

**EQA Monitoring and Evaluation**  
**Checklist of Programme inputs for EQA Implementaion (QAM & E-01)**

1.1	Consultation between Programme (NTP/PTP), DHM (EDO, MS DHQ and DTC) and reference lab (NRL /PRL) on decision to implement QASSM in district.				
	District			Date	
	Name of participants			Designation	
1.2	Laboratory QA co-coordinator identified				
	Name :			Designation:	
	<b>TORS agreed</b>	YES		NO	
1.3	District Health Facility identified as INTERMEDIATE LABORATORY				
	<b>YES:</b>		Name of health facility:		
	<b>NO:</b>				
1.4	Intermediate laboratory staff (DLS, cross checker lab for QA activities )identified				
		<b>Designation</b>	<b>Name</b>	<b>TORS Agreed (Y/N)</b>	
	District lab supervisor				
	Cross checker				
1.5	Functioning Diagnostic centers in district listed and mapped :				
	YES		NO		# of Functioning DC
1.6	Nonfunctioning designated diagnostic centres <b>listed and mapped and reasons for not funtioning noted</b>				
	YES		NO		# of non functioning DC .
1.7	Base line survey of all peripheral laboratories.to make inventory of available resources and list Gaps .				
	<b>Responsibility</b>			<b>Time line</b>	
1.8	Collection of district laboratory statistics and sample size determination				
	<b>Responsibility</b>			<b>Time line</b>	

