





# Monthly Technical Support Report for May 2025

District- Mohla Manpur Ambagarh Chowki Report By- State Center of Excellence for Nutrition, Department of Pediatrics, AIIMS, Raipur, Chhattisgarh

## **Supportive Supervision**

The SCOE4N executed **11** visits to various AWCs of MMAC district in the month of May 2025. The visits were made in order to support the AWCs and in turn the WCD department to increase its technical efficiency towards the management of malnutrition. The block wise break up of visits and ranking is as follows. Ranking is based on average of enrolment and recovery rate.

S.No.	Districts	Number of AWCs supported
1	Ambagarh Chowki	3
2	Manpur	6
3	Mohla	2
	Grand Total	11



District ranking based on CMAM Performance							
Rank	Colour code	Block Name	Enrolment vs PT	Recovery Rate	Overall Score		
1		Ambagarh Chowki	33.33%	66.67%	50%		
2		Manpur	39.39%	50%	44.70%		
3		Mohla	15.38%	42.86%	29.12%		

## **CMAM Scorecard**

Name of the Projec t	SAM childre n in Poshan Tracke r	CMAM Enrolle d SAM childre n for the Month	CMAM Enrolle d MAM childre n for the Month	Enrolmen t vs PT	Total Discharge d	Childre n Cured (SAM- Normal)	Childre n Partiall y Cured (SAM- MAM)	Childre n Not Cured (SAM- SAM)	Recover y Rate	Defaulte d SAM children	SAM childre n referre d to NRC
Mohla	39	6	4	15.38%	7	3	2	2	42.86%	0	5
A chowki	75	25	0	33.33%	18	12	4	2	66.67%	0	5
Manpu r	33	13	0	39.39%	6	3	1	2	50.00%	0	5
Total	147	44	4	29.93%	31	18	7	6	58.06%	0	15

## **Findings**

Of the **11** visits made **1** visit was too Hard to reach, **3** at high CMAM enrolment AWC, **1** at non-respondent child AWC, and rest were in other AWCs. (Graph.1)



### Updated Equipment Availability & Functionality

Equipment	Functional (%)	Non-Functional (%)
Infantometer	100%	0%
Stadiometer	100%	0%
Digital Machine	75%	25% !
Saltar Scale	100%	0%
Z-score Chart	100%	0%

#### **Positive Highlights:**

- All equipment except the digital weighing machine is fully functional (100%) across facilities.
- Significant improvement from previous assessments, especially in **stadiometer** and **infantometer** availability.



#### Area Needing Attention:

• **25% of digital weighing machines are still non-functional** — this needs urgent attention due to its core role in anthropometric assessment.

#### **Recommendations:**

- **Repair or replace** non-functional digital weighing machines.
- Continue routine equipment checks to maintain current standards.
- Maintain a spare inventory of critical tools (like weighing scales) for quick replacement.

### Updated AWW Skill Performance Summary

Skill/Tool	Adequate Skill	Needs Improvement
Digital Weighing Machine	100%	0%
Salter Scale	100%	0%
Infantometer	100%	0%
Stadiometer	50% 🔺	50% !
WFH Classification	100%	0%
Oedema Classification	100%	0%

### Highlights:

- Excellent skill coverage (100%) in **five out of six** assessed areas.
- AWWs are particularly strong in anthropometry, classification, and tool use including Salter scales and WFH/Oedema detection.

### Area Needing Focus:

 Digital W. machine
 100%

 Salter Scale skill
 100%

 Infantometer skill
 100%

 Stadiometer skill
 50%

 WFH classification
 100%

 Oedema classification
 100%

AWW skill Perferomance

• Stadiometer skill: Only 50% of AWWs are proficient, indicating a need for retraining and practical demonstrations.

#### Recommendations:

- Conduct focused hands-on training sessions for correct stadiometer usage.
- Include **supervised practice** in field settings.
- Maintain skill levels in other areas with **regular supportive supervision** and feedback.

### Medicine Availability Overview

Medicine	Availability (%)
IFA Syrup	75.0% !
Vitamin-A	75.0% !
Albendazole	100.0% 🗹
ORS	75.0% !
Paracetamol	100.0% 🗹
Multivitamin	100.0% 🗹
Folic Acid	100.0% 🗹
Zinc	75.0% !
Amoxycillin	100.0% 🗹

#### Fully Available Medicines (100%)

- Albendazole
- Paracetamol
- Multivitamin
- Folic Acid
- Amoxycillin

#### Medicines with Limited Availability (75%)

- IFA Syrup
- Vitamin-A
- ORS
- Zinc



### Recommendations:

- **Prioritize restocking** of IFA syrup, ORS, Zinc, and Vitamin-A to ensure full coverage, especially for **SAM/MAM treatment protocols**.
- Regular **inventory monitoring** and coordination with the supply chain should be ensured.
- Encourage **timely indenting** and review of medicine usage patterns to avoid future gaps.

#### **CSAM Implementation Status**

Component	Usage/Availability	Not in Use/Unavailable
CSAM Register	75%	25% !
Palak Card	100%	0%
Samarthya App (Data Entry)	75%	25% !

#### Strengths:

- Palak card availability and usage is excellent at 100%.
- CSAM register and app are being used at 75% of sites, showing steady implementation.

#### Areas to Improve:

• **CSAM Register** and **app data entry** still show **25% non-usage** — indicating the need for follow-up training, monitoring, or technical support.

CSAM Implementation overview				
CSAM Register availibility & usage				
75%	25%			
Palak card availability & usage				
	100%			
Samarthya app data entry				
75%	25%			

### Recommendations:

- Identify **barriers to usage** of the register and app (e.g. training gaps, app login issues).
- Conduct refresher training and supervision visits to ensure 100% functionality.
- Integrate **CSAM indicators** into routine supportive supervision formats for regular tracking.

## **Report on Preventive Actions**

Under the preventive strategies, total 08 households with lactating mothers (having child of age 0 to 6 months) were visited in the month of May 2025. Findings from these visits are as follows:

Delivery related details							
Total no. of	Institutional	Home	Normal	С-	Term	Ductorm	LBW
visits	Delivery	Delivery	Delivery	section	delivery	Preterm	LDVV
08	08	0	08	00	08	00	00

100% caregivers reported institutional delivery of their children with all are normal deliveries. None were preterm and children had birth weight less than 2.5 kg i.e. Low Birth Weight **(LBW)**. Early Initiation of breastfeeding **(EIBF)** was found to be **100%**. Exclusive breastfeeding was reported to be 100% and all mothers reported breastfeeding the child more than 7 times a day. 88% mothers informed that Mitanin came for home visits and **88%** reported that **Mitanin weighed their children** during these visits.

#### Godbharai (Baby shower):

88% Godbharai (Baby shower) were done in presence of Anganwadi Workers.

#### THR Consumption:

All mothers reported receiving the THR however **only 63%** of the mothers reported **consuming it herself**.

#### IFA Tablet Consumption:

**Only 63% mother receive IFA tablet** and they consume it regularly.



## **Recommendations:**

#### • Counseling on Exclusive Breastfeeding (EBF):

Pregnant women in their last trimester should be counseled on the importance and practice of exclusive breastfeeding (EBF) during home visits and antenatal check-ups (ANC) at VHSNDs.

• Behavior Change Communication (BCC) through Community-Based Events (CBEs): CBEs should focus on creating awareness and promoting the following behaviors:

a. Ensuring that Take Home Ration (THR) is consumed only by the intended beneficiary (pregnant women, lactating mothers).

#### • Strengthening IFA Tablet Supply and Consumption:

Ensure consistent supply and improved consumption of Iron and Folic Acid (IFA) tablets among the target beneficiaries.

## Annexures

1. List of AWCs supported

Annexure 1:

Pariyojna	Sector	AWC Name
Ambagarh Chowki	Bandhabajar	Harijanpara Sangali [22408040611]
Ambagarh Chowki	Parsatola	Uparpara Khursitikul [22408040431]
Ambagarh Chowki	Amatola	Shikaritola1 [22408040325]
Manpur	Sitagaon	Sitagaon Chawargaon [22408091211]
Manpur	Manpur	Manpur Mararpara Kr 7 [22408090107]
Manpur	Bharritola	Fulkodo 03 [22408090909]
Manpur	Bharritola	Fulkodo 04 [22408090910]
Manpur	Kohka	Nawatola Khairkatta [22408090742]
Manpur	Kahdabari	Kahdabri 02 [22408091002]
Mohla	Mohala	Madingpiding Dhenu [22408030112]
Mohla	Actkanhar	Bhursatola02 [22408030714]