



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

Dated, Agartala, the 22nd 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.
- vii) Maintain Hygiene & Cleanliness of the hospital mainly Labour Room/OT/ANC-PNC Ward/Intensive Care unit.
- 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.

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- 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 22/10/14
(M. Nagaraju)
Secretary to the
Government of Tripura.

Copy to :

1. Director, Health Services.
2. Director, Family Welfare & PM.
3. Director, Medical education.
- ✓ 4. Mission Director, National Health Mission.
5. All Chief Medical Officers.
6. Medical Superintendents of GBP/ IGM/ Cancer Hospitals.
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 22/10/14
(M. Nagaraju)
Secretary to the
Government of Tripura