SMCH/HCDS/16: Job responsibilities of Health Workers (Male & Female)

Quadrant-I

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Description of Module

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Introduction

Health worker male is a worker posted at sub entered he plays a significant role in relation to malaria, TB, Leprosy. School health including nutrition and recording of vital events as well as record keeping are his major responsibilities.

Learning Outcomes

Upon completion this module, the reader should be able to:

- State responsibilities of Health Worker Male (MPW) in Malaria, TB and Leprosy
- Mention role of MPW (Male) in Preventive Health Care
- Mention role of MPW (Male) in School Health including Nutrition
- State role of MPW in UIP & RCH
- Enumerate role of MPW in Vital Events and Record Keeping

Main Text

Job responsibilities of health worker (male)/multipurpose worker

Based on the Indian Public Health Standards (IPHS) guidelines; MPHW (Male) will mainly focus on activities which are related to disease control programs, detection and control of epidemic outbreaks, environmental sanitation, safe drinking water, first aid in emergencies like accidents, injuries, burns etc., treatment of common/ minor illnesses, communication and counselling, life style diseases and logistics and supply management at sub-centre. In addition he will also facilitate ANM in MCH, Family Welfare, and Nutrition related activities.

The broad areas of job responsibilities of MPHW (Male) would broadly include the following –

1. Responsibilities of Health Worker Male (MPW) in Malaria, TB and Leprosy

1.1 Malaria

a. Conduct domiciliary house-to-house visits covering all the assigned population as per the schedules approved by the PHC Medical Officer. During his visits, he shall enquire about fever cases in each family and verify the cases diagnosed positive after the last visit.

b. Collect blood smears and perform RDT from suspected fever cases and appropriately maintain records in M-1.

c. Ensure immediate dispatch of collected blood smears for laboratory investigations and provide treatment to positive cases as per the guidelines

Advise all seriously ill cases to visit PHC for immediate treatment and refer all fever cases with altered sensorium to the PHC / hospital and arrange funds for transportation of such cases from NRHM/ other funds.

e. Undertake necessary measures to contain the spread of disease as advised by PHC Medical officer.
f. Liaison with ASHA / Village Health Guide / Anganwadi Worker for early detection of malaria, replenish the stocks of microscopy slides, RDKs and / or drugs.

g. Ensure treatment for all diagnosed cases as per the instructions by the PHC medical officer and also take prompt actions for adverse reactions reported.

h. Intimate each household in advance regarding date of spraying and other public health activities as well as duly explain the benefits of such activities to the community.

i. Supervise the spraying operations and deploy the two squads in adjoining areas for adequate supervision. Ensure the quality of spraying operations for uniformity in coverage of all the surfaces as well as due precautions regarding water sources and personal hygiene as per the guidelines.

j. Maintain the records of domiciliary visits, blood smears collected, patients given anti-malarials, details of spraying operations etc in the prescribed formats.

1.2 Tuberculosis (RNTCP)

a. Identify all cases of fever for over two weeks with prolonged cough or spitting of blood and refer to PHC for further investigation. Verify the TB patients self reporting at health facilities.

b. Function as DOTS provider to ensure that all confirmed cases are on regular treatment and motivate defaulters for regular treatment.

c. Improve community awareness on signs and symptoms of tuberculosis and guide the suspected TB cases for referral to the designated microscopy centres and facilitate sputum examinations.

d. Assist and supervise the ASHAs / Anganwadi Workers / Village Health Guides / local health volunteers to function effectively as DOTS providers by ensuring regularity of DOTS, schedule the DOTS as per patient’s convenience and collection of empty blister packs.

e. Ensure that follow up smear examinations of sputum are carried out as per the schedules.

f. Maintain the treatment cards and transmit the data weekly to the PHC.

g. Maintain the records of domiciliary visits, records of patients on treatment, sputum examinations etc.

1.3 Leprosy

a. Identify Leprosy suspected cases of skin patches with loss of sensation and refer to PHC.

b. Provide Multi Drug Treatment (MDT) to confirmed cases and ensure completion of treatment including retrieval of defaulters.

c. Guide leprosy patients with deformities for management at appropriate health facilities.

d. Assist and supervise the ASHAs / Anganwadi Workers / Village Health Guides / local health volunteers for early detection of Leprosy cases and treatment.

e. Improve community awareness on signs and symptoms of Leprosy for early detection.

f. Maintain the treatment cards and transmit the data to the PHC.

g. Maintain the records of domiciliary visits and records of patients on treatment.
2. Role of MPW (Male) in Preventive Health Care

a. Surveillance for unusually high incidence of cases of diarrhoeas, dysentery, fever, jaundice, diphtheria, whooping cough, tetanus and other communicable disease and notify PHC.

b. Ensure regular chlorination of all the drinking water sources. Collect water samples regularly, send for testing at sub- distt & distt hospitals and undertake appropriate actions for provision of safe drinking water supplies.

c. Generate community awareness regarding safe drinking water, sanitation, waste disposal and personal hygiene and ensure safe disposal of liquid/ solid wastes.

d. Assist and coordinate with the VHSC and SHC / PHC Committees as well community leaders for health awareness and preventive health care activities.

3. Role of MPW (Male) in School Health including Nutrition

a. Visit all the schools in the assigned area and advocate personal hygiene, nutrition, safe drinking water and sanitation and other public health measures.

b. Undertake awareness generation of national health programmes (Malaria, TB, Leprosy etc) for early detection of communicable and non-communicable diseases.

c. Ensure completion of immunisation schedules including Inj. TT as per guidelines.

d. Assist Ophthalmic Assistant for eye screening of children for detection of visual defects.

e. Identify cases of malnutrition in school children and refer cases to PHC Medical Officer. Guide teachers and parents on nutrition and anaemia. Educate the community about nutritious diet for mothers and children from locally available foods.

4. Role of MPW (Male) in UIP & RCH

4.1. Universal Immunization Programme

a. Administer DPT vaccines, oral Poliomyelitis vaccine, measles vaccine, hep B vaccine and BCG vaccine to all infants and children in his area in collaboration with health worker female.

b. Assist the health worker female in administration of tetanus toxiod to all pregnant women.

c. Assist the health supervisor male/health supervisor female in the school health programme

d. Educate the people in the community about the importance of immunisation against the various communicable diseases.

4.2. Reproductive And Child Health Programme (RCH)

a. Utilize the information from the eligible couple and child register for the family planning Programme.

b. Spread the message of family planning to the couples and motivate them for family planning individually and in groups.
c. Distribute conventional contraceptives and oral contraceptives to the couples.

d. Help prospective acceptors of sterilization in obtaining the services, if necessary by accompanying them or arranging for ASHA or dai to accompany them to the PHC/Hospital.

e. Provide follow up services to male family planning acceptors, and refer those cases that need attention by the physician to PHC/Hospital.

f. Build rapport with satisfied acceptors, village leaders, ASHA, Dais and others and utilize them for promoting family welfare programme.

g. Assist the health supervisor male in training the leaders in the community and in educating and involving the community in Family Welfare Programme.

h. Identify the women requiring help for medical termination of pregnancy, refer them to the nearest approved institution and inform the health worker female.

i. Educate the community on the availability of service for Medical Termination of Pregnancy.

j. Educate community on home management of diarrhoea and ORS.

k. Report any outbreak of diarrhoea disease.

5. Role of MPW(Male) in Vital Events and Record Keeping

5.1. Vital Events

a. Enquire about births and deaths occurring in his area, record them in the births and deaths register and report them to the Health Supervisor Male/ ANM.

b. Educate the community on the importance of registration of births and deaths.

5.2. Record Keeping

a. Survey all the facilities in his area and prepare/maintain maps and charts for the village.

b. Prepare maintain utilize family and village records.

c. Assist the Health Worker Female/ ANM to prepare the eligible couple and child register and maintaining it up to date.

d. Maintain a record of cases in his area as to who are under treatment for tuberculosis and leprosy.

e. Prepare and submit the prescribed monthly reports in time to the Health Supervisor male.

f. While maintaining passive surveillance register for malaria cases, he will record:

- No. of fever cases
- No. of blood slides prepared
- No. of malaria positive cases reported
- No. of cases given treatment
Job responsibilities of health worker (Female)/Auxillary Nurse Midwife (ANM)

Introduction

Health worker female is staff posted at sub-centre. She is the key worker for reproductive and child health

Learning Outcomes

Upon completion this module, the reader should be able to:

- State responsibilities of Health Worker Female (ANM) in MCH, FP and MTP.
- Mention role of ANM in UIP & Nutrition
- Enumerate role of ANM in Dai training
- Mention role of ANM in Communicable Diseases
- Mention role of MPW in Vital Events and Record Keeping
- Identify role of ANM in treatment of minor ailments
- State role of ANM in team activity

Main Text

1. Responsibilities of Health Worker Female (ANM) in MCH, FP and MTP

1.1. Maternal and Child Health: Based on the Indian Public Health Standards (IPHS) guidelines

- Register and provide care to pregnant women throughout the period of pregnancy. Registration of a pregnant woman for ANC should take place as soon as the pregnancy is suspected ideally in the first trimester (before or at 12th week of pregnancy). However, even if a woman comes late in her pregnancy for registration, she should be registered, and care given to her according to gestational age.
- Ensure that every pregnant woman makes at least 3 (three) visits for Ante Natal Check-up. First visit to the antenatal clinic as soon as pregnancy is suspected / between the 4th and 6th month (before 26 weeks), 2nd visit at 8th month (around 32 weeks) and 3rd visit at 9th month (around 36 weeks). Provide antenatal check-ups and associated services such as IFA tablets, TT immunization etc.
- Test urine of pregnant women for albumin and sugar. Estimate haemoglobin level.
- Refer all pregnant women to PHC for RPR test for syphilis.
- Refer cases of abnormal pregnancy and cases with medical and gynaecological problems to Health Assistant Female (LHV) or the Primary Health Centre.
- Conduct deliveries in her area when called for.
- Supervise deliveries conducted by Dais and assist them whenever called in.
- Refer cases of difficult labour and newborns with abnormalities, help them to get institutional care and provide follow up to the patients referred to or discharged from hospital.
- ANM will identify the ultimate beneficiaries, complete necessary formalities and obtain necessary approvals of the competent authority before disbursement to the beneficiaries under Janani Suraksha Yojana (JSY) and by 7th day of each month will submit accounts of the previous month in the prescribed format to be designed by the State. ANM will prepare a monthly work schedule in the meeting of all accredited workers to be held on every 3rd Friday of every month, which is mandatory. The guideline under JSY is to be followed.
• Make at least two post-natal visits for each delivery happened in her area and render advice regarding care of the mother and care and feed of the newborn.
• Assess the growth and development of the infant and take necessary action required to rectify the defect.
• Educate mothers individually and in groups in better family health including maternal and child health, family planning, nutrition, immunization, control of communicable diseases, personal and environmental hygiene.
• Assist Medical Officer and Health Assistant Female in conducting antenatal and postnatal clinics at the sub-centre.

1.2. Family Planning:
• Utilise the information from the eligible couple and child register for the family Planning programme. She will be squarely responsible for maintaining eligible couple registers and updating at all times.
• Spread the message of family planning to the couples and motivate them for family planning individually and in groups.
• Distribute conventional contraceptives and oral contraceptives to the couples, provide facilities and to help prospective accept to family planning services, if necessary, by accompanying them or arranging for the Dai/ASHA to accompany them to hospital.
• Provide follow-up services to female family planning acceptors, identify side effects, give treatment on the spot for side effects and minor complaints and refer those cases that need attention by the physician to the PHC/Hospital.
• Establish female depot holders, help the Health Assistant Female in training them, and provide a continuous supply of conventional contraceptives to the depot holders.
• Build rapport with acceptors, village leaders, ASHA, Dais and others and utilize them for promoting Family Welfare Programme.
• Identify women leaders and help the Health Assistant Female to train them.
• Participate in Mahila Mandal meetings and utilize such gatherings for educating women in Family Welfare Programme.

1.3. Medical Termination of Pregnancy
• Identify the women requiring help for medical termination of pregnancy and refer them to nearest approved institution.
• Educate the community of the consequences of septic abortion and inform them about the availability of services for medical termination of pregnancy.

2. Role of ANM in UIP & Nutrition

2.1. Nutrition
• Identify cases of malnutrition among infants and young children (zero to five years) give the necessary treatment and advice and refer serious cases to the Primary Health Centre
• Distribute Iron and Folic Acid tablets rs in getting as prescribed to pregnant nursing mothers, and young children (up to five years) as per the guidelines
• Administer Vitamin A solution to children as per the guidelines.
• Educate the community about nutritious diet for mothers and children.
• Coordinate with Anganwadi Workers.
2.2. Universal Programme on Immunization (UIP)
- Immunize pregnant women with tetanus toxoid.
- Administer DPT vaccine, oral poliomyelitis vaccine, measles vaccine and BCG vaccine to all infants and children, (Hepatitis-B in pilot areas) as per immunization schedule
- Ensure injection safety.

3. Role of ANM in Dai training
- List Dais in her area and involve them in promoting Family Welfare.
- Help the Health Assistant Female / LHV in the training programme of Dais.

4. Communicable Diseases
- Notify the M.O. PHC immediately about any abnormal increase in cases of diarrhoea/dysentery, fever with rigors, fever with rash, fever with jaundice or fever with unconsciousness which she comes across during her home visits, take the necessary measures to prevent their spread, and inform the Health Worker Male to enable him to take further action.
- If she comes across a case of fever during her home visits she will take blood smear, administer presumptive treatment and inform Health Worker female for further action.
- Identify cases of skin patches, especially if accompanied by loss of sensation, which she comes across during her homes visits and bring them to the notice of the Health Worker Male/MO (PHC).
- Assist the Health Worker Male in maintaining a record of cases in her area, who are under treatment for malaria, tuberculosis and leprosy, and check whether they are taking regular treatment, motivate defaulters to take regular treatment and bring these cases to the notice of health worker Male or Health Assistant Male.
- Give Oral Rehydration Solution (ORS) to all cases of diarrhoea/dysentery/vomiting.
- Identify and refer all cases of blindness including suspected cases of cataract to M.O. PHC.
- Education, Counselling, referral, follow-up of cases STI/RTI, HIV/AIDS.
- Where Filaria is endemic:
  - Identification of cases of lymphoedema / elephantitis and hydrocele and their referrals to PHC/CHC for appropriate management.
  - Training of patients with lymphoedema / elephantitis about care of feet and with home based management remedies.
  - Identification and training of drug distributors for mass drug distribution of DEC on National Filaria Day.

5. Role of MPW(Female) in Vital Events and Record Keeping

5.1. Vital Events
- Record and report to the health authority of vital events including births and deaths, particularly of mothers and infants to the health authorities in her area.
- Maintenance of all the relevant records concerning mother, child and eligible couples in the area.

5.2. Record Keeping
Register (a) pregnant women from three months of pregnancy onward (b) infants zero to one year of age; and (c) women aged 15 to 44 years.

- Maintain the pre-natal and maternity records and child care records.
- Prepare the eligible couple and child register and maintaining it up-to-date
- Maintain the records of contraceptive distribution, IUD insertion. Couples sterilized, clinics held at the sub-centre and supplies received and issued.
- Prepare and submit the prescribed weekly / monthly reports in time to the Health Assistant Female.
- While maintaining passive surveillance register for malaria cases, she will record:
  - No. of fever cases
  - No. of blood slides prepared
  - No. of malaria positive cases reported
  - No. of cases given radical treatment

6. Treatment of minor ailments

Provide treatment for minor ailments, provide first-aid for accidents and emergencies and refer cases beyond her competence to the Primary Health Centre/Community Health Centre or nearest hospital.

7. Team Activities

- Attend and participate in staff meetings at Primary Health Centre/Community Development Block or both.
- Coordinate her activities with the Health Worker Male and other health workers including the Health volunteers/ASHA and Dais.
- Coordinate with the PRI and Village Health and Sanitation Committee.
- Meet the Health Assistant Female each week and seek her advice and guidance whenever necessary.
- Maintain the cleanliness of the sub-centre.
- Dispose medical waste as per the guidelines.
- Participate as a member of the team in camps and campaigns.

Summary

The responsibility of MPHW (Male) mainly focuses activities are related to disease control programs, detection and control of epidemic outbreaks, environmental sanitation, safe drinking water, first aid in emergencies like accidents, injuries, burns etc., treatment of common/ minor illnesses, communication and counselling, life style diseases and logistics and supply management at sub-centre and in addition also facilitate ANM in MCH, Family Welfare, and Nutrition related activities.

The ANM focus is mainly on the MCH related activities, in addition she also performs the function of maintenance of records through various registers, vital events registration etc. She also acts as a resource person for the training of ASHA.

Reference: