics (equipment/logistics) in UHC
16. Availability of MNH drugs in UHC
17. Number of SMS based complain received from UHC
18. Number of complain resolved in UHC

NB : **a. Monthly report will be submitted to Div Director (Within 3rd day of the month)**
b. Communicating copy will be provided to Monitoring Cell of MOHFW
 C. CS will provide necessary feedback to the respective UHFPO

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Reporting Template:D :Director/Super of DH /MCH

Reporting authority: Director/Super of DH /MCH ➡ **mitting to : Div. Director, Health & DGHS**

1. Number of Absentee doctor detected
2. Onward transmission of absentee doctors list within 48 hours to higher authority
3. Initiated legal action for the absentee doctors within 7 days
4. Follow up of action of the absentee list which communicated previously
5. Number of delivery conducted
6. Number of maternal & neonatal death
7. Performance of OT (OT list)
8. Number of CS after 2pm
9. Number of patient managed for PPH &Eclampsia
10. Function of OT, Pathology, Radiology, Blood Transfusion, Ambulance
11. Measure taken for non functioning Logistics (equipment/logistics)
12. Availability of MNH drugs
13. Rate of Hospital Acquired infection
14. Quality Improvement Committee(QIC) meeting held in last month.
15. Facility level Indicators(FLI) status uploaded or not
16. Number of SMS based complain received
17. Number of complain resolved

NB: **a. Monthly report will be submitted to Div Director & DGHS (Within 3rd day of the month)**
b. Communicating copy will be provided to Monitoring Cell of MOHFW