No.F.4 (2-1)-DFWPM/GNL/2013  
Government of Tripura  
Directorate of Family Welfare & Preventive Medicine  
Health & Family Welfare Department.  

Dated, Agartala, the 25th October’ 2014.

MEMORANDUM

Functions, responsibilities and duties of Medical Officers In-Charge of Primary Health Centres and Community Health Centres have not been issued in a consolidated manner so far. Instructions were issued time to time on a particular issue or scheme. There is a need to compile and consolidate all the duties and functions of PHCs / CHCs to ensure that Officers are aware of their functions and duties.

Therefore, it has been decided to enumerate the duties and responsibilities of Medical Officers In-Charge of all PHCs/CHCs to ensure smooth functioning and efficient discharge of responsibilities of the Officers. The following duties and responsibilities shall be performed by all the Medical Officers In-Charge of PHCs/CHCs henceforth :

(A) CURATIVE :-

i) To organize & ensure smooth running of OPD and dispensaries. Also to arrange treatment of emergency patients visiting beyond the OPD hours.

ii) To arrange treatment of minor ailments at the PHC and CHC level through ancillary staff and to ensure Laboratory services for proper / diagnosis.

iii) To attend cases referred by ancillary staff/ASHA/teachers and to refer cases after proper screening.

iv) To provide guidance to Nurses, MPWs and ASHAs in treating minor ailments.

v) To visit each HSC once in a month to check the HSC & provide curative services.

vi) To organize/participate in Village Health & Nutrition Day (VHND) once in a month.
(B) **PREVENTIVE & PROMOTIVE :-**

i) To ensure that all staff are well conversant about the National Health & Family Welfare Programmes and supervise the works in the clinics and at community level for providing guidance.

ii) To ensure achievement of targets laid down under National Health Mission and to cooperate with PRIs in the area.

iii) To keep close liaison with BDO/community leaders/social welfare agencies and involve them in promotion of Health Programme to prevent major outbreaks.

iv) To conduct field investigation for assessment of planning strategies & coordinate with AYUSH Wings.

(C) **REPRODUCTIVE & CHILD HEALTH PROGRAMME :-**

- **MCH & FW Services :**

i) To promote institutional delivery and ensure 24 X 7 service delivery, if available.

ii) To provide guidance in Nutrition & Blindness Programmes & coordinate with ICDS.

iii) To ensure early detection of diarrhoea, dehydration and pneumonia and provide treatment.

iv) To provide MCH services i.e. registration, ANC/INC/PNC of mothers and infant / child care at PHC and Sub-Centres.

v) To supervise the treatment of ARI through health supervisors/health workers.

vi) To conduct health check up and follow up in the school at regular intervals.

vii) To ensure FP/FW Programmes and deal with the complications following acceptance of FP methods.

viii) To motive people and organize F.P./ Vasectomy camps including NSV/IUCD.

ix) To seek help from other agencies in implementing preventive and curative health services.

x) To ensure adequate stock of equipments and drugs.

xi) To arrange training of health personnel like ASHAs/AWWs and others in respect of National Health Programmes.

- **Universal Immunization Programme (UIP) :**

i) To plan and implement the UIP for 100% achievement for target population.

ii) To ensure proper storage and supply of vaccines.

iii) To conduct training of staff.
(D) **NVBDC PROGRAMME :-**

- **Malaria :-**
  
i) To provide leadership in administrative and technical matter in surveillance, diagnosis and reporting.

 ii) To guide on treatment protocol and arrange remedial treatment for positive cases.

 iii) To ensure medicine stocks and other logistics for health workers and ASHA and at PHCs/CHCs.

 iv) To ensure proper surveillance / referral services / training / Laboratory services.

 v) To identify high risk HSC/areas for implementing preventive and curative measure with relevant publicity & IEC materials.

 vi) To ensure radical treatment and management of complicated cases with proper referral services.

 vii) **Encephalitis Syndrome / Japanese Encephalitis / Dengue / Chikungunya :-**

 i) To provide prevention and control measure.

 ii) To ensure proper surveillance/diagnosis/treatment/referral services.

 iii) To ensure proper investigation/record/reporting.

 iv) To provide prevention and control measures with proper maintenance of sanitation measure.

 v) To work under provisions of IDSP.

- **Leprosy/Tuberculosis/Blindness :-**

 i) To ensure proper early diagnosis and necessary treatment with follow-up services.

 ii) To ensure Laboratory / Microscopic services with referral services where needed.

(E) **ADMINISTRATIVE WORK :-**

 i) To supervise the work of staff attendance and ensure cleanliness.

 ii) To maintain record/register of all activities/patients.

 iii) To keep up-to-date records of inventory, stores & transport.

 iv) To make requisition for medicines/ drugs etc. well before exhausting the stock.

 v) To supervise/monitor all ongoing health programmes and to hold regular meetings for review.
vi) To ensure regular supply of medicines to HSC / ASHA and visit HSC/AWC regularly.

vii) To receive reports from periphery & despatch them regularly.

viii) Attend PRI meeting and involve PRIs implementation of health programmes.

ix) Check quality of Diet regularly.

x) Hold regular monthly meeting with ASHA and MPWs and give work plan.

xi) Ensure Ambulance in serviceable condition.

xii) Roster of Order of the MOI/C may be issued.

**NATIONAL HEALTH MISSION PROGRAMMES.**

- **Reproductive Maternal Neonatal Child Health + Adolescent :**
  
  i) Deputing trained staff in rational way and monitoring their performance.
  
  ii) Monitoring the performance of VHNDs, JSY, JSSK, IMNCI, Immunization & WIFS.
  
  iii) Preparing Micro plan for 100% coverage of Immunization.
  
  iv) Regular holding of monthly RKS meeting / ASHA Vorosa Divas / LL-NSV-PPIUCD Camp, Health Camps including MMU.
  
  v) Visit every month for cross checking of HMIS data and MCTS data for uniformity, correctness and validation.
  
  vi) Ensure Referral Transport for high risk patients / ensuring follow up treatment of high risk pregnant mothers.
  
  
  viii) Ensure Infection Control.
  
  ix) Ensure functioning of Facility Based New Born Care & Home Based New Care.
  
  x) To monitor RBSK programme & ensure treatment of children referred by teams from schools and AW Centres.
  
  xi) Ensure proper functioning of Yuva Yuvati Clinic and Suraksha Clinic (RTI/STI Clinic) at CHC.
  
  xii) Co-ordination with line Departments for similar activities like VHND, School Children screening etc.
  
  xiii) Making liaison with next level authority to maintain fund flow.
xiv) Proper establishment of BIO-Medical Waste Management.

xv) Co-ordinate / share information with SDM, DM & Collector & State along with line Departments (PRI, ICDS, SWSE, School Education).

xvi) Timely reporting to upward Institutions.

This will come into immediate effect.

(M. Nagaraju)
Secretary to the
Government of Tripura.

Copy to:

1. Director, Health Services.
2. Director, Family Welfare & PM.
3. Director, Medical education.
5. All Chief Medical Officers.
7. Medical Superintendents of District Hospitals.
8. All Sub-Divisional Medical Officers.
9. All Medical Officer In-Charge of PHCs /CHCs.

Copy also to:

1) Principal Secretary to Governor, Tripura.
2) Principal Secretary to Chief Minister, Tripura.
3) PS to Minister, Health & Family Welfare Department.
4) Chief Secretary, Government of Tripura, Agartala.

(M. Nagaraju)
Secretary to the
Government of Tripura