F. No. 16-3/2004-ME (Pt) Government of India Ministry of Women and Child Development

Shastri Bhawan, New Delhi 110 001

22 October 2010

To

- a) State Secretaries in charge of ICDS Scheme (All States/UTs)
- b) Directors in charge of ICDS Scheme (All States/UTs)

Subject: Guidelines for Monitoring and Supervision Visits to ICDS Blocks and AWCs by Officials of State and Central Governments - Regarding

Sir/Madam,

The monitoring and supervision of the ICDS Scheme is recognized as one of the essential requirements for effective working of the Scheme. The Ministry of Women and Child Development has been taking steps to revamp the whole management information system (MIS) under the programme. Along with collection of regular monitoring data through the MIS, regular field visits to the AWCs/ICDS Blocks by programme Officials at different levels are essential to monitor the working of Anganwadi Centres (AWCs). Through intensive monitoring and supervision visits, problems/bottlenecks in the delivery of services at AWCs can be addressed. Along with, the views and perspectives of the community for improvement in day-to-day functioning of AWCs and service delivery can be elicited for taking appropriate corrective actions.

- 2. In order to standardize the existing practice of monitoring and supervision visits which are being followed differently by different States/UTs, the Ministry of Women and Child Development has prepared the Guidelines which cover Officials at both State and Central Governments. The Guidelines prescribe the minimum requirements of visits that are to be made at various levels. A Copy of the Guidelines is attached herewith.
- 3. The States/UTs are requested to adhere to the Guidelines and share the same with the Health Department and District Collectors for implementation. The States/UTs may ensure having a mechanism for reviewing the monitoring and supervision Reports at the appropriate levels for necessary corrective actions.

4. The State Govts/UT Administration may inform this Ministry about the action taken for implementation of these Guidelines. In case, they already have a system in place that meets the requirement laid down in these Guidelines, they may intimate the details to this Ministry.

Yours sincerely,

(Dr. Shreeranjan)

Joint Secretary
Tel: 2338 7683

Сору:

(i) Director, NIPCCD

(ii) Regional Directors of NIPCCD (Guwahati, Indore, Lucknow, Bangalore)

(iii) Food and Nutrition Board and its all Field Units

(iv) Directors/Dy. Secretaries in CD Bureau, MWCD DCY (KD)

- (v) US (CD-I/III)/US (CD-II)/US (WB)/US (Training)/US (ME)/Sr. Programmer / AD (WB & ME)
- (vi) Plan and Research Unit, MWCD



Guidelines for

Monitoring and Supervision Visits to ICDS Blocks and Anganwadi Centres (AWCs) by Officials of the State and Central Governments and Involvement of PRIs in Monitoring of AWC Activities

October 2010



ICDS MONITORING & EVALUATION UNIT
MINISTRY OF WOMEN AND CHILD DEVELOPMENT
GOVERNMENT OF INDIA

Guidelines for Monitoring and Supervision Visits to ICDS Blocks and AWCs by Officials of the State & Central Governments and Involvement of PRIs in Monitoring of AWC Activities

The Integrated Child Development Services (ICDS) Scheme has an in-built monitoring system since its inception through which regular reports and returns flow upwards from Anganwadi Center (AWC) to block, district, State and finally in an aggregated form to the Government of India (GoI). In addition to collection of regular monitoring data through the programme management information system (MIS), periodic field visits to ICDS blocks/AWCs by Officials at various levels and review of the programme implementation at different levels are also undertaken as part of the regular monitoring of the programme.

- 2. To provide necessary support to the ICDS field functionaries in improving the quality of service delivery by addressing various problems/bottlenecks and also to elicit views and perspectives from the community for improvement in day-to-day functioning of AWCs and service delivery, intensive monitoring and supervision visits by Programme Officials at different levels are essential for taking appropriate corrective actions. In order to standardize the existing practice of monitoring and supervision visits which are being followed differently by different States/UTs, the following Guidelines are prescribed, that provide minimum requirements of monitoring and supervision visits to ICDS Blocks/AWCs by Officials from both State and Central Governments. It also outlines involvement of PRIs in monitoring of AWC activities.
- 3. **Monitoring and Supervision Schedule:** The following monitoring and supervision schedule to ensure effectiveness in the delivery of services in ICDS is stipulated and directed for the State and Central Officials:

SL#	Category of official(s)	Schedule/proposed requirement
A. <u>A</u>	t the State level	
1	Supervisors (ICDS)	A minimum of 50% of AWCs under the Supervisor's jurisdiction every month
2	Joint visit by ICDS Supervisors with ANM/LHV	At least 2-3 AWCs every month and the visits given in sl.no. 1 can also be under this category.
3	CDPOs/ACDPOs	At least 20 AWCs per month on a rotational basis and to ensure coverage of 100% AWCs in a year.
4	Joint visit by CDPOs/ACDPOs with Medical Officer (MO)	At least 5 AWCs per month and these can be as part of the visits mentioned under sl.no. 3.

SL#	Category of official(s)	Schedule/proposed requirement
5	ICDS District Programme Officers (DPOs)/RDDs/Dy. CEOs	All blocks to be covered per quarter. At least 3 AWCs during each block visit To ensure 10% AWC coverage in a year equally spreading them across the year.
6	Joint visit by DPOs with CMHO	At least 1 Block and 2 AWCs each month
7	District Magistrates/Collectors (DMs/DCs)/ADMs/Planning Officers/District Social Welfare Officer	At least 15 AWCs (preferably on Village Health and Nutrition Days) and 25% blocks every 6 months
8	CEO/Zilla Parishad Officer (wherever entrusted the responsibilities of ICDS)	At least 15 AWCs (preferably on Village Health and Nutrition Days)and 25% blocks every 6 months
9	Nodal Officer (M & E/MIS) from State Directorate (wherever in position)	At least 10 AWCs and 2 Blocks each month.
10	Other Directorate Officials (Dy. Director/Jt. Director/ Asstt. Director)	At least 5 AWCs each month and 20% of Blocks every year (to be equally distributed across all districts in the state)
11	State Director (ICDS)	At least 20 AWCs in each quarter and 10% of blocks every year (to be equally distributed across all districts in the state)
12	State Secretary (WCD) (including officials from Under Secretary to Special Secretary)	At least 50 AWC and 25 blocks every year (to be equally distributed across all districts in the state)
13	Official from Field units of Food & Nutrition Board (CFENU)	10 AWCs per month or as prescribed, whichever is more. (to be equally distributed across all districts in the state)
14	Instructors of AWTCs/MLTCs	5 AWWs/5 Supervisors after 2 months of completion of each of the Job/Refresher trainings of AWWs/Supervisors as a follow-up of training courses conducted at AWTCs/MLTCs respectively.
15	Consultants from Home Science Colleges/Medical Institutes, appointed by Central Monitoring Unit (CMU) of NIPCCD	As per the agreement made in the terms of references of CMU.
B. At	the Central level	
16	Officials from ICDS M & E Unit of MWCD	1 State per month (@ 1 district per state, 2 blocks per district, 4 AWCs per block per visit)

S1. #	Category of official(s)	Schedule/proposed requirement
17	Other Senior Officials of MWCD (Dy. Secretary/ Director/ Joint Secretary)	At least one State in a month (@ 2-3 AWCs per state/1 district HQs/1 block office)
18	Faculty of NIPCCD (including all regional centres)	2 States per quarter (@ 2 project & 2-3 AWCs, 1 AWTC and 1 MLTC per State) OR as per the existing arrangement whichever is more
19	Officials from Food & Nutrition Board (HQs)	1 State per month (@ 2-3 AWCs per state per visit)

- 4. Preparation of Action Plans: States will prepare district-wise action plans in advance on the monitoring and supervision visits by the Officials at various levels for every six months. For joint visits along with the Health Officials, an advance plan would be prepared in consultation with the Health Department by aligning with their monitoring visits. States may enhance the scope of joint visits by involving Officials from other line departments as well viz., Sarva Siksha Abhiyan (SSA), PRI and Rural Development, Drinking Water Supply and Sanitation etc., in order to assess/strengthen effectiveness of convergence of ICDS Scheme with these programmes.
- Checklists for making monitoring & supervision visits to ICDS Blocks and AWCs by the State and Central Government Officials
- A. For Officials at the State level The following aspects of the ICDS programme implementation are to be monitored/supervised during the field visits¹:
 - Availability of infrastructural facility (building, adequate space, toilets, separate closed kitchen and space for women health check-ups); provision for electricity; supply of potable water to AWC; etc
 - Availability of functional weighing scales (baby and adult) and growth charts for all children;
 - Availability of cooking utensils, water storage container, medicine and PSE kits, all prescribed registers/reporting formats (MPR) in printed form;
 - Regularity in working of AWCs and also to see whether AWW is present daily at the centre.
 - Whether snacks and hot cooked supplementary food are provided 25 days
 a month without disruption to the children 3-6 years and Take Home
 Rations (THR) to pregnant women, lactating mother, and children 6-36
 months;

¹ This check-list is in re-iteration/addition to the existing checklists that are used by the ICDS Supervisors:

- vi. Involvement of Self-Help Groups or any women groups in preparation and distribution of supplementary food/or any other decentralized arrangements;
- vii. Whether the beneficiaries liked the taste and quality of the supplementary food;
- viii. Whether prescribed calorific norms are being met or not? (to be validated by all monitors from Food & Nutrition Board/State and Central Govt.)
- ix. Whether regular weighing of the children is done (to check growth charts and verify age and weight of a few sample children and their nutritional status as recorded in the growth charts)
- Whether immunization and health check-ups are done regularly (to check last 2 months' records);
- xi. Observance of village health and nutrition days (VHNDs): The monitors need to look for village-wise micro plan for VHNDs and it should be available with the CDPO at the block and district level.
- xii. No. of children present at the AWC on the day of visit and received supplementary food as against total registered; (to compare this figure with the previous one week's average figure).
- xiii. No. of children who received pre-school education at the AWC (what activities were undertaken by the AWW?) on the day of visit as against total registered;
- xiv. Whether there is any community support to the AWC. If not, why? (to talk with some village committee/PRI members).
- xv. Whether AWWs make regular home visits and counsel the mothers and their families during critical contact periods of pregnancy, infancy or during sickness of the children (to validate by visiting a few such households);
- xvi. General perception of the community towards functioning of the AWC. Whether there has been any improvement over the last 2-3 years?
- xvii. Suggestions, if any.

B. For Officials at the Central level:

Besides the above checklist, Officials from the Central Ministry would take up some of the following issues with the State Government Officials:

- Status of operationalization of new blocks and AWCs;
- Organizational structure of ICDS at the state and district level (staffing positions, vacancies, timeline and processes for filling-up vacancies, whether separate cadre of ICDS officials; etc);
- iii. Promotional avenues for AWWs/Supervisors/CDPOs;

- iv. Mechanism to monitor regular reviews and monitoring visits to AWCs/blocks;
- v. Fund flow from Govt. to Directorate to District/Blocks/AWCs Time taken at each level;
- vi. Adherence to the GOI prescribed financial/feeding norms at all levels for effective programme implementation (e.g. SNP, POL; contingency, MIS, IEC, flexi funds at AWC;
- vii. State's plan for strengthening the AWC infrastructure (leveraging resources from other programmes/departments);
- viii. Mechanism for effective convergence with health and other line departments;
- ix. Lifting position of food grains under Wheat Based Nutrition Programme (WBNP) and its end use; etc.

Note:

- i. The above points are only indicative. The States/UTs can add more indicators based on specific needs/problem of the area.
- ii. During joint visits with health, issues like regular immunization, drop-outs of immunization, ANM's presence on VNHDs, referral services etc should be taken up.
- iii. Some of the visits should be made during the VHNDs.
- iv. Officials should devote considerable time to one AWC visit to get a clear and true picture of the programme and its delivery to the intended beneficiaries.
- v. Selection of AWCs for inspection should be done in a manner that interior areas are covered and there is no undue emphasis on visiting the road side villages.
- vi. Some of the visits to AWCs by the state and national level Officials should be from those that have been recently visited by the CDPOs/DPOs to see whether any action has been taken based on their field reports and also to ensure some quality improvements at the block/AWC level.
- 6. Reporting and Feedback: Each Official up to the level of DPO will prepare a brief report (maximum 2 pages) critically analyzing the programme implementation in respect of the aforesaid aspects/issues and ensure necessary feedback is given to AWWs/Supervisors/CDPOs. The Supervisors and CDPOs/ACDPOs will reflect the findings of their field visits in their respective monthly/quarterly progress reports. Findings from the field visits would be discussed at the sector/block/district/state level review meetings. State Directorate will have the overall responsibility to compile the district-wise key findings of the field visits at the end of every quarter and submit the same to the GoI. Officials from the central level would prepare state specific reports by analyzing key factors and ensure transmission of the feedback to the State Governments through the bureau-head of the MWCD within ten days of their visits.

- 7. Involvement of PRIs in monitoring of AWC activities: The need for involvement of PRIs in monitoring of ICDS activities has been always felt and desired in order to build an accountability mechanism for delivery of services and availability of supplies at AWC level. However, in the absence of clear defined guidelines, involvement of PRIs in supporting the implementation of ICDS has rather been sporadic and limited to selection of AWWs and AWHs, construction of AWC buildings etc. It is proposed that PRIs may be involved in monitoring of the day-to-day functioning of the AWCs, especially with respect to the following:
 - i. Regularity in functioning of AWCs
 - Regularity in supplementary food (snacks, hot-cooked meals and THR), its quality and acceptance by the community
 - iii. Coverage of all households and eligible beneficiaries
 - iv. Regular weighing of children
 - v. Regular supply of IFA, vitamin A and de-worming medicines by health
 - vi. Organization of the monthly joint meetings between health and ICDS (Village Health and Sanitation Committees)
 - vii. Monthly observance of Village Health and Nutrition Days (VHNDs)
 - viii. Availability of prescribed records and registers at AWC
 - ix. Monitoring of regular payment of honoraria to AWWs & AWHs
 - Construction of AWCs and its maintenance
 - Community mobilization by motivating people to participate in ICDS service delivery; and
 - xii. Involvement in Health, Nutrition and Sanitation Education

States may devise appropriate reporting mechanism in consultation with the State PRI Department to review the feedback received from the PRI members and to take necessary corrective actions.

Note: The above guidelines may be appropriately embedded into the existing monitoring and supervision mechanism in ICDS programme implementation as being followed by the States/UTs.