



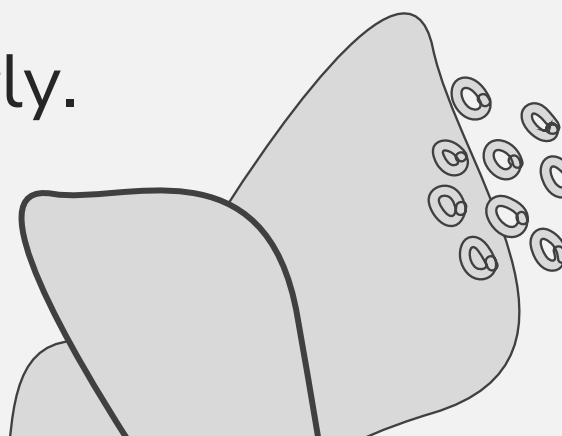
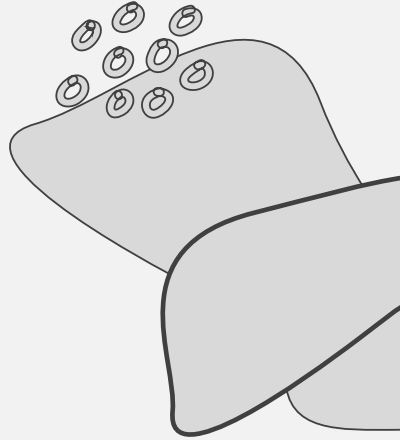
Service Delivery Framework and Role of CHO/SN (AB-HWC-PHC/UPHC) in Eye Care (Chapter 14) For MO





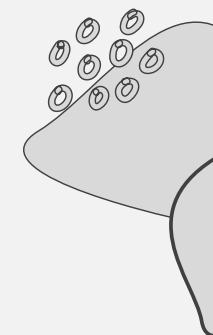
As a Medical Officer (AB-HWC-PHC/UPHC) you should provide leadership, supportive supervision, and coordinate the activities of the team at your AB-HWC-PHC and all the AB-HWC-SHC in your area. You should ensure:

- All ASHA, ANM/MPW, CHO, and Staff Nurse are trained as per requirements for efficient and good quality eye care service provision.
- Work division is clear and non- overlapping.
- All members work as a team and any friction/issue is resolved amicably.
- Each team members maintain records properly.





SERVICE DELIVERY FRAMEWORK FOR EYE CARE SERVICES



Care at Community Level	Care at AB-HWC-SHC	Care at AB-HWC-PHC/UPHC	Care at Vision Centre/Secondary/Tertiary care facility
<ul style="list-style-type: none"> Awareness generation on eye disorders & need of early care seeking through VHSNC/MAS, VHSND/UHSND & other community level meetings (ASHA/AF/MPW) Clarifying misconceptions related to eye care and eye disorders (ASHA/AF/MPW/VHSNC/MAS) Providing information about availability of services related to eye treatment at different levels of healthcare. (ASHA/AF/MPW/VHSNC/MAS) Screening of pre term/LBW newborns for congenital disorders and referral, children and schools for vision problems/visual acuity and adult population for blindness and refractive errors (ASHA/AF/MPW in coordination with RBSK team where needed). Identification/Mobilization of patient with identified eye diseases (ASHA/AF/MPW). 	<ul style="list-style-type: none"> Screening for blindness and refractive errors testing of visual acuity, diagnosis of refractive errors & referral to Vision Centre of those requiring surgery/for management or treatment including provision of spectacles (CHO/MPW) Identification of common diseases of the eye & referral to Vision Centres (CHO) Diagnosis and referral to MO at AB-HWC-PHC (CHO) Regular eye screening and coordination with RBSK team for screening children aged 0-18 years in AWC & schools (CHO) To identify and treat Vitamin A deficiency & Bitot's; and provide Vitamin A prophylaxis (CHO/MPW) Undertake home & community –based follow up visits; along with the ASHA/AF (CHO/MPW) 	<ul style="list-style-type: none"> The MO(MBBS) at the AB-HWC-PHC/UPHC: responsible for ensuring eye care services at the AB-HWCs in his/her area (MO) Examination & diagnosis of all eye cases referred from community or AB-HWC-SHC (MO) Diagnosis & treatment of common eye diseases (MO) Primary eye care for trauma (MO) Screening & glaucoma & referral for medical treatment/surgery (MO) Screening for diabetic retinopathy, using non-mydratic fundus camera & facilitating consultation with eye specialist at early stage with referral for further treatment (MO) 	<ul style="list-style-type: none"> Eye Screening Camp-Assist district team during eye screening/outreach camps (OA) Diagnosis for refractive errors & provision of free spectacles to patients diagnosed with presbyopia & school children with refractive errors (OA) Collaboration with RBSK team to provide spectacles to children with refractive errors (OA) Identification of operable cataract, screening for glaucoma & referral for medical treatment/surgery; follow-up of post-operative patients (OA) Screening for diabetic retinopathy, using non-mydratic fundus camera & facilitating consultation with eye specialist at early stage with referral for further treatment (OA) Referral for advice to eye specialist for corneal blindness & follow instructions given by specialist (QA)



SERVICE DELIVERY FRAMEWORK FOR EYE CARE SERVICES



Care at Community Level	Care at SHC-HWC	Care at AB-HWC-PHC/UPHC	Care at Vision Centre/Secondary/Tertiary care facility
<ul style="list-style-type: none"> Ensuring Vitamin A prophylaxis routinely for children aged 6 months to 5 years. (ASHA/AF/MPW) Referral of patients with eye/vision problems to the nearest AB-HWC and follow-up. (ASHA/AF/MPW) Follow-up of post-operative cataract patients and distribution of spectacles to them. (ASHA/AF/MPW) Ensure regular use of spectacles & follow-up bi-annually in children with refractive error (ASHA/AF/MPW) Enabling elderly & those with Presbyopia to get free spectacles (ASHA/AF/MPW) IEC for health promotion activities related to Eye Health: imparting health education to at-risk of visual impairment (ASHA/AF/MPW) Maintenance of records of visually impaired/blind individuals in the community (ASHA/AF/MPW) Undertake rehabilitation and counselling (ASHA/AF/MPW) 	<ul style="list-style-type: none"> Health Promotion activities with use of IEC-awareness generation about refractive disorders, common eye diseases, contagious eye diseases & infections and preventive care (CHO/MPW) Stabilization & referral of cases with trauma to the eye, chemical injury to eye, foreign body lodged in cornea to the Vision centre Dispensing of medicines for conjunctivitis, dry eye, Trachoma & follow-up medicines for chronic eye disease Awareness generation on eye donation, provide first aid for foreign body, eye injuries, stabilization followed-up by referral Care of eye due to acid/alkali/chemical exposure & immediate referral (CHO/MPW) Maintenance of records as per NPCB&VI guidelines (CHO) 	<ul style="list-style-type: none"> Referral for advice to eye specialist for corneal blindness & follow instructions given by specialist (MO) Medical fitness for cataract surgery, disability certification, initial reading of fundus images, outreach activities, quality assurance of ASHA& OA activities (MO) Surveillance of trachoma & referral to eye specialist where needed (MO) Stabilizing & referral of cases with trauma to the eye, chemical injury to eye, foreign body lodged in cornea to the Vision centre (MO) Dispensing of medicines for conjunctivitis, dry eye, Trachoma & follow-up (MO) Awareness generation of eye donation, provide first aid for foreign body, eye injuries, stabilization & then referral (MO) Maintenance of records as per NPCB & VI guidelines (MO) 	<ul style="list-style-type: none"> Referral to ophthalmologist for removal of corneal/deep foreign bodies in eye (OA) Surveillance of trachoma & referral to eye specialist where needed (OA) Surgical care for eye diseases like cataract, corneal blindness, trachoma, glaucoma, severe trauma to eye, corneal/deep lodgement of foreign body in eye, retinal disease (Ophthalmologist) Treatment of vision disorders, eye diseases and infections (Ophthalmologist) Record maintenance as per NPCB&VI guidelines (OA)





Key roles and responsibilities of Medical Officers (MBBS) at Ayushman Bharat-Health and Wellness Centre-Primary Health Centre and Urban Primary Health Centre (AB-HWC-PHC/UPHC)





THE MEDICAL OFFICER (MBBS) AT THE AB_HWC-PHC/UPHC IS RESPONSIBLE FOR:

- Ensuring that eye care services are delivered through all AB-HWCs in his/her area;
- Diagnosis and treatment of common acute eye condition/infections and primary eye care for trauma presenting to the AB-HWC-PHC/UPHC and those referred from the AB-HWC-SHC;
- Diagnosis for refractive errors and provision of free spectacles to patients diagnosed with presbyopia and school children with refractive errors;
- Collaboration with RBSK team and provision of free spectacles to children with refractive errors;



THE MEDICAL OFFICER (MBBS) AT THE AB_HWC-PHC/UPHC IS RESPONSIBLE FOR:

- Referral of more complex cases to CHC/Sub-District Hospital/District Hospital to Eye Specialist/Eye Doctor and provide follow-up care as advised.
- Provide medical fitness for cataract surgery and referral to higher health centres for surgery, follow-up care for operated patients.
- Screening for glaucoma and referral to higher health centres for medical treatment/surgery, follow-up care for operated patients.
- Screening for diabetic and hypertensive retinopathy and facilitating consultation with eye specialist at early stage. Annual screening of all diabetic patients must be done.



THE MEDICAL OFFICER (MBBS) AT THE AB-HWC-PHC/UPHC IS RESPONSIBLE FOR:

- Nodal Officer for Vision Centre operations, outreach activities (planning, monitoring wellness clinics/community workers and co-operation with district hospitals), quality assurance of ASHA & Ophthalmic Assistant (OA) in delivering Eye Care.
- Ensure record maintenance as per NPCB&VI guidelines & periodic review of progress.
- Supportive supervision of AB-HWC-PHC/UPHC team & AB-HWC-SHC teams in regular eye care activities.
- Monitoring activities of your team in daily activities as well as in monthly meetings.
- Maintenance of medicines and equipment and inventory control.





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Key roles and responsibilities of different
members of the team at AB-HWC for Eye Care
at Ayushman Bharat-Health and Wellness
Centre-Primary Health Centre and Urban
Primary Health Centre (AB-HWC-PHC/UPHC)





ASHA AT THE AB_HWC-PHC/UPHC IS RESPONSIBLE FOR:

- Identify and line list all those members with poor vision, blindness and visual impairment including children's and adults in your service area.
- Screening for blindness in the community by using finger counting method, visual impairment in the community using 6/18 vision chart for all adult community members and undertake the exercise of filling Community Based Assessment Checklist (CBAC) for target individuals.
- Mobilise individuals found at risk with visual impairment in the community for further screening at the nearest AB-HWC.
- Mobilise the mothers and care givers for eye examination of all children including preterm and low birth weight children. And also mobilise adolescents (0-18) for screening for visual acuity at school and Angadwadi levels through RBSK team.



ASHA AT THE AB_HWC-PHC/UPHC IS RESPONSIBLE FOR:

- Create awareness in the community regarding maintenance for personal hygiene, environmental and life style modifications, avoid myths and misconception related to eye care and motivate for eye donation.
- Create awareness in the community regarding the need for early care seeking for eye problems and help bring change in health seeking behaviour of patients and caregivers.
- Educate communities about prevention and common treatment of eye diseases such as Refractive Error, Cataract, Trachoma, Diabetic Retinopathy, childhood blindness, etc. that can lead to visual impairment.
- Monitor and encourage patients with eye problems to complete their treatment and coordinate with the AB-HWC.



AUXILIARY NURSE MIDWIFE/MULTI-PURPOSE WORKER (ANM/MPW):

- Support in outreach as well as AB-HWC based activities.
- Support and supervise the ASHA in undertaking her activities related to eye care. Undertake joint household visits with ASHAs for cross verification of 10% population.
- Assist and Support the CHO in providing eye care services in AB-HWC, SHC.
- Support CHO in screening of individuals identified as high risk by ASHAs.
- Help in case identification for Cataract, Presbyopia, Trachoma and Corneal disease.



AUXILIARY NURSE MIDWIFE/MULTI-PURPOSE WORKER (ANM/MPW):

- Identify Vitamin A deficiency and Bitot's spot and assure Vitamin A prophylaxis.
- Help in providing first aid for acid/alkali/chemical exposure under the guidance of the CHO.
- Explain the community members about the availability of services related to eye treatment at different levels of health care.
- Ensure regular use of spectacles by children with refractive error and enabling elderly and those with presbyopia and cataract to get free spectacles.



AUXILIARY NURSE MIDWIFE/MULTI-PURPOSE WORKER (ANM/MPW):

- Identify suspected cases with eye/vision problems and inform the CHO for referral of complex cases to the appropriate facility as per the case and also assist the CHO in arranging referral.
- Follow up care to patients as advised by the referral centre and ensure that patients are responding to the treatment.
- Assist in organizing outreach eye care activities such as eye camps through AB-HWC.
- Conduct health promotional activities along with AB-HWC team with regard to eye care.
- Support in educating School Teachers and Anganwadi Workers (AWW) about causes and prevention of common eye problem.





AUXILIARY NURSE MIDWIFE/MULTI-PURPOSE WORKER (ANM/MPW):

- Support the CHO in general record keeping and stock management of all eye related logistics.
- Along with ASHA and AF support the community intervention in addressing in clarifying misconceptions related to eye care and eye disorders in the community.
- Along with AF help in providing community based rehabilitation, social acceptance, vocational training and inclusive education for patients with low vision.



COMMUNITY HEALTH OFFICER (CHO) AT AYUSHMAN BHARAT – HEALTH AND WELLNESS CENTRE (AB-HWC, SHC):

- The primary health care team will be led by a CHO (Community Health Officer) at AB-HWC, SHC.
- Ensure that regular eye screening is undertaken, coordinate with the RBSK team for screening children of age group 0-18 years in the Anganwadi and schools, manage the referral of those requiring surgery and refractive errors, and ensure access to free spectacles.
- Prepare monthly action plans for health promotions activities including eye care for the primary health care team.





COMMUNITY HEALTH OFFICER (CHO) AT AYUSHMAN BHARAT – HEALTH AND WELLNESS CENTRE (AB-HWC, SHC):

- Participate in VHSNC meetings, VHSND, health promotion campaigns, and school programs and ensure that eye health promotional activities are carried out regularly and also guide the team in educating the school teachers and AWW about the causes and prevention of common eye problems.
- Conduct screening and basic management of common eye problems at special camps and focus on prevention messages. Motivate the community for Eye Donation.



COMMUNITY HEALTH OFFICER (CHO) AT AYUSHMAN BHARAT – HEALTH AND WELLNESS CENTRE (AB-HWC, SHC):

- Counsel the identified patients for cataract surgery.
- Dispense medications as prescribed by the MO at AB-HWC, PHC, or Eye Specialist/Eye Doctor.
- Will undertake the task of referrals of individuals to appropriate health facilities. Must ensure that the MO is informed regarding any referral made to any health facility.
- Provide follow-up care in coordination with the primary healthcare team members.
- Arrange for rehabilitation for those with long-term and permanent blindness including vocational rehabilitation, re-integration into school, etc.
- Stock management for eye-related medicines and equipment.
- Maintenance of records and registers related to eye health.



STAFF NURSE AT AYUSHMAN BHARAT – HEALTH AND WELLNESS CENTRE – PRIMARY HEALTH CENTRE AND URBAN PRIMARY HEALTH CENTRE (AB-HWC- PHC/UPHC).

- Assist and support the Medical Officer at AB-HWCs in rural and urban areas in ensuring that eye care services are delivered at AB-HWCs.
- Help the Eye Care team with screening at any of the screening camps organised under the AB-HWCs.
- Contribute to school health programs through screening for vision and other common eye problem.
- Support Medical officer in screening of all population visiting the AB-HWCs for early identification of eye problems.
- Can help in plan of the awareness programme, preparation of information, Information Education and Communication (IEC) material required and arrange for audio-visuals aids to assist in the health promotion activities at the AB-HWCs or in the field along with the AB-HWC team members.
- Doing some minor procedures – irritation of eyes, applying eye patch for eye protection, instilling eye drops etc.





STAFF NURSE AT AYUSHMAN BHARAT – HEALTH AND WELLNESS CENTRE – PRIMARY HEALTH CENTRE AND URBAN PRIMARY HEALTH CENTRE (AB-HWC- PHC/UPHC).

- Early Identification of cases suspected to be suffering from common eye diseases such as conjunctivitis, dry eyes, eye allergies, stye, trachoma, squint, etc.
- Provide first aid to the injured eye.
- Compilation and validation of data reported by AB-HWCs as per the guidance of MO.
- Providing follow-up care to patients who have undergone eye surgery/other eye procedures.
- Stock management for eye-related medicine and equipment.
- Maintenance of registers and records related to eye health.



OPHTHALMIC ASSISTANT (OA) AT VISION CENTRE:

1. Work under the supervision of a Medical Officer/Eye Specialist/Eye Doctor.
2. Screening and identification of eye diseases, distribution of spectacles, providing primary eye care including treatment for eye diseases, referring complex cases for surgery, organizing eye screening camps, school eye health sessions, and community health education sessions.





MONITORING AND SUPERVISION

Monitoring and Supervision are important to maintain service delivery and improving quality of service being provided

The indicators that will be used for the purpose of monitoring and supervision of AB-HWC, PHC/UPHC team are listed in the table below:

S no	Indicator	Calculation	
1.	Proportion of blind and Visually impaired identified	(Number of blind and Visually impaired identified /catchment population of HWC) x 100	
2.	Percentage of blind and Visually impaired referred	(Number of blind and Visually impaired referred/total number of individuals identified as being blind and Visually impaired) X 100	
3.	% of cataract identified and referred	(Number of cases with cataract identified and referred/total number of home visits) X 100	
4.	% of Diabetic Retinopathy identified and referred	(Number of OPD cases with diabetic retinopathy identified and referred/total number of OPD) X 100	
5.	% of eye injuries identified and referred	(Number of OPD cases with eye injuries identified and referred/ total number of OPD) X 100	
6.	Number of cataract surgeries conducted in the catchment area	NA	
7.	Number of refraction/ glasses prescribed at the OPD of the unit/centre	NA	
8.	Number of spectacles distributed at the OPD of the unit/centre	NA	



MONITORING CAN BE DONE THROUGH MULTIPLE MECHANISMS:

1. Supportive Supervision:

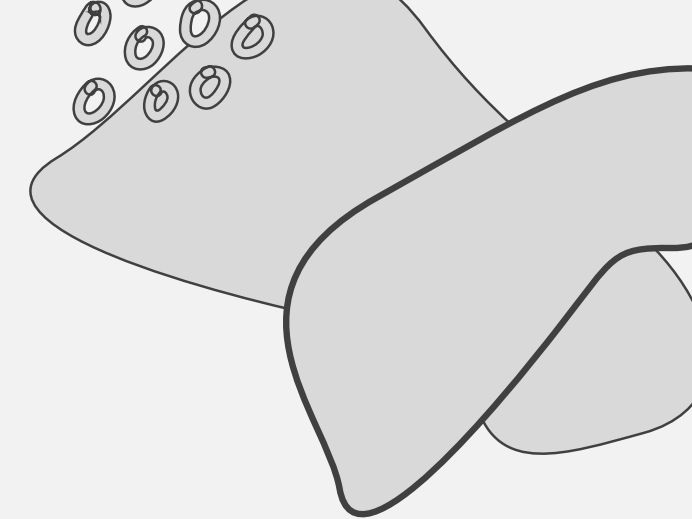
Supportive supervision involves on-site observation with an aim of helping in improving the skills of the team members gradually with time.

2. Monthly Meetings:

At the time of monthly meetings, the work and performance of the team members can be discussed by the Medical Officer and appropriate direction may be given at the same time.

3. Meetings with other stakeholders:

Usually, Community members or community platforms/organizations provide useful feedback regarding the coverage and quality of services being delivered to the community. This feedback may be utilized to improve upon the services provided.





Thank You

