

# **Terms of Reference**

**For regular monitoring of  
Total Sanitation Campaign (TSC) and Swajaldhara**



**Department of Drinking Water Supply  
Ministry of Rural Development  
Government of India**

## Terms of Reference

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#### 1. Background

**Total Sanitation Campaign (TSC)** was launched in April 1999 and at present is being implemented in 398 districts of the country. The Programme is “community led” and “people centered” with increased stress on awareness creation and demand generation from the people for sanitary facilities in households, schools, Anganwadis, Community and for cleaner environment. While **Swajaldhara**, a national programme of rural water supply was launched in 2002 based on the experience gained from implementation of Sector Reform Pilot Projects in 67 districts as part of reform principles adopted in 1999. Under Swajaldhara 2002-03 and Swajaldhara 2003-04, rural drinking water supply schemes have been taken up in 370 districts of 22 States and one Union Territory.

#### 2. Objectives

TSC seeks to improve the quality of life in rural areas through accelerated rural sanitation coverage with objectives such as to bring about an improvement in the general quality of life in the rural areas; accelerate sanitation coverage in rural areas; generate felt demand for sanitation facilities through awareness creation and health education; cover schools/ Anganwadis in rural areas with sanitation facilities and promote hygiene education and sanitary habits among students; encourage cost effective and appropriate technologies in sanitation; eliminate open defecation to minimize risk of contamination of drinking water sources and food and convert dry latrines to pour flush latrines, and eliminate manual scavenging practice, wherever in existence in rural areas. Swajaldhara is a community led participatory programme which aims to provide drinking water facilities in rural areas with minimum provision of 40 lpcd.

#### 3. Strategy

**TSC** and **Swajaldhara** strategies emphasise: shift from high to a low-subsidy regime; demand-driven approach; encouragement of location specific technology choices; development of alternate services (RSMs, PCs, trained masons and plumbers); intensive IEC campaigns; emphasis on school water & sanitation; tapping of institutional finance for water and sanitation units, RSMs and PCs; dovetailing funds from rural development programmes to supplement the TSC and Swajaldhara; and involvement of PRIs, cooperatives, women’s groups, Self Help Groups and NGOs.

#### 4. Principles

The entire effort of the **TSC** is to make the programme 'community led' and 'people centered' with increased stress on awareness creation and demand generation from the people for sanitary facilities in houses, schools and for cleaner environment. Alternate delivery mechanisms would be adopted to meet the community needs. TSC rests on the following principles:

- Demand driven
- Community driven & people centered
- Campaign mode approach
- Focus on IEC
- Alternative delivery mechanisms (RSM/PC)
- Strong focus on school sanitation & hygiene promotion
- Involvement of co-operatives, women Groups, Self Help Groups, Youth Clubs, NGOs, PRI, etc.
- Cost sharing in construction of sanitation facilities and O&M

**Swajaldhara** has also certain fundamental principles, which need to be adhered to by the State Governments and the Implementing Agencies. The principles are as follows:-

- Adoption of a demand-responsive, adaptable approach along with community participation based on empowerment of villagers to ensure their full participation in the project through a decision making role in the choice of the drinking water scheme, planning, design, implementation, control of finances and management arrangements;
- Full **ownership of drinking water assets** with appropriate levels of Panchayats,
- Panchayats/communities to have the power to **plan, implement, operate, maintain and manage** all Water Supply and Sanitation schemes,
- Partial capital cost sharing either in cash or kind including labour or both, 100% responsibility of operation and maintenance (O&M) by the users;
- An integrated service delivery mechanism;
- Taking up conservation measures through rain water harvesting and ground water recharge systems for sustained drinking water supply; and
- Shifting the role of Government from direct service delivery to that of planning, policy formulation, monitoring and evaluation, and partial financial support.

#### 5. Components

The programme components of TSC are as follows:

- **Start up Activities**-The Start up activities comprises of conducting baseline survey and KAP (Knowledge, Aptitude, and Practice) Studies, **IEC activities**- IEC activity intends to create the awareness and generate demand/felt need for sanitary facilities in the rural areas for Households, Schools, Anganwadi, Balwadis and Women Complexes; **Rural Sanitary Marts (RSM) and**

**Production Centres (PC)-** The main aim of having a RSM is to provide materials and guidance needed for construction of different types of latrines and other sanitary facilities, which are technologically and financially suitable to the rural areas. Production Centres are means to improve the production of cost effective affordable sanitary ware; **Individual Household Latrines-** A duly completed household latrine shall comprise of a Basic Low Cost Unit (without the super structure). In the first phase, the programme is aimed to cover all the Below Poverty Line (BPL) families; **Community Sanitary Complex-** Community Sanitary Complex should be setup at a place in the village, which is acceptable and accessible to women, men as well as landless. The Gram Panchayat/ Self-Help Groups should own and maintain such units; **School Sanitation and Hygiene Education-**Toilets in Government Schools i.e. Primary, Upper Primary, Secondary and Higher Secondary should be constructed and students educated to use the facilities; and **Anganwadi Toilets:** With baby friendly toilets and hand washing facility.

Similarly, **Swajaldhara** has some key components which is implemented at habitation level which includes IEC, capacity development, institution building such as Village Water & Sanitation Committees (VWSC) as part of the Gram Panchayat and community participation, water quality control, sustainability of sources, O&M, etc.<sup>1</sup>

## 6. Implementation of TSC and Swajaldhara

For **TSC**, States are required to formulate TSC project proposal for select districts and submit the same for Gol assistance. TSC proposes the constitution of state-level Water Supply and Sanitation Missions (registered as societies under the PHEDs) for imparting operational flexibility, institutionalising community based approaches and integrating WSS programmes. The HRD, IEC and MIS cells are to work within the state Mission, with oversight of the Mission entrusted to Apex and Executive Committees. A district -level Water Supply and Sanitation Mission (DWSM) will be affiliated to the state Mission and would be responsible for TSC implementation in the district. NGOs and other such formations (members of the district Mission) are to be entrusted the task of TSC implementation in villages including actual construction and installation of hardware awareness generation and demand creation activities.

In Swajaldhara, it is implemented in two streams- **First Dhara (Swajaldhara I)** is for a Gram Panchayat (GP) or a group of GPs or an intermediate Panchayat (at Block/Tehsil level) and the **Second Dhara (Swajaldhara II)** has District as the Project area. Swajaldhara Project funding, excluding community contribution, is fully met by the Government of India. Funds under Swajaldhara are allocated to the States every year as per inter- state Accelerated Rural Water Supply Programme (ARWSP) allocation

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<sup>1</sup> Refer Swajaldhara Guidelines

ratio fixed for the year. The release is demand responsive up to the maximum allocation for the year. States can implement **Swajaldhara** in Blocks/Gram Panchayats in any district. The lowest unit for implementing the reform initiative under Swajaldhara is a Gram Panchayat. Swajaldhara project is ideally suited for small village based self-sufficient schemes. Multi-Gram Panchayat schemes, while not prohibited, require specific and precise formulation of capital cost sharing, operation and maintenance arrangements and cost collection mechanisms. Specific proposals under Swajaldhara are sanctioned by the District Water and Sanitation Committee (DWSC) provided the projects conform to the Guidelines of Swajaldhara.

## 7. TSC and Swajaldhara Funding

GoI funds are released to the Implementing Agency in four installments (30, 30, 30, 10). The Table below gives the percentage share of the allocation (i.e. the total approved TSC project cost) for different components of a TSC Project, the GOI/State share and the beneficiary contribution towards each component.

**TSC Component-Wise earmarking and funding pattern**

S.N.	Component	Amount earmarked as percent of the project outlay	Contribution percent		
			GOI	State	Household/Community
a.	Start-up Activities (Preliminary Surveys, Publicity etc.)	Less than 5% (Subject to a ceiling of Rs. 20 lakh per district)	100	0	0
b.	IEC, Including Motivational Awareness and Educative Campaigns, Advocacy etc.	More than 15%	80	20	0
c.	Alternate Delivery Mechanism (PCs/RSMs)	More than 5% (Subject to a maximum of Rs. 35 Lakh per district)	80	20	0
d.	(i) Individual Latrines for BPL/ disabled house holds (ii) Community Sanitary Complexes	Less than 60% (subject to para 9 (d) of the Guidelines)	60	20	20
e.	Individual house hold latrines for APL	Nil	0	0	100
f.	School Sanitation Including Anganwadis (Hardware and Support Services)	More than 10%	60	30	10
g.	Administrative charges, including training, staff, support services, Monitoring & Evaluation etc.	Less than 5% (subject to a ceiling of Rs. 40 lakh per district)	80	20	0

Presently, up to 20 percent of the Budget provision for Rural Water Supply Programme of Government of India has been earmarked for Swajaldhara Projects. For the implementation of schemes approved under

Swajaldhara-I, the funds are released in two equal instalments while it may be released in four instalments of 20, 40, 30 and 10% for projects taken under **Swajaldhara -II**. The State Governments / SWSM indicate the extent to which allocated funds for a year will be utilized in the State under Swajaldhara I and II. Funds are provided to the State Water and Sanitation Mission (SWSM) and the District Panchayat / DWSM to meet the expenditure on activities like Start -up, Communication & Capacity development, Quality check, monitoring etc. This would be limited to 10% of the value of project proposals cleared during the year in the State under Swajaldhara – I and II. The administrative cost shall not exceed 5% of the Project Outlay with an upper ceiling of Rs. 5 lakh per annum and would be admissible to the District Panchayat / DWSM and Gram Panchayats executing the projects under Swajaldhara – I & II.

## **8. Progress of TSC and Swajaldhara**

So far, 398 projects in the country have been sanctioned with the total outlay of Rs.3378 crore. The main physical components sanctioned in the 398 projects are:

- (i) Construction of 323 lakh individual household latrines
- (ii) 3.53 Lakh toilets for schools
- (iii) 25,236 sanitary complexes for women
- (iv) 59, 562 toilets for Balwadis/Anganwadis
- (v) 2,952 Rural Sanitary Marts / Production Centers
- (vi) In addition, funds have been earmarked for start-up activities, Information, Education and Communication (IEC) and administrative charges.

Though initially TSC had not picked up the pace, but over the last two years it has shown remarkable progress and of out 85 lakh toilets 45 lakh toilets have been constructed in the year 2003-04. Likewise, 3245 sanitary complexes, 92,085 school toilets, 13,568 Anganwadi toilets, and 2446 production centers/ rural sanitary marts (RSMs) have been set up.<sup>2</sup>

Under **Swajaldhara** 2002-03, 4,734 water supply schemes in 15 States and one Union Territory have been approved by GOI with total out lay of Rs.247.99 crore in which community share is Rs. 25.89 crore So far, Rs.134.55 crore has been released to States. Likewise under Swajaldhara 2003-04, Rs. 98.49 crore have been released to 21 States and 1 UT under Swajaldhara. For list of TSC and Swajaldhara districts, refer [www.ddws.nic.in](http://www.ddws.nic.in).

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<sup>2</sup> As on 21/06/04-TSC MIS

## 9. Issues

Swajaldhara and TSC are key intervention in water and sanitation sector to ensure better water supply, health and sanitary behavior. But there are many issues related to their implementation especially monitoring which need to be improved for better results. Some of them are highlighted below:

- Physical progress is un-even and skewed across States and Districts
- Improper practice of design and construction hardware norms
- Inadequate focus on hygiene education, water quality and health activities
- Low focus on implementers' training
- Poor operation and maintenance
- Inadequate involvement of stakeholders especially GP, NGOs, teachers and PTA
- Poor monitoring and follow up

## 10. Purpose of external monitoring

In order to have proper, effective and timely universal coverage of water and sanitation facilities in rural areas, there is need to ensure proper follow up and regular monitoring of the TSC and Swajaldhara for better and improved implementation. This task becomes more important in the light of increasing coverage of TSC and Swajaldhara across the country, which is expected to cover all the districts of India. It would be difficult to ensure same consistency on the issue of monitoring.

Thus, Department of Drinking Water Supply desires to engage external District Level Monitoring (DLM) agencies for the task of regular follow up, monitoring and reporting of TSC and Swajaldhara districts. In each state depending upon number of districts there can be more than one DLMS engaged. To supervise the work of all DLMS engaged, a nodal agency would be identified from the selected DLM agencies. The task of such nodal agency would not only be to monitor the assigned TSC and Swajaldhara districts but also prepare a compiled state level report on TSC and Swajaldhara progress as well as monitor work of other DLM agencies. Overall, the purpose of this exercise is to assist the State and Districts to improve the implementation by regular monitoring inputs.

## 11. Objectives

The TSC and Swajaldhara monitoring assignment will provide continuous, transparent and accountable monitoring inputs in reporting format with following objectives:

1. To provide continuous and consistent monitoring support in TSC and Swajaldhara districts that will include:

- Monitoring and reporting of the progress and process of the TSC and Swajaldhara program covering different components of it i.e. physical, process of implementation and financial progress both in terms of inputs and outputs.
  - Gap identification in implementation of TSC and Swajaldhara at all levels i.e. village, block, district and state
  - Recommendations for necessary follow up actions at all levels
2. Eliciting stakeholders' views on project management and approaches to sustainable O&M of the facilities and services created and reporting (Level of involvement of Programme Managers, NGOs, GP and PTA, VWSC)
  3. Illustrating the TSC and Swajaldhara status through appropriate maps, tables and charts assessing inter-district variations, comparative progress, temporal improvement or deterioration in different dimensions, and wherever possible, comparing with other states and national status.
  4. Assessing the institutional issues related to programme and information management (who collects, analyzes, disseminates and use of information), including gaps in collection of information and problems in its use.
  5. Developing case studies and success stories on best practices, innovations and lesson learnt

## **12. Theme areas of scope of work**

Overall, the monitoring agencies will focus on the coverage of water and sanitation facilities and key issues related to the different components of TSC and Swajaldhara such as policy environment, inter sectoral coordination, start up activities, IEC, HRD, IHHL, SSHE, Alternate Delivery Mechanism, Anganwadi, Community Sanitary Complex, Financial Management, Monitoring, Hygiene Education, Community Participation and Contribution, Technological issues, Usage of water and sanitary facilities, Operation and Maintenance, Role analysis of programme managers, NGOs, PRIs, etc at all levels. For detail scope of work and reporting, refer annexures.

*The entire monitoring assessment would be transparent and replicable and the agency will provide all relevant data / information in this regard. All assumptions made should be clearly stated along with their justification.*

## **13. Methodology of TSC and Swajaldhara monitoring**

The methodology of the TSC and Swajaldhara monitoring will follow both qualitative and quantitative approach. The agency to be selected will work closely with the Center, State and District level Officials and interact substantially with key stakeholders. The agency will follow following steps:

### 1. **Team Structure**

There will be two pattern of team structure. One for nodal DLM agency and other for the remaining DLM agencies. For selected nodal agency there will be a dedicated **TSC and Swajaldhara Monitoring Cell** in their state, where competent staff will be deployed. There will be two levels of teams working under this cell namely- **Apex Team** and **District Teams**. Apex Team will have the overall responsibility to monitor and review the District Level Monitoring Agencies and prepare a compiled State report. In addition, they will also monitor their own district level team and they can also act as District Monitoring Team. Apex Team will have Team Manger (having experience in water and sanitation sector), State Co-coordinator, Statisticians, Data-entry Operator and Office Support Staff. The size of the Apex Team should be limited to 5 staff. Each District Team will comprise of 5 competent professionals namely- 1 Civil Engineer, 1 Public Health Expert, 1 Communication Specialist, 1 Social Development Expert and 1 Water and Sanitation Expert and one of them will be the Team Leader. The team leader shall take full responsibility for the entire monitoring exercise at district level. Trained personnel and assistants, as necessary should assist the team. The services of the team should be exclusively provided for the monitoring exercise and their contact addresses/numbers should be provided to DDWS to facilitate constant and regular contact.

### 2. **Field visit and reporting system**

**Each TSC and Swajaldhara district will be covered quarterly by selected DLM agency. This means that each district will be visited 4 times in a year and there will be four quarterly district reports, which they will submit to DDWS and to the nodal agency for state level compilation.** At present, there are 398 districts where TSC and 370 districts in Swajaldhara which are operational. The list of project districts of TSC and Swajaldhara are available on our website: [www.ddws.nic.in](http://www.ddws.nic.in). However, the number of districts may increase or decrease depending on the sanction of new projects and completion of old projects. In each district, the **district team will require to stay around 5 days** that excludes the travel time to district headquarter. Thus a strict 5 day visit in a quarter would be executed at TSC district to gather the information on progress of the programme implementation.

### 3. **Sampling**

Since, the universe of the sample is very large, it is suggested to incorporate multi-stage random sampling technique further using PPS technique in each district. The detail activities, which need to be carried by district team, are given below:

- Meeting with district TSC and Swajaldhara officials and concerned related department
- Getting the entire list of GP, rural HH, schools (Govt. and Pvt.), Anganwadis, Community Sanitary complex and RSM/PCs to be monitored. Suggested sample plan to be followed in each district is presented below:

### **Sample Size**

In each district, 20-Gram Panchayats (GPs) **need to be covered**, out of which 8 **will be control GPs**<sup>3</sup>. The components that need to be covered in 8 GPs are as following

- HH- 200 (125 BPL and 75 APL)
- School- 10 (the categories of control schools that need to be covered are 4 primary schools, 3 upper primary school, and 3 high and higher secondary school.
- Community Sanitary Complex- 3
- Anganwadis -8
- RSM – 3
- PCs-1
- Main Community Drinking Water Source (Ponds, handpumps, river, piped water, water tank, well, spring, rainwater harvesting, etc) -2 per GP

The control GPs will be spread over at least three blocks. The **remaining 12 GPs** will be covered keeping in mind following norms

- HH- 300 (200 BPL and 100 APL)
- School- 20 (10 primary schools, 5 upper primary schools, and 5 high and higher secondary schools
- Community Sanitary Complex- 8
- Anganwadis -12
- RSM – 3
- PCs-1
- Main Community Drinking Water Source (Ponds, handpumps, river, piped water, water tank, well, spring, rainwater harvesting, etc) -2 per GP

**At least 5 to 6 block needs to be covered per district.** To avoid repetition of same GPs getting selected every time, no same calculation (number) should be drawn from PPS. This

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<sup>3</sup> It means those GPs, which will remain fixed and be monitored in every quarter covering all phases of TSC and **Swajaldhara** interventions. The list of such GPs is to be provided in the report. Such GPs will not be selected for non control GPs

exercise should be done in open meeting and documented and incorporated in the report. The list of selected GPs of each district should be provided category wise (schools-phase wise), and block wise as annexure.

### **Respondents**

The monitoring agency needs to interact and elicit information at different levels following given pattern and list of the same should be provided in every report:

<b>Sl. No.</b>	<b>Levels</b>	<b>Type and No. of Respondents</b>	<b>To be covered by whom</b>
1	Community	GP, HH (1 Adult (50% will be women) and 1 children per HH), VEC, etc, motivators	District Monitoring Team
2	School and Anganwadi	Headmaster, Teachers (2 per school), Students (10 per school) , SMC, PTA,	
3	RSM/PCs	NGOS, and mart managers	
4	Block	BDO, Engineers, Health and Education officials, and concerned officials	
5	District	DM, Engineers, Health and Education officials, and concerned officials	
6	State	Secretary of rural sanitation, SWSM, Health and Education officials, and concerned officials	<b>Nodal Agency</b> - They will interact with State officials at start of the quarterly monitoring phase and should follow up the previous quarter's recommendations and action.

#### **4. Tools of Monitoring and Reporting**

The tools of monitoring and monitoring format are attached in Annexure 1 to 5. This format is to be strictly followed during data collection and reporting.

#### **5. Analysis of Data and reporting format**

The data collected will be tabulated and analyzed using various statistical methods such as SPSS and Quantum Software. Some of the qualitative information may also be quantified and presented in a report.

### **14. Outputs from DLM and Nodal Agency**

The outputs of the entire monitoring process has been detailed out in tabular form given below:

<b>Output</b>
<b>4 Quarterly reports by DLM at district level and nodal agency at state level</b> (in softcopies i.e. in CD and hard copies (3 copies each) submitted to DDWS and state nodal agency
<b>District and state level annual reports</b> (in softcopies i.e. in CD and hard copies (3 copies each) by the respective agencies and submitted to DDWS

- All reports in MS Word and MS Excel Files
- All raw data in tabulated form, together with relevant summary tables, in MS Excel Files / MS Access Database at the time of submission of annual report.

### 13. **Supervision and support**

- The DDWS itself or any other agency appointed by it would supervise the work of the nodal agency and facilitate interaction and exchange of information between monitoring agencies, concerned State and District departments.
- DDWS, State and district through their designated representatives:
  - would provide available data and information that would be relevant to the monitoring exercise.
  - would help identify contacts with key sector institutions and facilitate monitoring agency with institutions / agencies, potential project stakeholders and others. The monitoring agency would be responsible for contacting the individuals identified and synthesize and analyze the information available.
  - would provide copies of programme/intervention document and other available information on TSC and Swajaldhara. The monitoring agency will also be provided copies of the relevant documents / publications.

## **Report Format of TSC and Swajaldhara**

The District and State level report will have three types of monitoring such as **qualitative progress** assessment supported by analysis of key findings, lessons learnt, case studies and success stories, and **quantitative progress** both physical and financial progress and **process level assessment**. In addition to, there will be recommendations on key issues and key findings. **The nodal agency selected for state level report compilations will also incorporate the inputs and information gathered at the state level.**

### **Structure of the report**

The structure of the report will follow the following suggested pattern.

1. Executive Summary of TSC
2. Executive Summary of Swajaldhara
3. Combined Report of TSC and Swajaldhara

**The contents and formats for data collection and reporting of above mentioned chapters, has been given in annexure 2, 3, and 4**

Similarly, online monitoring system is also being developed facilitating data management for easy accessibility and ready reference. This monitoring system will capture the **executive summary** part only. The DLMS and nodal agencies will submit online data as per the given format on [www.ddws.nic.in](http://www.ddws.nic.in)

## Executive Summary of TSC

1. **Brief Background** (name of the district, blocks and GPs with components covered, time period of monitoring, and no of different components of TSC covered and stakeholders interacted with)

State	District	Block	GP	TSC Components											
				IHHL	School toilets	Anganwadi toilets	Community Sanitary Complex	RSM	PC	Respondents Interviewed					
										HH-adult/children	Govt. Official	NGO/PRI/SHG/	Teacher /AWW/ANM	Motivator/others	

2. **Qualitative Assessment** will deal with key issues and findings related to the different components of TSC such as policy environment, start up activities, IEC, HRD, IHHL, SSHE, Alternate Delivery Mechanism, Anganwadi, Community Sanitary Complex, Financial Management, Monitoring, Hygiene Education, Community Participation and Contribution, Technological issues, Usage of sanitary facilities, Operation and Maintenance, Role analysis of programme managers, NGOs, PRIs, etc
3. **Physical and Process level Progress** No alteration will be acceptable in the given format as this is the common format for all DLMs and nodal agencies across the country.

### Format A: Physical Monitoring

(This data will be filled up only for the GPs/ Schools visited and monitored by DLMs as per the sampling plan of ToR)

Name of the state			
Name of the district			
Total No of blocks		Total no of blocks covered in this quarter	
Total No of Gram Panchayats		Total no of GPs covered in this quarter	

### Individual Household Latrine

Total No of rural households	With Toilet		Without Toilet		Total	
	Total	Functional	APL	BPL	APL	BPL

	APL	BPL	APL	BPL				
<b>Type of superstructure used for toilets</b>	Bamboo		Mud Wall	Cloth	Bushes	Brick wall	Others	

## School Toilets

Total No of rural govts. Schools	Boys			Girls			Co-ed		
	Primary	Upper Primary	Higher and Higher Secondary	Primary	Upper Primary	Higher and Higher Secondary	Primary	Upper Primary	Higher and Higher Secondary
With Toilets:									
With functional toilets									
Without Toilets:									
Toilets with hand washing facility:									
With functional hand washing facility									
Without hand washing facility:									
With Water supply facility:									
With functional Water supply facility:									
Without Water supply facility									

## Anganwadi Toilets

With toilet				Without toilet		Total Anganwadi	
Govt. building		Private building		Govt. building	Private building	Govt. building	Private building
Total	Functional	Total	Functional				

## Community Sanitary Complex

No of Community Complexes		Maintained by Whom (indicate in numbers of complexes maintained by each category)				
Total	Functional	NGO	SHG	Private entrepreneurs	PRI	others

## Alternate Delivery Mechanism

	Functional	Defunct	Run by whom: (indicate in	NGO	SHG	Private entrepreneurs	PRI	others

Total No of RSM			numbers of RSM/PC maintained by each category)										
No of PC			Run by whom:										
<b>Subsidy / Incentive</b>													
People / Institution received subsidy	Household	School			Community Complex			Anganwadi					
No of cases in which facility has been constructed													
<b>System of Subsidy Disbursement</b>													
Route of disbursement	Household			School			Community Complex			Anganwadi			
	Back ended	Advance	Not received	Back ended	Advance	Not received	Back ended	Advance	Not received	Back ended	Advance	Not received	
RSM													
District directly													
VWSC													
PRI													
Others													

## Format B: Process level monitoring

### Information, Education and Communication Activities

No of Block /GPs covered with IEC activity by							
<i>(This data will specifically be collected from the district authorities and records)</i>							
PRIs		NGOs		SHGs		Others	
Block	GP	Block	GP	Block	GP	Block	GP
Media Used in IEC		No of GPs covered in the last quarter <i>(To be filled from the GPs visited)</i>			Average per GP		
Interpersonal Communication					Frequency per household		
Street Play/Drama					Frequency:		
Rally (Prabhat pheri , Sham pheri and others)					Frequency:		

Competition		Frequency:	
Wall writing		No of places:	
Hoardings		No of places:	
Pamphlets		Quantity	
Others			

## Motivators

*(This data will be collected from the field visited by DLMS / NLMs)*

Number of GPs where motivators are engaged		Number of trained motivators		Average Incentive amount to the motivators	
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## Human Resource Development

*(This data will specifically be collected from the district authorities and records)*

Training Resources		No of trained resource persons		No of selected trained institutions			Others		
Training Area		Stakeholders Trained							
		District and Block officials	Engineer	Masons	Teachers	PRI members at all levels	Motivators	NGO	Others
Sensitization and orientation <i>(maximum 1 day duration)</i>	No of Sessions								
	No of participants								
Training for programme planning and implementation and monitoring covering all related aspects. <i>(more than 1 day duration)</i>	No of Sessions								
	No of participants								
Exposure visits									
Within district	Total No of visits								
	Total o of persons taken								

Outside district	Total No of visits								
	Total o of persons taken								
Outside State	Total No of visits								
	Total o of persons taken								

## Delivery Mechanism

*(This data will be collected from the field visited by DLMs / NLMs)*

No of GPs covered through RSM/PC (indicate in numbers)									
PRI		NGO		Private Entrepreneurs		SHG		Others	
No. of Toilets constructed	No. of replacement and up gradation done	No. of Toilets constructed	No. of replacement and up gradation done	No. of Toilets constructed	No. of replacement and up gradation done	No. of Toilets constructed	No. of replacement and up gradation done	No. of Toilets constructed	No. of replacement and up gradation done

## Functioning of Institutions

*(This data will be collected from the field visited by DLMs / NLMs)*

Components	Village level				School			
	GP	VWATSAN	SHG	Others	SMC	PTA	SWATSAN	Others
No of active institutions								
Frequency of meeting (in a month)								
Monitoring System	No of blocks having monitoring system		No of GPs having monitoring system		No of school based monitoring system			
Status of monitoring system	No of monitoring system updated at block level		No of monitoring system updated at GP level		No of monitoring system updated at school level			

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## Technology Used

*(This data will be collected from the field visited by DLMs / NLMs)*

Types of models used in the construction of toilets	IHHL	School toilet	Anganwadi toilet	Community Sanitary Complex
Single offset pit (lined) with pour flush				
Single offset pit (unlined) with pour flush				
Double offset pit (lined) with pour flush				
Double offset pit (unlined) with pour flush				
Single direct pit (lined) with pour flush				
Single direct (unlined) with pour flush				
VIP				
Septic tank				
Others				
Types of pans used in the toilets	Individual Household Latrine	School toilet	Anganwadi toilet	Community Sanitary Complex
Rural Pan				
Flat Pan				

## Hygiene Practice

*(This data will be collected from the field visited by DLMs / NLMs based on the household interviews)*

Persons practicing hygiene on following items	Adult	Minor ( <16 years)
Hand washing before eating		
Hand washing after eating		
Hand washing after defecation		

Regular Scrubbing of vessels		
Proper storage and handling of drinking of water		
Cutting of nails		
Use of footwear during defecation		

## Use and Operation and Maintenance of Toilets

*(This data will be collected from the field visited by DLMs / NLMs)*

*(The data should indicate in numbers)*

Components	IHHL			School		Anganwadi		Community Sanitary Complex	
	Use of sanitary facilities	All	By women only	By children	By Children	Not used by children	By Children	Not used by children	By women
Who cleans?	Family member		Sweeper	Children	Sweeper	Staff	Sweeper	User	Sweeper
Community contribution for O&M in Rs.	Anganwadi			School		Community Sanitary Complex			

## Health Status

*(This data will be collected from the field visited by DLMs / NLMs)*

Prevalence of Water Borne and sanitation related Diseases (Reported Cases in last quarter (household based))	Diarrhea		Cholera		Typhoid		Malaria		Others (Specify)	
	Adult	Minor (< 16 years)	Adult	Minor (< 16 years)	Adult	Minor (< 16 years)	Adult	Minor (< 16 years)	Adult	Minor (< 16 years)
School health	No of schools covered with health check up by ANM and doctor				No of schools covered with de worming		No of schools with health index card		No of referrals made	

## Educational Status

*(This data will be collected from the field visited by DLMs / NLMs)*

No of students enrollment in the school	No of students dropout from the school	Percentage of Attendance in schools with toilets	Percentage of Attendance in schools without toilets

#### 4. Key Recommendations

## Executive Summary of Swajaldhara

1. **Brief Background** (name of the district, blocks and GPs with components covered, time period of monitoring, and no of different components of **Swajaldhara** covered and stakeholders interacted with)

State	District	Block	GP	Schemes	Respondents Interviewed				
					HH- adult/children	Govt. Official	NGO/PRI/Others	Motivator	others

- **Qualitative Assessment** will deal with key issues and findings related to the different components of Swajaldhara such as policy environment, start up activities, IEC, HRD, School, Technology options, Financial Management, Community Participation and Contribution, Usage of water facilities, Operation and Maintenance, Cost of O&M, Fixation of water tariff for different types of users and its collection by the VWSC, Role analysis of programme managers, NGOs, PRIs, etc
- **Physical and Process level Progress** No alteration will be acceptable in the given format as this is the common format for all DLMs and nodal agencies across the country.

## Format: Physical and Process Monitoring

(This data will be filled up only for the GPs/ Schools visited and monitored by DLMs as per the sampling plan of ToR)

Name of the state			
Name of the district			
Total No of blocks		Total no of blocks covered in this quarter	
Total No of Gram Panchayats		Total no of GPs covered in this quarter	
		Total No of Schemes covered	
<b>Activities</b>		<b>Indicate in Numbers</b>	
GP covered with IEC activity			
Requests from Panchayats for IEC activities			
VWSC formed			

Accounts opened in Panchayat/VWSC		
PRA/PLA undertaken in Habitation		
Panchayats Water Supply Plan prepared and approved	VWSC	
	Panchayat	
	Gram Sabha	
Capacity Development Plan ZP/DWSM prepared and approved		
Contribution by Users/ Community/Schools/Panchayats		No.
		Amount
<b>Schemes Taken up</b>	For Users	
	For Schools	
	For other Institutions	
	Total	
<b>Schemes Completed</b>	For Users	
	For Schools	
	For other Institutions	
	Total	
<b>Training Organised</b>		
Panchayat and Capacity Development Plan		Programmes
		Persons
Execution of Water Supply Scheme		Programmes
		Persons
O&M of Schemes		Programmes
		Persons
Sustainability Evaluation Examination (SEE) done		
Healthy Home Survey Conducted		
Water Quality tested		
Taking Over of the Schemes (Atmarpan) by the Community		
<b>COMMUNITY CONTRIBUTION</b>		
<b>Partial Contribution for Capital Cost of Schemes (Rupees in lakh)</b>	Unit	
Panchayats	No.	
	Amount <ul style="list-style-type: none"> <li>• Cash</li> <li>• Kind</li> <li>• Labour</li> </ul>	
Community/Persons	No.	
	Amount <ul style="list-style-type: none"> <li>• Cash</li> <li>• Kind</li> <li>• Labour</li> </ul>	
Schools/Students	No.	

		Amount		
		<ul style="list-style-type: none"> <li>• Cash</li> <li>• Kind</li> <li>• Labour</li> </ul>		
Total Contribution		No.		
		Amount		
		<ul style="list-style-type: none"> <li>• Cash</li> <li>• Kind</li> <li>• Labour</li> </ul>		
<b>OPERATION &amp; MAINTENANCE (O &amp; M) of Schemes</b>				
	<b>Progress</b>			
Schemes completed and taken over by community	No. of Panchayats			
	No. of Schemes			
Monthly Cost of O&M	Electricity charges Salary of Operator Periodic maintenance Miscellaneous			
Water Tariff for each household	For Household connections For Public Standposts For Handpumps For sanitary wells Other sources			
Monthly Water Tariff (Rupees in lakh)	Due Remitted Balance			
<b>NGO PARTICIPATION</b>				
No. of NGOs in DP / DWSM / DWSC				
No. of NGOs transparently selected to participate in the:	<b>IEC</b>	<b>HRD</b>	<b>Scheme implementation</b>	<b>Total</b>

#### 4. Key Recommendations

## **Combined Detail Report of TSC and Swajaldhara** **Issues To be Monitored**

1. **Introduction in terms of** small brief of RWS & S schemes in the state and district, time period of the monitoring conducted and brief description of the methodology and sampling plan executed as per the ToR.
2. **Follow up and initiatives undertaken on the previous quarters recommendations**
3. **Status of TSC and Swajaldhara programme in district** in terms of physical and financial cumulative progress report to be collected from the district project implementing agency and attached as annexure as per the guidelines. Whether non-negotiable principles viz. demand driven, participatory approach, community based schemes with full willingness for O&M, active community contribution and involvement of PRIs – are followed?
4. What kind of policy support and enabling environment exist for proper and effective implementation of TSC and Swajaldhara at state, District, Block, Community. Does it figure in the meetings of state and district level officials (support with facts). Proper understanding of the project concepts and norms at the State, Districts and Gram Panchayats. What kind of IEC & HRD support is given to the district by the State? Whether any state level cell to support the districts exists?
5. **Institutional Structure**
  - What is the institutional Structure for implementation of TSC and Swajaldhara (a flow diagram may be indicated). Specify the key issues viz. stakeholders. Placement of Staff and consultant and motivators for TSC and Swajaldhara. Is the selection of NGOs appropriate? Mention possible suggestions.
  - Role analysis of PRIs/ SHG/CBO/NGOs in terms of involvement, capacity and output. Is there any dispute between PRIs and other inter institutions?

6. **Intersectoral coordination** in terms of steps taken towards such coordination with concerned departments, role analysis of such departments and output. Whether there is synergy between them or there are conflict? What are the problems being faced and possible suggestions?

7. Whether programme planning in terms of baseline survey, **District PIP on TSC and Swajaldhara, and State Action Plan on SSHE** done or not? Whether any problem faced during the preparation?

#### 8. **Financial Management**

- Whether State share is timely received by TSC project. Is there any problem in getting state share? To what extent the community is willing to pay its share for RWS & S schemes under construction and operation and maintenance? What is the monthly water tariff for each household and whether it is being regularly collected? Where the fund is kept? (Bank, PL account etc). Is it audited accordingly? Any special comment made by the auditor? Any expenditure incurred on inadmissible items? Is the physical and process level progress commensurate with the financial progress? What is the system of disbursement of incentives IHHL and other components? Should the subsidy be increased and how much? Who are involved in it and how it is done? Should the limit of community contribution be hiked and to what extend?

#### 9. **Monitoring and Evaluation**

- What is the monitoring arrangement (please briefly indicate)? Are blocks, districts reporting regularly and submitting the progress reports to the center/state? How records are being maintained and updated. Are review meetings conducted to take corrective actions from the findings of monitoring? Whether social auditing is being done by the Community? Whether review mission teams being sent by state and center to the district? **Online data Monitoring-** has the district doing online data entered for physical and financial progress details of TSC? If no, specify the problems

#### 10. **Information, Education and Communication**

- Development of area and project specific IEC strategy, activity calendar (list down the activities) and modules. **Type of media used for IEC activity-** List down the media such as street play, pamphlets, hoardings, Interpersonal communication etc. Is there adequate awareness about the need of drinking water and sanitation (HH, School, Community, etc.) hygiene education etc? Is there adequate demand for sanitation facility due to the IEC campaign? Is there adequate awareness of community on drinking water quality and sustainability of sources such as rainwater harvesting? Whether IEC activities match with physical progress? Output analysis.

## **11. Human Resource Development**

- Is there a Capacity Building Plan for TSC and Swajaldhara prepared (A copy may be collected)? Has the district identified the different stakeholders for training? Whether any good resource persons and institutions having capacity in water and sanitation exists in the state or district or not? If exist, what is the level of capacity and orientation? Whether orientation workshop, training courses for different stakeholders organized or not. (A list may be enclosed indicating theme areas, duration, location, exposure visits, and conducted by whom)? Whether pre test or post- test formats have been included or not? Output analysis in terms of improved implementation and better motivation of programme implementers.

## **12. Components of water and sanitation**

- **Individual Household-** What is the quality of construction and system of certification? Analysis of beneficiary contribution for IHHL construction. No. of HH having hand washing facilities, water supply, drainage system etc. Reasons for non use of these facilities. Motivating and de-motivating factors for APL families to construct IHHL.
- **School-** Is School a priority under TSC and Swajaldhara at all level? Reasons for non-use of watsan facilities. Are toilets accessible to students or are under lock and key? Whether staggered recess is adopted? Incorporation of hygiene education in curriculum. Are teachers trained and imparting hygiene educations to children using participatory methods? Type of health activities such as health check-up and de-worming undertaken in terms of frequency and quality, referral services by Doctor/ANM. Is water supply available in the school and if yes, is it free from any kind of chemical and biological contamination. Whether any kind of testing has been undertaken? Whether there has been construction of drainage facilities (along with garbage and soakage pit). Role of school in improving the community awareness on water and sanitation issues. No of students with household toilets.
- **Alternate Delivery Mechanism-** What is the system of alternate delivery mechanism? Role of NGOs/PRIs/CBO/SHG/Pvt Entrepreneur/others in running of RSM/PC or any other alternate delivery mechanism. Are NGOs driven by monetary considerations? Demand assessment done by RSM/PC to understand the market and marketing strategy adopted by RSM. Are they able to motivate the community? What kind of technological options and designs available with RSM/PC? Type of watsan products stocked and sold in RSM/PC and revenue generated. Are materials available at doorstep?
- **Anganwadi Sanitation-** Reasons for non use of the watsan facilities. What is the usage pattern of Anganwadi toilets? Analyze the hygiene behaviour of children especially personal hygiene.

- **Community Sanitary Complex-** Type of facilities created in the complex in terms of bathing, laboratory, urinal, toilet, bathing, hand washing etc. Are users satisfied with the construction? Are the locations of community complex appropriate? How sensitization of the community for the construction of community complex has been done? Mention in case study or success stories. Reasons for non use of the complex? Use of hygiene messages on the complex walls?

### **13. Hygiene Education**

- Whether Hygiene Education finds some place in the district? Is it being done for all the people or in only school and Anganwadis? What are the main components of hygiene education? What is the mechanism of implementing hygiene education? Are teachers trained for hygiene education in schools? Are master trainers identified and trained? Is the community aware of preventing wastage of water and avoiding water logging in the vicinity of water sources?

### **14. Community participation**

#### **Construction of Hardware**

- Level of participation of the community especially women along with process adopted in implementation of water sanitation supply project especially in terms of determination of water tariff and contribution for construction for toilet facilities, role of Nodal Department, taking over of completed schemes, accounting system adopted, all records including the VWSC minutes register are properly maintained, role of women, SC/ST and other vulnerable groups, whether proper assessment on certification of quality of construction is done, etc?
- What is level of Community participation in selection of suitable technology for toilets? Who selects a particular system for construction? What is the role of Line department in facilitating various technological options? Are there adequate trained manpower (engineers, pump operators, masons, motivators etc.) to propose and implement the technology. Whether local wisdom regarding availability of water in the vicinity is considered?

#### **Operation and Maintenance**

Whether people are willing to take up O&M? Whether required skills are imparted to the community to take up O&M? Whether the water tariff and contribution for O&M for toilet facilities being collected regularly? What is the role played by Line department after handing over the water supply and sanitation schemes to the community?

#### **O&M arrangement of the following:**

- a.) **HH-** Are people educated about how to maintain the toilet? Have they been given necessary inputs/training about it? Are the toilets being maintained properly? Who maintained the toilets – Beneficiary or Sweepers? Is there any problem of collapsing of the pits?
- b.) **School-** What is the O&M arrangement in the schools? Who cleans the toilets? What is the system of resource/fund mobilization for the purchasing consumables? Are such systems sustainable? Are school water and sanitation clean smell free. Are school compounds clean and green and classrooms ventilated and lightened?
- c.) **Anganwadi-** What is the system of O&M? Whether they are clean and smell free?
- d.) **Community Complexes-** Complexes are well maintained or not? No of users per day? What is the system of operation and maintenance in terms of involvement of GP, SHGs, etc? Analyze the system and the functioning. Is it based on pay and use or monthly subscription basis or any other arrangement exists? Average maintenance charges levied on community. Are such complexes clean and smell free?
- e.) **Drinking water supply-** Whether people are willing to take up O &M? Whether required skills are imparted to the community to take up O&M? What is the monthly water tariff ? Whether the water tariff is being collected regularly? What is the role played by the Line department after handing over the schemes to the community?

### **Technological Options**

- What kind of technology is being promoted for water and sanitation hardware? (Please list out). What kind of Pan is being use- Rural Pans or Flat Pans? Whether Rs.625 model available for IHHL? What is the average cost of the technology is promoted? Whether the community is aware of testing for quality of construction/ quality of materials used?
- Are child (school) and baby (Anganwadi) friendly norms for construction of hardware followed as prescribed? What is basis of selecting no. of urinals in the design of school toilets?
- In case of Overhead Service reservoirs, whether all technological options are provided to the community along with their cost in water supply? In case of ground water based water supply systems, whether sustainability issues are explained to the community? What is the general preferred option of the community? (tap at house/ stand post/ hand pump etc.) Whether use of hydro-geo-morphological maps is done for making a final choice of source in case of ground water based projects? What is the method adopted for identifying a point on the map to the ground?
- Whether any dry latrines and manual scavenging practice exist? If so, what is the District action plan to convert them to pour flush latrines?
- Any additional guidance on technology issues is required by the district?

#### **15. Miscellaneous**

- Number of PRIs, which attained full sanitation coverage and eliminating the practice of open defecation. What are the success story and case studies of this quarter? What are the lessons learnt? Existing solid and liquid waste management system. Any innovation in water and sanitation sector.

#### **16. What is future planning of PIA to speed the TSC and Swajaldhara?**

#### **17. Key Recommendation**