

**iCCM Global Indicators Chart (Based on Benchmark Framework)**

Produced by the CCM Task Force

Component and Indicator	Definition	Metric	Type and Level of Indicator	Data Source	Frequency
<p><b>Coordination and Policy Setting</b></p> <p>iCCM Policy</p>	<p>iCCM is incorporated into national maternal, neonatal and child health (MNCH) policy/guideline(s) to allow community-based health workers (CHWs) to give:</p> <ul style="list-style-type: none"> <li>– Low osmolarity oral rehydration solution (ORS) and zinc supplements for diarrhea</li> <li>– Antibiotics for pneumonia</li> <li>– ACTs (and RDTs, where appropriate) for fever/malaria in malaria-endemic countries.</li> </ul>	<p><u>Yes</u> – National policy guidelines have been adopted to allow CHWs to provide treatment in line with World Health Organization (WHO) recommendations for all relevant conditions (diarrhea, pneumonia and malaria in countries with malaria)</p> <p><u>Partial</u> – National policy guidelines have been adopted to allow CHWs to provide treatment in line with WHO recommendations for at least one, but not all, relevant conditions</p> <p><u>No</u> – No national policy guidelines exist that support iCCM in line with WHO recommendations</p>	<p>National-level milestone (NMS)</p> <p>Input</p>	<p>Document review of administrative documents (e.g., Ministry of Health policy, strategy, or guideline)</p>	<p>Annual until a "Yes" rating is achieved; Afterward, whenever policy is revised</p>
<p><b>Costing and Financing</b></p> <p>Annual iCCM costed plan</p>	<p>A costed operational plan for iCCM exists (or is part of a broader health operational plan) and is updated annually.</p>	<p><u>Yes</u> – A costed iCCM operation plan/work plan for all relevant iCCM conditions (as specified by country policy or implementation status) exists (or is part of a broader health operational plan) and has been updated within the past year</p> <p><u>Partial</u> – A costed iCCM operational/work plan exists (or is part of a broader health operational plan), includes at least one but not all relevant iCCM conditions, and has been updated within the past year OR a costed iCCM operational/work plan exists (or is part of a broader health operational plan) and includes at least one relevant iCCM condition, but has not been updated within the past year</p> <p><u>No</u> – No costed plans for iCCM are available for any relevant health condition</p>	<p>National-level milestone (NMS)</p> <p>Input</p>	<p>Document review of administrative documents (e.g., operational plans, work plans, budgets)</p>	<p>Annual</p>

<p><b>Human Resources</b></p> <p>Targeted CHWs providing iCCM</p>	<p>Proportion of CHWs targeted for iCCM who are trained and providing iCCM according to the national plan.</p>	<p><u>Numerator</u> – Number of CHWs targeted for iCCM who are trained and have provided iCCM services in the last 3 months</p> <p><u>Denominator</u> – Number of CHWs targeted for iCCM</p>	<p>Routine monitoring (RM)</p> <p>Output</p>	<p>Review of administrative records (e.g., CHW registers and reports) and routine CHW reporting or CHW survey</p>	<p>Annual if using administrative records; Episodic if by CHW survey</p>
<p><b>Supply Chain Management</b></p> <p>Medicine and diagnostic availability</p>	<p>Percentage of iCCM sites with all key iCCM medicines and diagnostics in stock during the day of assessment visit or last day of reporting period (key products defined by country policy)</p>	<p><u>Numerator</u> – Number of iCCM sites with all key iCCM medicines and diagnostics in stock during the last assessment/observation visit or the last day of a reporting period</p> <p><u>Denominator</u> – Number of iCCM sites assessed</p>	<p>Routine monitoring (RM)</p> <p>Output</p>	<p>Routine supervision reporting, or CHW survey with direct observation of supplied on day of visit</p>	<p>Monthly or quarterly if through routine supervision reporting; Episodic if by CHW survey</p>
<p><b>Service Delivery and Referral</b></p> <p>Treatment coverage of diarrhea and malaria</p>	<p>Percentage of sick children who received timely and appropriate treatment for diarrhea and malaria (reported separately for each iCCM condition).</p>	<p><u>Numerator</u> – Number of children under five with an iCCM condition (diarrhea or malaria in malaria-endemic areas) who received timely and appropriate treatment during the last 2 weeks</p> <p><u>Denominator</u> – Number of children under five with an iCCM condition in the last 2 weeks (report separately for each iCCM condition)</p>	<p>Special study (SS)</p> <p>Outcome</p>	<p>Household surveys to interview mothers/caretakers of children under five</p>	<p>Episodic</p>
<p><b>Communication and Social Mobilization</b></p> <p>Caregiver knowledge of illness signs</p>	<p>Proportion of caregivers who know two or more signs of childhood illness that require immediate attention and, if appropriate, treatment.</p>	<p><u>Numerator</u> – Number of caregivers of children under five interviewed who can correctly state two or more signs of childhood illness that require immediate assessment and, if appropriate, treatment</p> <p><u>Denominator</u> – Number of caregivers of children under five interviewed</p>	<p>Special study (SS)</p> <p>Outcome</p>	<p>Household surveys to interview mothers/caretakers of children under five</p>	<p>Episodic</p>

Routine supervision coverage	Proportion of CHWs who received at least one administrative supervisory contact in the prior 3 months during which registers and/or reports were reviewed.	<u>Numerator</u> – Number of CHWs who received at least one administrative supervisory contact in the prior 3 months during which registers and/or reports were reviewed  <u>Denominator</u> – Number of CHWs trained in and deployed for iCCM or number of CHWs interviewed (if survey used for measurement)	Routine monitoring (RM)  Output	Routine supervision reporting or CHW survey	Quarterly if collected routinely through supervisory records; Episodic if by CHW survey
<b>Supervision and Performance Quality Assurance</b>	Proportion of sick children visiting a trained CHW who receive correct case management from that CHW.	<u>Numerator</u> – Number of sick children who were correctly treated/referred for all conditions  <u>Denominator</u> – Number of sick children assessed requiring treatment and/or referral	Special study (SS)	CHW survey with direct observation and clinical reexamination	Episodic
Correct case management practice (observed)			Output		
National M&E plan for iCCM	Existence of a comprehensive, integrated M&E plan for iCCM.	Yes – An M&E plan for iCCM covers all relevant iCCM conditions and has all the critical components (may be country defined but should ideally include the following: – Program goals and objectives – Indicators to be measured – How (tools), how often (frequency) and where (at what level) the indicator data will be collected (methodologies) – Dissemination/use of information (how often and to what levels) Partial – M&E plan exists but has only some of the critical components or does not cover all iCCM conditions No – Plan has no critical components or there is no written M&E plan that covers iCCM	National-level milestone (NMS)	Document review of administrative documents (e.g., M&E plans and related materials)	Annual
<b>M&amp;E and Health Information Systems</b>			Input		
iCCM utilization indicators included in HMIS	One or more of community-based treatment for diarrhea, pneumonia and/or malaria are included in the national HMIS.	<u>Yes</u> – One or more iCCM indicator is included in the national HMIS and disaggregated by level <u>No</u> – No recommended iCCM indicators are included in national HMIS, or indicators are included but are not disaggregated by level	National-level milestone (NMS)  Input	Document review of administrative documents (e.g., HMIS documents)	Annual