

MULTIPURPOSE HEALTH WORKER

INTRODUCTION

Health is a fundamental human right. Maintenance of optimum level of Health entails individual as well as social responsibility. However, health can never be adequately protected by health services without active involvement of the community. Believes that MPHW plays a vital role in the rural health care. He should be sensitive and accountable to meet the health needs of the community. He should be able to provide accessible, equitable, affordable, and quality health care. MPHW can act as a catalyst for promoting inter-sectoral convergence in promotive and preventive health care. MPHW curriculum intends to prepare skilful and effective male health workers to achieve the goals of National Rural Health Mission, Which aims at bringing about dramatic improvement in the health system and health status of the country.

MULTIPURPOSE HEALTH WORKER

The Department of Intermediate Education is providing certain Health & Para Medical Course at + 2 level in Andhra Pradesh. An essential feature of education is that it should be need based, socially relevant and lead to meaningful employment. The competency based curriculum is one, which imports the knowledge & skills required to execute various responsibilities and activities involved in a particular field. Infection diseases such as HIV/AIDS, TB, Leprosy and Malaria can be prevented and health promotion can be strengthened for all ages especially maternal and child health.

Multipurpose Health Worker is one of such popular Course, which is aimed at meeting the basic health needs of the community. The pass outs of this course have the opportunity to be employed as Multipurpose Health Worker.

The MPHW (Male) training course duration, which was initially of 1 ½ years was reduced to one year from 1987 & The MPHW (Female) training course duration, which was initially of 2 ½ years (2years course +6 month intership). The syllabus revised all most in 1991 included four months field training at PHCs. The candidates admitted for the course are bonded for minimum period of 3 years on completion of the course. The training included basic health science, public health including sanitation, primary health care, community health, communicable diseases, national health programmes, maternal and child health, and basic medical care (treatment of minor ailments, first aid, emergency care, health education). The practical training areas included surveillance for diarrhoeal diseases, worm infestations, malnutrition in children and women, typhoid, malaria, filarial, TB, Leprosy, STD/AIDS as well as drug dispensing, dressing of Wounds, collection of blood smears, chlorination of drinking water, disinfection, school health, surveys, notification of disease and statistics

Objectives of Training

The overall objective of the MPHW (Male) training is to impart knowledge and skill sets to equip them to carry out core activities in the field of preventive and control of diseases of public health importance, environmental sanitation, health education detection and control of epidemic prone diseases, first aid in emergencies such as accidents, injuries, burns etc. and treatment of minor illnesses. The specific objectives of the training are indicated below:-

- a. To impart basic knowledge of environmental sanitation, safe-drinking water and other public health measures.
- b. To develop competency in early identification and treatment of diseases under national health programs in the community and extend referral services.
- c. To enable MPHW to take public health action in the event of an outbreak (fever, diarrhea, acute respiratory infections, jaundice etc.)
- d. To provide first aid emergencies, accidents and injuries and treatment for minor ailments.
- e. To impart health education and health promotion practices in respect of life style diseases.
- f. Identify cases of malnutrition in school children and refer cases to PHC Medical officer. Guide teachers and parents on nutrition and anemia. Educate the community about nutritious diet for mothers and children from locally available foods.

1. Maternal Health including Family Planning

- a. Assist in ensuring timely referral transport for pregnant women at the time of delivery.
- b. Provide follow-up services for acceptors of male sterilization and also motivate males for sterilization and spacing methods based on ANMs eligible couple register.
- c. Assist the ANMs and ASHAs in distribution of conventional contraceptive to eligible couples.

2----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 in 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. Preventive Health Care

- a. Surveillance for unusually high incidence of cases of diarrhoeas, dysentery, fever, jaundice, diphtheria, whooping cough, tetanus, Polio and other communicable disease and notify PHC.
- b. Ensure regular chlorination of all the drinking water sources. Collect water samples regularly, send for testing 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 -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 immunization schedules including Inj. TT as per guidelines.
- d. Assist Ophthalmic Assistant for eye screening of children for detection of visual defects.
- e. Advise all seriously ill cases to visit PHC for immediate treatment and refer all fever case with altered sensorium to the PHC/hospital and arrange funds for transportation of such cases from NRHM/other funds.
- f. Undertakes necessary measures to contain the spread of disease as advised by PHC Medical Officer.
- g. Liaison with ASHA/Village Health Guide/Anganwadi worker for early detection of malaria, replenish the stock of microscopy slides, RDKs and/or drugs.
- h. Ensure treatment for all diagnosed cases as per the instruction by the PHC medical officer and also take prompt actions for adverse reactions reported.
- i. Intimate each house hold in advance regarding date of spraying and other public health activities as well as duly explain the benefits of such activities to the community.

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

3. 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 investigations. 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 centers 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.
- h. The selection of the candidate should be on merit basis taking into account the total marks (including languages) obtained in XII Board Examination. In case of notified tribal areas, where class XII pass candidates are not available, merit list should be prepared on basis of total marks obtained in class X examinations.
- i. The selected candidate must execute a bond for serving in the Gram Panchayat/Block area for a minimum period of 5years failing which he will be liable to remit back a fixed amount as determined by the State Government.
- j. Where the existing recruitment rules For MPHWH (Male) prescribe different eligibility criteria, the state governments should review them to suitably incorporate the eligibility criteria recommended above.

4. 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.

MPHWH (Female)- SYLLABUS ----2 ½ year course(2years course +6 month internship) Total max.marks—1200.

First year	Second/Final years
<p><u>First paper – Community Health Nursing – M.Marks- 100.</u> Topics-concept of health, community health practice, health problem & policies, health organization/agencies, roll of health team, structure & dynamics of community, communication, counseling, community based rehabilitation.</p>	<p><u>First paper– Child & Maternal Health Nursing & care M..marks- 100. Topics – Modern Concept Of Child Care, The Healthy Child, Nursing Care Of A Neonat, Problems In Children</u></p>
<p><u>Second paper- Anatomy &Physiology – M. Marks- 100.</u> Topics–Cardio a vascular system ,Blood, blood vessels, Digestive system ,Liver ,gallbladder ,pancreases’, Respiratory system ,mycology, skeleton system, Brain,</p>	<p><u>Second paper- Anatomy & Physiology – M. marks- 100.</u> Topics Lymphaticsystem, endocrine, system, metabolism, urinary system, Reproductive system male/female.</p>

Nervous system ,	
<u>Third paper-Primary health nursing & care, M. marks- 100.</u> Topics –communicable disease, community health problem, immunization infection, microbiology, pharmacology & first Aid.	<u>Third paper- Midwifery, M. marks- 100.</u> topics-human reproductive system, oogenesis & spermatogenesis normal & abnormal, pregnancy normal & abnormal ,preeclampsia & eclampsia ,Labor ,abortion ,fertility & infertility male/female, care of new born, Fetus & placenta ,drugs use for obstetrics, female pelvis & fetus skull
<u>Fourth paper –Health growth/development- M.Marks- 100.</u> Topics–Nutrition psychology (mental disease), Environmental & Sanitation,	<u>Fourth paper –National Health Program & health center management -M. marks- 100.</u> Topics –National health program for roll of ANM/MPHW female, subcenter, coordination, stocksmaintenance, improving writing & speaking in local language & English.
<u>Practical- 1-(first)-Anatomy, physiology & microbiology.</u> Max marks 100. <u>2(second) - Community health nursing & primary health nursing & care</u> Max marks - 100.	<u>Practical-1-(first)- child nursing & care, anatomy & physiology</u> Max marks - 100. <u>2-(second) - Midwifery</u> Max marks -100.

<u>First paper Community Health Nursing M.marks- 100.</u> Topics-Principal of health, community health practice, health problem & policies, health organization/agencies, roll of health team, structure & dynamics of community, communication, counseling, and community based rehabilitation. Basic human anatomy & physiology.	<u>Second paper- Primary health nursing & care, National health program. M.marks- 100.</u> Topics –communicable disease, community health problem ,immunization & infection ,Nutrition ,psychology (mental disease), Environmental & Sanitation, family planning & family welfare National health program for roll of MPHWMale, subcenter, coordination, stocksmaintenance, improving writing & speaking in local language & English
Practical-1- <u>Community Health Nursing & basic human anatomy & physiology.</u> M.marks- 100.	Practical-2- immunization & National health program, family planning & family welfare M.marks- 100.

Job Responsibilities of MPHW

The MPHW –(female) completed course & training for responsibilities to ANM Post. The DMPHW (Male/Female) course envisage to adequately train the MPHW (Male/Female) to carry out the responsibilities assigned to him. He should make a visit to each family once a month. MPHW (Male/female) 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 counseling, life style diseases and logistics and supply management at sub-center. In addition he will also facilitate ANM in MCh, family welfare, and nutrition related activities. Due importance should be given in assessment of MPHW (Male) training both at institutional and field level accordingly.