Register 8

Integrated Child Development Services

Home Visits Planner

	Name	Code
District		
ICDS Project (Block)		
Sector		
Village/Ward		
Anganwadi Centre		
Anganwadi Worker		
Anganwadi Helper		

Ministry of Women & Child Development
Government of India

Section 1: Home Visit Planner - Pregnancy to 24 months

1	2	3	4	5	6	7	8	9	10	11	12
Serial No. of Family and Individual	**Names of Mothers and Children**	**Pregnancy 4-6 months** (Any contact sufficient-preferably 2 times)	**Pregnancy 7-9 months** (At least two home visits)	**Day of Birth** (Presence at birth, or home visit at the earliest thereafter)	**First week 1-7 days** (2 home visits; many more if baby was born weak)	**First month 8-30 days** (3 home visits; more if baby was born weak)	**Infant 1-5 months** (Any contact sufficient-preferably 2-3 times)	**Infant 6-8 months** (1 home visit every month or more if required)	**Infant 9-11 months** (1-2 home visits)	**Child 12-17 months** (1-2 home visits)	**Child 18-24 months** (Any contact sufficient - 2-3 times)
Family No.	***Calendar Month***										
Ind No.	**Mother:**										
	EDD:										
	Date of Delivery:										
Ind No.	**Child:**										
Family No.	***Calendar Month***										
Ind No.	**Mother:**										
	EDD:										
	Date of Delivery:										
Ind No.	**Child:**										
Family No.	***Calendar Month***										
Ind No.	**Mother:**										
	EDD:										
	Date of Delivery:										
Ind No.	**Child:**										
Family No.	***Calendar Month***										
Ind No.	**Mother:**										
	EDD:										
	Date of Delivery:										
Ind No.	**Child:**										
Family No.	***Calendar Month***										
Ind No.	**Mother:**										
	EDD:										
	Date of Delivery:										
Ind No.	**Child:**										
Family No.	***Calendar Month***										
Ind No.	**Mother:**										
	EDD:										
	Date of Delivery:										
Ind No.	**Child:**										

Section 2 : Home Visit Planner for Severely Underweight Children

1	2	3	4	5	6	7	8
Serial No. of Family and Individual	**Names of Children**	**Visit 1**	**Visit 2**	**Visit 3**	**Visit 4**	**Visit 5**	**Visit 6**
	Weight/Nutritional status						
Family No. Ind No.	Name : Date of first detection : Age :						
	Weight/Nutritional status						
Family No. Ind No.	Name : Date of first detection : Age :						
	Weight/Nutritional status						
Family No. Ind No.	Name : Date of first detection : Age :						
	Weight/Nutritional status						
Family No. Ind No.	Name : Date of first detection : Age :						
	Weight/Nutritional status						
Family No. Ind No.	Name : Date of first detection : Age :						
	Weight/Nutritional status						
Family No. Ind No.	Name : Date of first detection : Age :						

Checklist of Messages for Age-appropriate Home Visits

S.no.	Contact Period	Messages / Points for discussion with mother and family
A	**4th-6th Month of pregnancy:** (these can be contacts at AWC or elsewhere)	1. Counseling for IFA – dosage depending on the anemia status (100 or 200 tablets total) 2. Ensuring TT – two doses 3. Taking care of the immunization card and MCP card 4. Eating more - Increasing quantity and frequency of meals; use iodized salt 5. Taking more rest – 8 hours at night; 2 hours during the day 6. Saving for delivery 7. Avail supplementary food from AWC 8. Antenatal check up regularly (during VHND)
B	**7th-9th Month of pregnancy:** (will require at least 2 home visits to meet family)	1. Completing IFA, TT if not yet completed 2. Taking care of the immunization card and MCP card 3. Eating more - increasing quantity and frequency of meals; 4. Taking more rest – 8 hours at night; 2 hours during the day 5. Saving for delivery 6. Having atleast 3 Antenatal checkups (during NHD), including blood pressure 7. Ensuring that the family has a clear plan for institutional delivery (identify institution, save money, arrange for transportation, identify person to accompany) 8. Preparing for eventuality of home delivery (Identify SBA, keep ready DDK/blade and thread, clean cloth) 9. Completion of preparations for possible emergency (identify appropriate institution, blood donor, phone numbers). 10. Readiness for immediate newborn care (Early and exclusive breastfeeding, immediate skin-to-skin care, delayed bathing, not applying anything to cord) 11. Readiness for family planning: spacing (IUD) or limiting (TL) after delivery, or by husband (NSV) If a daughter-in-law is going to her mother's place to deliver (usually by 7th to 9th month), ensure that she gets all necessary services and counseling, as well as updated immunization cards, before leaving the village. This should include preparation for institutional delivery, clean home delivery, postnatal care (including neonatal care) and possible emergency.
C	**Day of Delivery:** (Ensure that this visit happens. If possible, presence from the time labor pains begin will help ensure birth according to plan – including cleans, warmth and breastfeeding. If not able to be present at the time of birth, try and visit at the earliest possible after birth. In case of institutional births, visit the home at the earliest possible after the mother and baby return home from the hospital)	1. Immediate and exclusive breastfeeding (avoid pre-lacteal feeds) 2. Personal hygiene/cleanliness to prevent infection (minimal handling, hand-washing, continuing cord care) 3. BCG and OPV-0 4. Counselling for recognition of maternal complications – bleeding and fever 5. Checking whether the baby is a weak newborn: a. Birth more than 1 month before the expected date, OR b. Birth weight less than 2 kg, OR c. Weak feeding right from the time of birth 6. If baby is weak, counseling for special efforts at cleanliness, warmth and breastfeeding, including skin-to-skin care 7. Counseling for early detection of sickness in newborn (deterioration of vigor of feeding and activity) and immediate referral to hospital

Checklist of Messages for Age-appropriate Home Visits

S.no.	Contact Period	Messages / Points for discussion with mother and family
D	**First Week after birth:** (at least two more visits after the day of birth, many more if it is a weak newborn)	1. Counseling for continued feeding, warmth, cleanliness 2. Coounseling for early detection of sick newborn (deterioration of vigor of feeding and activity) and immediate referral to hospital 3. Counseling for recognition and referral of maternal complications – fever, foul discharge, fresh bleeding 4. Help manage weak babies: a. Frequent visits – twice a day until feeding is well established b. More efforts at cleanliness, feeding, warmth, inclduing skin-to-skin care c. Expressed breast milk as needed
E	**8-30 days after birth:** (several visits necessary if the baby is a weak newborn; else, three visits may suffice)	1. Counseling for continued feeding, warmth, cleanliness 2. Counseling for early detection of sick newborn (as before) 3. Identifying and managing breastfeeding problems 4. Immunization 5. Help manage weak babies (as before) 6. Counseling for birth spacing (provide the list of choices and refer to the ANM)
F	**Between age 1-5 months:** (may not need long home visits, except in cases where the family resists EBF or immunization)	1. Counseling and support for exclusive Breastfeeding until 6 months 2. Immunization 3. Monthly weighing at AWC 4. Counseling for birth spacing (provide the list of choices and refer to the ANM) 5. If a woman is using a spacing method, provide supplies. 6. Complementary feeding on completion of 6 months.
G	**Between age 6-8 months:** (home visits – at least once a month - necessary to ensure hands-on demonstration of feeding practices, and problem solving with the family)	1. Appropriate complementary feeding: a. gradual initiation, b. feeding semisolids like rice, khichdi or roti, c. feeding from a separate katori, d. at least 2-3 feeds per day, a total of at least 2 small katoris (200 grams) of semisolids per day. e. Add ghee or oil f. Continue breast feeding, particularly at night g. Responsive feeding: understand signals, sit with child to feed h. Increased feeding after illness 2. Measles vaccine, Vitamin A at 9 months 3. Monthly weighing and supplementary food from AWC 4. Identify families needing special support (food insufficiency, gender discrimination, poor caring skills of caretakers) 5. Counseling for birth spacing (provide the list of choices and refer to the ANM)
H	**Between 9– 24 months:** (2- 3 home visits or more, to ensure increasing quantity of complementary feeding, completion of immunization, emphasis on family planning)	1. Counsel for pediatric IFA after 12 months 2. Continued attention to: a. Appropriate complementary feeding (As before, but increase to 3-4 times a day, to give a total of at least 3 small katoris or 300 grams per day, increasing to about 500 grams per day by 18 months) b. Increased feeding after illness c. Timely completion of immunization, Vitamin A 3. Monthly weighing 4. Identify families needing special support (food insufficiency, gender discrimination, poor caring skills of caretakers)