# Home-based Record Users and Actions



Home-based records (HBR) are an important tool for achieving, monitoring, and sustaining vaccination coverage. HBRs, alternatively known in countries as the child health card, maternal and child health booklet or handbook, vaccination card, road-to-health card, or other terms, serve three primary user groups:

## Health Workers (HW) & Community Health Workers (CHW) / Mobilizers

The HW is the primary user who writes in the HBR. HWs rely on this tool as a source of data to determine and enter information on which vaccines a child has received and which they are due for on a given day. They also provide reminders on when to return for the next vaccination.

In most countries, CHWs can serve as a link between HWs and caregivers to communicate content of the HBR and remind parents what antigens the infant should receive and when and where to go for vaccination services.

### Caregiver/Parents

It is the right of every caregiver/parent to know what immunizations and other health services their child has received. The HBR is a record of this information that is maintained in the family home and should be brought to each vaccination session

If a child visits multiple health facilities because of moving, living in an urban area, or for other reasons, the HBR is the main source of information that is needed when visiting a new facility.

The HBR may also be required as proof of vaccines received for international travel and school entry when the child is older.

#### Public Health Administration (Manager)



National program managers, mid-level managers, and supervisors rely on the information

in the HBR to monitor the immunization program, including for surveys and surveillance. Without an HBR, it is difficult to verify a child's immunization status, as parental recall may not be accurate.

The HBR is used during supervision, data quality reviews, and training. It also is used for reporting on immunization indicators. There is an inter-active relationship between each of these different groups when they use the HBR. Each group has different reasons for valuing the HBR and must have responsibility for the data within it and/or do specific actions related to the HBR. For example, during their supervision visits and data checks, managers should be monitoring that the HBRs are available (i.e. no stock outs) and being used by the HWs and caregivers. Similarly, the HWs should be completing and referring to the HBRs (and discussing HBR content with caregivers and CHWs) when they conduct their immunization and growth monitoring sessions at the facility, during outreach visits and for infant tracking. HWs should also compare HBRs with registers and other tools when they consolidate data for daily and monthly reports to send to their district/higher-level supervisors and in the health information system.

#### These responsibilities and actions are outlined in the graphic below:

**Public Health Administration** 

Reporting tool for immunization

ACTION

# DEMAND HBRs almulois along the second of the ST STATISTICAL STANDS FOR RESOURCE AT Survey reference document • Use in supervision and data quality audits Surveillance and medical verification Health Worker & CHW/Mobilizer • Recording tool for vaccinations • Counseling tool with parents and for mobilizers Link with registers and tallying BRING TO VACCINATION CONSULTATION SESSIONS AND KEEP USE FOR IPC, COUNSELING, TO UPDATE DATA, AND TO VERIFY A CHILD'S SHITIS

**Parents/Caregivers** 

Record of child's vaccination and health status for history, travel,

Reference guide including key messages, actions, return date