and the second s			2 4 5 50 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1
LGU Name: ( CARMEN Region: ( 18 - CARAG	) Pi	rovince Nai	me: ( <u>AC</u>	M(AN 16	FL NORT	F
Region: ( 18 - CARAG	<u>2.A</u> ) Pr	ofile Year:	2012			2
Instructions:						1 1 1 1 1 1
<ol> <li>Put a (✓) check mark across (CHT) that is met by each CH</li> <li>Count the total number of its below) and supply it as number Health Teams".</li> </ol>	-IT in the LO unctional Ch	3U. TTs (those v	vhich have r	net all the	criteria list	ed
Criteria of a Functional	CHT 1	CHT 2	CHT 3	CHT 4	CHT 5	***
Community Health Team			)	ي ي		
1. Organized and trained	<b>v</b>	V	V	V.	<b>~</b>	
2. Deployed in CCT-NHTS areas in	<b>V</b>	1	<b>V</b>	<b>√</b>	V	
the LGU					1	-
3. Visited the CCT-NHTS families at least twice in the reporting year	<b>-</b>	/	<b>V</b>		_	
4. Submitted the following						
reports:	<u>.</u>		1			
4.A Health Risk Assessment Report	<b>*</b>	~	<b>/</b>	<b>✓</b>	/	
4.B Health Use Plan	/	/	V	V	1	
4.C Report of a follow-up of						
identified pregnant women	V			. ✓	V	1
(at least 2 follow-ups)						
4.D Birth Plan and referral to						
health facilities	V	· ·	V	v.	V	
No. of Fully-functional CHTs						
Total No. of	1	-			to a second	Kinney Comment
Functional CHTs	5			* .		

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LGU Name: ( CARMEN Bogies) / 18 CARAGA	) P	rovince Nai	ne: ( <u>A</u>	Collsto	PEL NORTE	)
Region: ( 18 CARAGE	) Pr	ofile Year:	2012			
Instructions:						
<ol> <li>Put a (</li> <li>check mark across each criteria on the functionality of a Community Health Team (CHT) that is met by each CHT in the LGU.</li> <li>Count the total number of functional CHTs (those which have met all the criteria listed below) and supply it as numerator of Indicator No. 17 "Percentage of Functional Community Health Teams".</li> </ol>						
Criteria of a Functional	CHT 4	CHT 7	CHT g	CHT 9	CHT /o	
Community Health Team						
1. Organized and trained	<b>V</b>	✓	*	✓	/	
2. Deployed in CCT-NHTS areas in	1	7	<b>/</b>	1	<b>√</b>	
the LGU						
3. Visited the CCT-NHTS families	V	/	<b>V</b>	<b>V</b>	<b>√</b>	
at least twice in the reporting						
year						
4. Submitted the following			ī			
reports:		1				7 K
4.A Health Risk Assessment Report	/	/	·	✓	~	Transferri
4.B Health Use Plan	V	<b>~</b>	1	. 1	✓	•
4.C Report of a follow-up of						
identified pregnant women	· •	· ·	✓	✓	√'	
(at least 2 follow-ups)						
4.D Birth Plan and referral to	ļ					
health facilities	V	✓	<b>√</b>	✓	√	
No. of Fully-functional CHTs						
Total No. of	5		lei i	5	50.0	

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The second secon						
LGU Name: (CAR_MEN	) Pi	rovince Nan	ne: ( <u>AC</u>	cuspn be	L HOVETE	)
Region: ( 13 - CARAGOA	) Pr	ofile Year:	2012			
Instructions:						
<ol> <li>Put a (✓) check mark across (CHT) that is met by each CI</li> <li>Count the total number of forbelow) and supply it as number the total number of forbelow.</li> </ol>	H <b>T in the LG</b> unctional Ch	iU. iTs (those w	hich have n	net <b>all</b> the o	critoria liste ctional Com	ed
Criteria of a Functional	CHT //	CHT 12	CHT 13	CHT 14	CHT 15	
Community Health Team						
1. Organized and trained	*	¥	¥ <sup>*</sup>	V.	V	
2. Deployed in CCT-NHTS areas in	<b>√</b>	<b>√</b>	<b>√</b>	✓	<b>√</b>	
the LGU						
3. Visited the CCT-NHTS families	<b>V</b>	<b>✓</b>	√'	✓	✓	
at least twice in the reporting	]					
year						
4. Submitted the following						
reports:		-				
4.A Health Risk Assessment	/	<b>/</b>	✓	·	/	
Report 4.B Health Use Plan	/	<b>√</b>	/	✓	1	1
4.C Report of a follow-up of	Y	· ·	v	,	,	-
identified pregnant women			V		V	
(at least 2 follow-ups)						1
4.D Birth Plan and referral to					B 1 (41 ) 1 (4	
health facilities	ν.	✓	v*	√′	√ ·	
No. of Fully-functional CHTs						
Total No. of	5	ł	L		0:	-
Functional CHTs	5					

LGU Name: (CARMEN) Province Name: (_AGUGAN BT2 NTICTE)  Region: (_12) - CAR AGEN) Profile Year: 2012						
Region: (13-CAR AGEN	) Pr	ofile Year:	2012			
Instructions:						
<ol> <li>Put a (✓) check mark across (CHT) that is met by each Ch</li> <li>Count the total number of ft below) and supply it as number Health Teams".</li> </ol>	HT in the LG Inctional Ch	iU. ITs (those w	hich have n 17 "Percent	net all the c age of Func	criteria liste tional Comi	d
Criteria of a Functional	CHT /(o	CHT /7	CHT 18	CHT 19	CHT 20	
Community Health Team						
1. Organized and trained	v	<b>V</b>	√	V	~	
2. Deployed in CCT-NHTS areas in	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	
the LGU	ĺ					
3. Visited the CCT-NHTS families	7		7	<b>V</b>	<b>V</b>	
at least twice in the reporting						
year						
4. Submitted the following						
reports:						William Co.
4.A Health Risk Assessment	1		/	V	1	4 1
Report				)		
4.B Health Use Plan	V	<b>✓</b>	✓	✓	1	- -
4.C Report of a follow-up of			,		,	-
identified pregnant women	/	, i	<b>∀</b>	\	. √	
(at least 2 follow-ups)						
4.D Birth Plan and referral to	_		J	<b>V</b>	<b> </b> √	1
health facilities	1	1				1
No. of Fully-functional CHTs				L		<u> </u>
Total No. of Functional CHTs	5					

LGU Name: ( CARLINE ) Province Name: ( ACCUSAN PERNOME)								
Region: (								
Instructions:								
<ol> <li>Put a (&lt;) check mark across each criteria on the functionality of a Community Health Team (CHT) that is met by each CHT in the LGU.</li> <li>Count the total number of functional CHTs (those which have met all the criteria listed below) and supply it as numerator of Indicator No. 17 "Percentage of Functional Community Health Teams".</li> </ol>								
Criteria of a Functional Community Health Team	CHT 21	CHT 22	CHT23	CHT 24	CHT 25			
1. Organized and trained	<b>/</b>	1	V	V	1			
2. Deployed in CCT-NHTS areas in the LGU	· .	7		7				
3. Visited the CCT-NHTS families at least twice in the reporting year	<b>~</b>	<b>√</b>		·	<i>,</i>			
4. Submitted the following								
reports:  4.A Health Risk Assessment Report	·	-	·	·	<b>~</b>			
4.B Health Use Plan 4.C Report of a follow-up of	· /	Y	V	· ·	·	3		
identified pregnant women (at least 2 follow-ups)	v .	·	·	<b>√</b>	√·			
4.D Birth Plan and referral to health facilities	·	·	<b>/</b>	_	v	i		
No. of Fully-functional CHTs								
Total No. of Functional CHTs	5		- M 30	** ***********************************				

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LGU Name: ( CAR MET) Region: ( 13 - CAR	) Pi	ovince Na	me: (AC	eusan	OFL WORD	F			
Region: ( 13 - CARACOA) Profile Year: 2012									
Instructions:	Instructions:								
<ol> <li>Put a (&lt;) check mark across each criteria on the functionality of a Community Health Team (CHT) that is met by each CHT in the LGU.</li> <li>Count the total number of functional CHTs (those which have met all the criteria listed below) and supply it as numerator of Indicator No. 17 "Percentage of Functional Community Health Teams".</li> </ol>									
Criteria of a Functional	CHT 26	CHT	CHT	CHT	СНТ	•••			
Community Health Team			<u></u>						
1. Organized and trained	¥								
2. Deployed in CCT-NHTS areas in	V			<del> </del>	1	1			
tne LGU	1114		To another transmission of the state of the			1			
3. Visited the CCT-NHTS families	<b>V</b>	Ale and adverse	2011	1		1			
at least twice in the reporting	10		1	Ĺ					
year									
4. Submitted the following					-				
reports:			į						
4.A Health Risk Assessment Report	·								
4.B Health Use Plan									
4.C Report of a follow-up of	٧		İ						
identified pregnant women			1	-		1			
(at least 2 follow-ups)			į			7			
4.D Birth Plan and referral to				1					
health facilities	V		1						
No. of Fully-functional CHTs		77 77 77 77 77 77 77 77 77 77 77 77 77	! !						
Total No. of	- I		<u> </u>	<u> </u>	<u></u>				

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