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Service Delivery Framework for ENT Care

For FLW



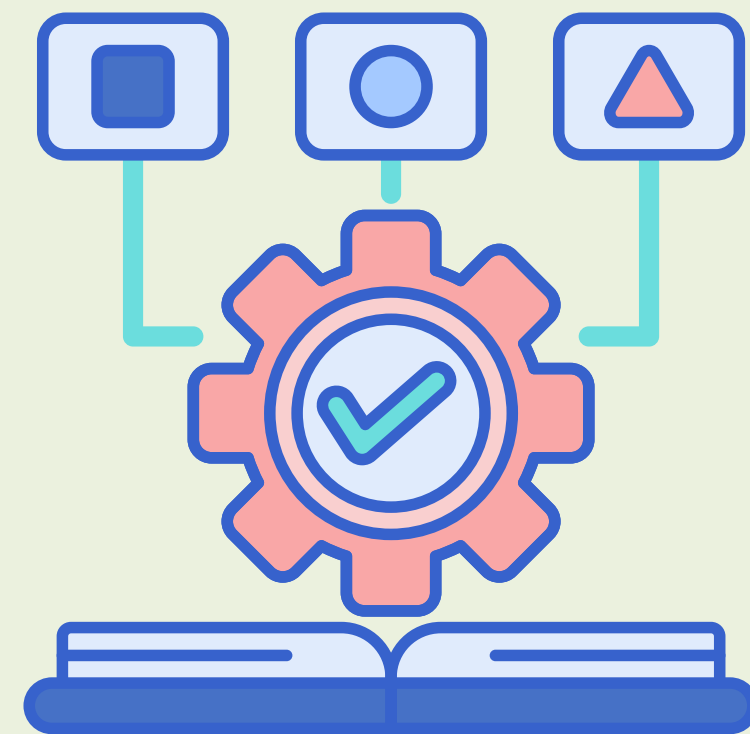


LEARNING OBJECTIVES



By the end of the session, participants should be able to:

- Enumerate the ENT care services delivered at Community, SHC-HWC and Referral centre level.
- List the key tasks of ASHA and MPW in providing ENT care.
- Understand role in coordination with the CHO in ENT care.





ROLE OF ASHA IN ENT CARE



What to do	How to do
Identification and Listing	<ul style="list-style-type: none">• Identify people with complaints related to ear, nose and throat.• Listing of all those with hearing loss or reduced hearing.
Filling CBAC	<ul style="list-style-type: none">• Filling Community Based Assessment Checklist (CBAC) for all individuals aged 30 years and above.
Mobilization for Screening	<ul style="list-style-type: none">• Mobilise individuals found at risk (complaint of reduced hearing) for screening• Mobilise the mother/caregivers for hearing examination for all children. Preterm & LBW and;• adolescents for screening for visual acuity at school and Anganwadi levels through RBSK (0-18 years of age).
Health promotion	<ul style="list-style-type: none">• Create awareness about prevention and treatment of common diseases and infections of the ear, nose and throat.• Create awareness on protection against excessive noise, safe listening and improving the acoustic environment.• Utilize community-based platforms to organise health talk on ENT.
Follow-up for treatment adherence and	<ul style="list-style-type: none">• Monitor and encourage ENT patients to complete their treatment.• Ensure follow- up of patients (long term medication and post-operative patients).• Offering support services to hearing aid users (change of batteries, use of aid.)
Counselling support Referral support	<ul style="list-style-type: none">• About role of family in supporting hearing impaired and deaf individual.• Undertake rehabilitation and counselling of hearing-impaired and deaf individuals.





COMMUNITY BASED ASSESSMENT CHECKLIST- PART B1 FOR HEARING IMPAIRMENT



Part B: Early Detection: Ask if Patient has any of these Symptoms			
B1: Women and Men	Y/N		Y/N
Shortness of breath (<i>difficulty in breathing</i>)		History of fits	
Coughing more than 2 weeks*		Difficulty in opening mouth	
Blood in sputum*		Any ulcers in mouth that has not healed in two weeks	
Fever for > 2 weeks*		Any growth in mouth that has not healed in two weeks	
Loss of weight*		Any white or red patch in mouth that has not healed in two weeks	
Night Sweats*		Pain while chewing	
Are you currently taking anti-TB drugs**		Any change in the tone of your voice	
Anyone in family currently suffering from TB**		Any hypopigmented patch(es) or discolored lesion(s) with loss of sensation	
History of TB *		Any thickened skin	
Recurrent ulceration on palm or sole		Any nodules on skin	
Recurrent tingling on palm(s) or sole(s)		Recurrent numbness on palm(s) or sole(s)	
Cloudy or blurred vision		Clawing of fingers in hands and/or feet	
Difficulty in reading		Tingling and numbness in hands and/or feet	
Pain in eyes lasting for more than a week		Inability to close eyelid	
Redness in eyes lasting for more than a week		Difficulty in holding objects with hands/ fingers	
		Weakness in feet that causes difficulty in walking	
Difficulty in hearing			
B2: Women only	Y/N		Y/N
Lump in the breast		Bleeding after menopause	
<u>Blood stained</u> discharge from the nipple		Bleeding after intercourse	
Change in shape and size of breast		Foul smelling vaginal discharge	
Bleeding between periods			
B3: Elderly Specific (60 years and above)	Y/N		Y/N



ROLE OF MPW IN ENT CARE



- Screening for common disorders of ENT in patients attending SHC-HWC.
- Early identification of cases at the SHC-HWC
- Distributing medicines to patients with ENT disorders at the SHC-HWC.
- Refer cases that cannot be managed at the primary level
- Follow up of referred case and ensure compliance to treatment and re-referral
- Diagnose, treat or refer cases of ENT disorders during home visits.
- Help in providing community-based rehabilitation, social acceptance and vocational training and inclusive education for hearing-impaired patients.

- Support the ASHA
- Continue to use Home Visits,
- Community platforms
- Health promotion campaigns





SHC-HWC LEVEL (CHO)



- Maintenance of register for hearing-impaired.
- Compilation and validation of data collected by ASHA.
- Conduct monthly meeting with ASHAS/ AF/ ANM/MPW.
- Screening of target population for common ENT conditions including deafness.
- Health promotion with special focus on ENT care.
- Refer cases of hearing impairment to the specialist ENT surgeon in consultation with PHC-MO.
- Counselling and other support for hearing aid users,
- Dispensing the medications prescribed by PHC-MO or specialist.
- Follow up care in coordination with ASHAs and MPWs/ANM.



REFERRAL



CHO will make the referral, ASHA along with ANM/MPW will facilitate referral.

WHO	WHY	TO WHOM
CHO at SHC-HWC	individuals with any signs and symptoms of loss of hearing and other complicated cases of ENT for diagnosis.	Medical Officer at PHC confirm the diagnosis and provide treatment of common ENT conditions/infections, primary care for trauma.
Medical Officer at PHC	further assessment and confirmation of cases with hearing impairment	ENT Specialist (prescribe treatment which would be continued at SHC level) disability certification.

The patient would need to visit the specialist or MO as per the instructions provided.



EXERCISE



The following slides show a list of various services for ENT care.

Participants will have to answer:

- **At what level of care is the particular service delivered?**
- **Who is responsible for providing that service?**





Service	Level of care	Provider
Identification & line listing of any person in the village with ear, nose and throat problems		
Awareness generation on common disorders of ENT and the need for early care seeking through VHSNC/MAS, VHSND/UHSND and other community level meetings.		
Encourage hearing examination for all children within 30 days of their birth through RBSK.		
Screening for hearing impairment and Presbycusis while filling Community Based Assessment Checklist for all individuals above 30 years of age.		



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Identification & line listing of any person in the village with ear, nose and throat problems	Community	ASHA
Awareness generation on common disorders of ENT and the need for early care seeking through VHSNC/MAS, VHSND/UHSND and other community level meetings.	Community	ASHA, MPW
Encourage hearing examination for all children within 30 days of their birth through RBSK.	Community	ASHA
Screening for hearing impairment and Presbycusis while filling Community Based Assessment Checklist for all individuals above 30 years of age.	Community	ASHA with support of PHC care team



Service	Level of care	Provider
Undertake rehabilitation and counselling of hearing-impaired individuals.		
Primary management of common conditions of the ear, nose and throat		
Follow up of hearing-impaired patients who have been prescribed hearing aid.		
Follow-up of patients to ensure compliance to treatment.		



Service	Level of care	Provider
Undertake rehabilitation and counselling of hearing-impaired individuals.	Community	ASHA
Primary management of common conditions of the ear, nose and throat	SHC-HWC	CHO & MPW
Follow up of hearing-impaired patients who have been prescribed hearing aid.	Community	ASHA with support of PHC care team
Follow-up of patients to ensure compliance to treatment.	Community	ASHA



Service	Level of care	Provider
If hearing aid has been prescribed, follow up for regular use and ask if the person s comfortable.		
Help in providing community-based rehabilitation, social acceptance and vocational training and inclusive education for hearing-impaired patients		
Early detection of hearing impairment and deafness with referral to ENT specialist.		
Record keeping: maintaining a list of individuals with hearing impairment in the community.		



Service	Level of care	Provider
If hearing aid has been prescribed, follow up for regular use and ask if the person s comfortable.	Community	ASHA
Help in providing community-based rehabilitation, social acceptance and vocational training and inclusive education for hearing-impaired patients	Community	MPW
Early detection of hearing impairment and deafness with referral to ENT specialist.	SHC-HWC	CHO/MPW
Record keeping: maintaining a list of individuals with hearing impairment in the community.	Community	ASHA



EVALUATION- 1



1- All are roles of ASHA in managing hearing loss care EXCEPT-

- a) Fill out the assessment in Community Based Assessment Checklist.
- b) Inform the ANM If anybody complains of reduced hearing.
- c) Prescribing hearing aid.
- d) Follow up with the person after he/she returns from referral centre.

2- All are the roles of CHO/MPW EXCEPT-

- a) Referral of complicated cases to the MO-PHC or ENT specialist as required.
- b) Early detection of hearing impairment and deafness with referral to ENT specialist.
- c) Mobilise the mother/caregivers for hearing examination for all children
- d) First aid for injuries/stabilization and then



ANSWERS- 1



1- All are roles of ASHA in managing hearing loss care EXCEPT-

- a) Fill out the assessment in Community Based Assessment Checklist.
- b) Inform the ANM If anybody complains of reduced hearing.
- c) Prescribing hearing aid.
- d) Follow up with the person after he/she returns from referral centre.

2- All are the roles of CHO/MPW EXCEPT-

- a) Referral of complicated cases to the MO-PHC or ENT specialist as required.
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- d) First aid for injuries/stabilization and then



EVALUATION- 2



- MPW supports ASHA in completion of CBAC forms. (TRUE / FALSE)
- CHO mobilises individuals found at risk (complaint of reduced hearing) for further screening at HWC-SHC. (TRUE / FALSE)
- Creating awareness on protection against excessive noise, safe listening and improving the acoustic environment is ASHA's task. (TRUE / FALSE)
- Offering support services to hearing aid users is not the task of CHO. (TRUE / FALSE)
- MPW has to diagnose, treat or refer cases of ENT disorders during home visits. (TRUE / FALSE)



ANSWERS- 2



- MPW supports ASHA in completion of CBAC forms. (TRUE / FALSE)
- CHO mobilises individuals found at risk (complaint of reduced hearing) for further screening at HWC-SHC. (TRUE / FALSE)
- Creating awareness on protection against excessive noise, safe listening and improving the acoustic environment is ASHA's task. (TRUE / FALSE)
- Offering support services to hearing aid users is not the task of CHO. (TRUE / FALSE)
- MPW has to diagnose, treat or refer cases of ENT disorders during home visits. (TRUE / FALSE)



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Thank You

