

NPPCD Reporting Proforma

Name of State:

Name of District:

Name of State Nodal Officer:

Name of Reporting Officer:

1. Progress of training:
 - i) Number of Manpower Trained:
 - a. District level ENT doctors
 - b. Audiologists
 - c. Obstetricians and Paediatricians
 - d. CHC/PHC/School Health Doctors
 - e. MPWs/PHNs/AWSs
 - f. AWW/ASHA
 - g. Parents identified/trained
 - ii) Any other related activity
2. Capacity Building(Procurement of equipment):
 - i) Transfer of Funds
 - ii) Tender inquiry document
 - iii) Acceptance of tender
 - iv) Placement of orders
 - v) Receiving of equipments
 - vi) Functional status of equipment
 - vii) Any problem/lacunae identified
3. Community based screening camps:
 - i) Identification of NGO
 - ii) MOU signed with NGO
 - iii) Schedule of camps to be organised
 - iv) Number of Camps conducted
 - v) Number of patients screened
(Report of Camp activities giving details of Date of camp, Place of Camp, Number of patients, Diagnosis, Treatment given/Referral should be attached separately)
 - vi) Any other related activity
 - vii) Any problem/lacunae identified
4. School screening:
 - i) Availability of school screening Proforma in school
 - ii) Use of school screening Proforma
 - iii) Number of camps organised for screening of children
 - iv) Number of Children screened

5. Hearing Aid fitting:
 - i) Number of Hearing Aids ordered
 - ii) Number of Hearing Aids fitted

6. Manpower Deployment:
 - i) Process initiated
 - ii) Number of Persons selected
 - iii) Number of persons deployed

7. Monitoring and Evaluation:
 - i) Printing of Proforma and Referral slips
 - ii) Feedback obtained
 - iii) Analysis of Data

8. Utilisation Certificate/Statement of Expenditure in relation to the funds released for:
 - i) Capacity building/procurement of ENT and audiology equipments for
 - District hospital
 - CHC/PHC
 - ii) Screening camps
 - iii) Obstetrician and Paediatricians training

9. Any other activity