FIFTH DEMOGRAPHIC AND HEALTH SURVEY, 2014-2015

Data collection supervision report form

Team no [ ][ ]

1. ## Introduction:

   Objective of the supervision

   Period of supervision:

   Areas of Supervision:

   District_____Cluster no _____

   TL names: _____

2. ## Data quality:

   ### 2.1 Kind of Errors in completing questionnaires

HHQ		WQ		MQ	
(kind of error/ question No)	Solutions done	((kind of error and question No)	Solutions done	(kind of error and question No)	Solutions done

2.2 None responses status

HHQ		WQ		MQ	
(None response/ question No)	Reasons of none responses and Solutions done	(None response/ question No)	Reasons of none responses and Solutions done	(None response/ question No)	Reasons of none responses and Solutions done

2.3Eligible persons missed

Cluster No	WQ		MQ	
	(NB of Eligible W. missed)	Reasons and Solutions done	(NB of Eligible W. missed)	Reasons and Solutions done

2.3 Testing. Anthropometry measurements

Cluster NO	Type of Biomarker testing/Anthr.m.	Nb of refus				Solutions done
		Among elig. W.(15-49yr)	Among elig. M. (15-59yr)	Among elig. Children (0-5 yrs)	Children (0-5yr)	
	HIV testing					
	Anemia					
	Malaria					
	Anthropometry					

3.Progress of activity (number of clusters completed)

Date	Cluster No completed	Nb of days made to complete the cluster	General observations

3. Organization of Fieldwork (Observations):

4. Meeting done with team

Date of Meeting	MAIN TOPIC	CONCLUSIONS AND RECOMMENDATIONS