



# **Roles And Responsibilities of MO and AB- HWC Team**

## **Service Delivery Framework And Community Outreach Activities For ENT Care**





## Why ASHA?

As ASHA, she is a very important member of the Health and Wellness Centre team and is closest to the community.

Therefore;

You have a significant role in helping the health team in screening, referring, monitoring and also in health promotion activities. This also applies to problems associated with the ear, nose and throat

## What are the five senses?

## What do we use them for?

Sense

Using this sense

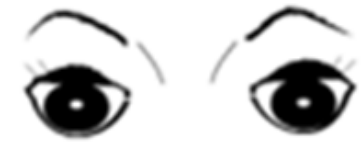
What does this sense do?



Touch



Our skin is sensitive to the touch.  
It helps us feel things like hot/cold, rough/smooth etc.



Sight



Our eyes enable us to see all the things around us like:  
people, animals, buildings, things in our home and where  
we work



Smell



Our nose enables us to smell things such as food cooking, fire burning, rain, polluted water



Hearing



Our ears let us to hear sounds around us such as a baby crying, people talking, dogs barking, a car horn, water running, music playing



Taste



Our tongue enables us to taste if food and drink is sweet/sour, hot/cold, cooked/uncooked etc.



# WHY DO WE NEED EARS?



## Why do we need to take care of our ears?

We need to take care of our ears so that we can hear many sounds and people talking ... there are many sounds we hear every day ... some are soft and some are loud, some high and some low pitched.



Sounds outside the home:

- rain, wind
- animal noises



Sounds that people make:

- talking
- singing
- laughing



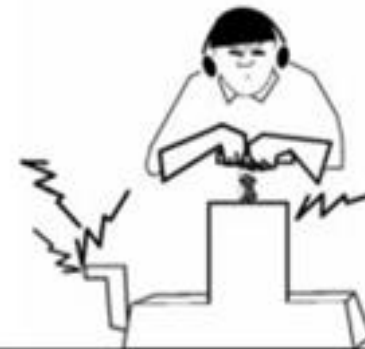
Sounds in the roads:

- cars, lorries, busses, taxis,
- horns/hooters



Sounds in the home:

- water boiling
- baby crying
- children calling



Sounds at work:

- farming
- factory
- shops, food shops,
- building/construction



•The fact that Deafness can affect persons of all ages.





- Deafness can be treated.
- It must be identified early.
- Deafness can be identified very early if we are aware.
- Deafness can be treated with HEARING AIDS & THERAPY.
- Deaf children MUST be rehabilitated as early as possible so that they can develop GOOD LANGUAGE & BE EDUCATED.





# That.....



- Deaf person must be encouraged to take part in all activities and be sent to a suitable school.







# About...



- How and where parents can get their child's ear & hearing tested.





## About....



- How People MUST accept Deaf members and persons using Hearing Aids.

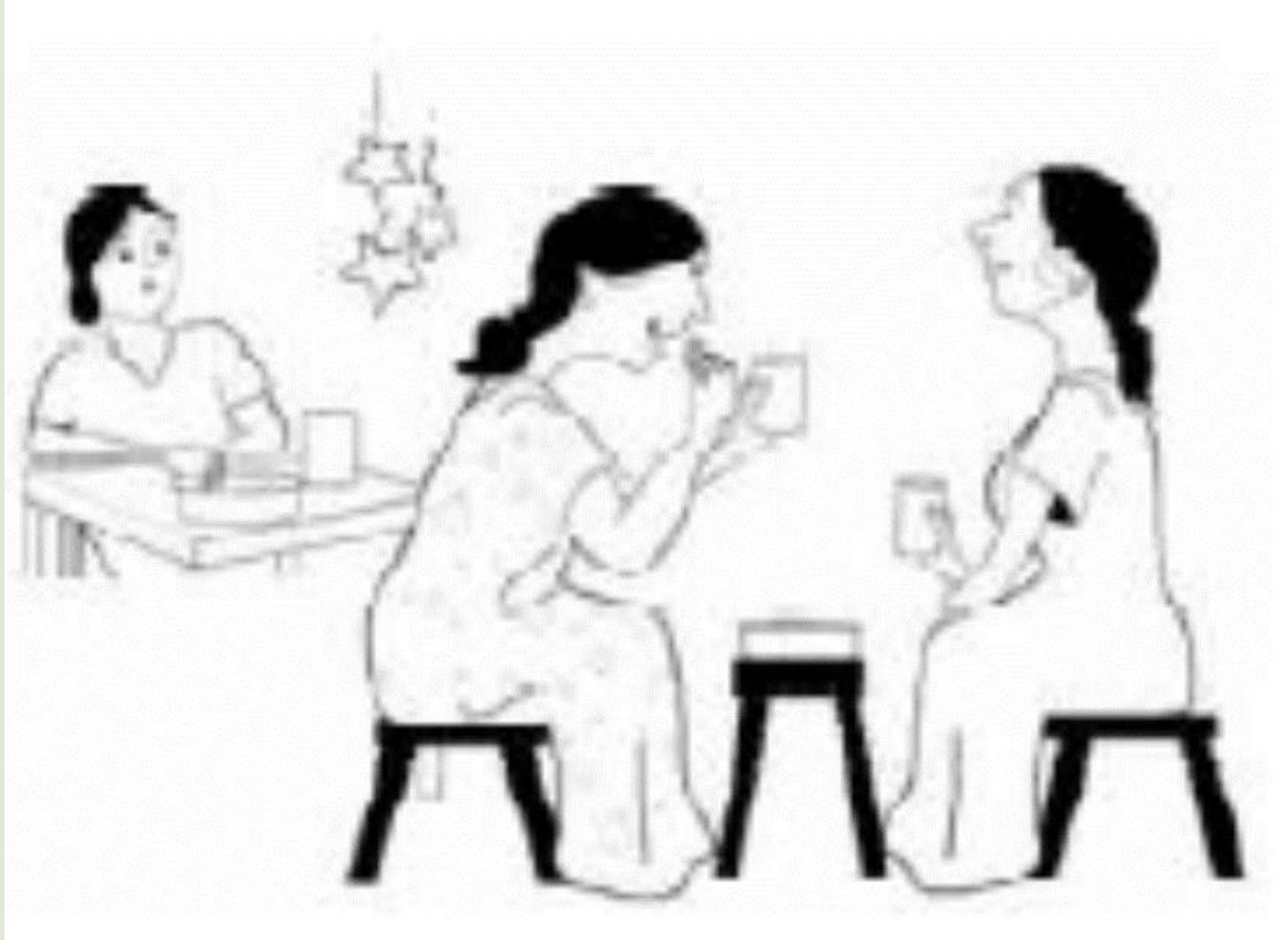




# That.....



- There are a large number of people in our country who suffer from Hearing loss (moderate-severe) due to various ear diseases.

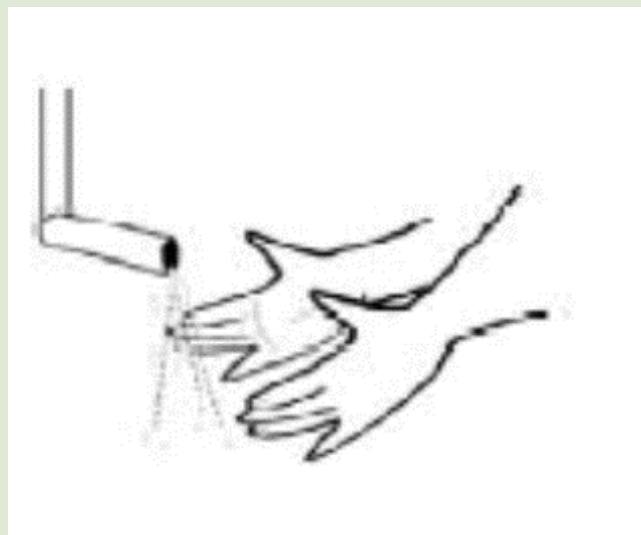




# That.....



- Ear Diseases & Hearing loss can be prevented through Good ear & Hearing care habits.



# GOOD EAR & HEARING CARE HABITS



## Personal hygiene



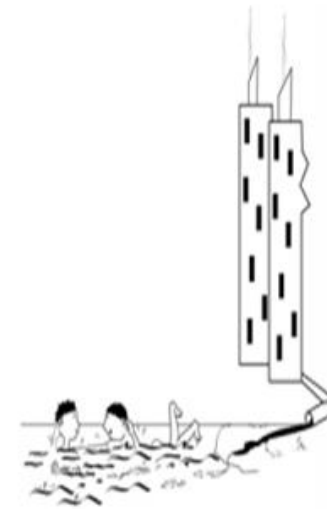
**DO NOT** put dirty fingers in ears, wash hands before working with food and do not eat with dirty hands  
**ALWAYS** wash your hands after going to the toilet

## How can we take care of our ears?

### Personal hygiene



**DO NOT** put dirty fingers in ears, wash hands before working with food and do not eat with dirty hands  
**ALWAYS** wash your hands after going to the toilet



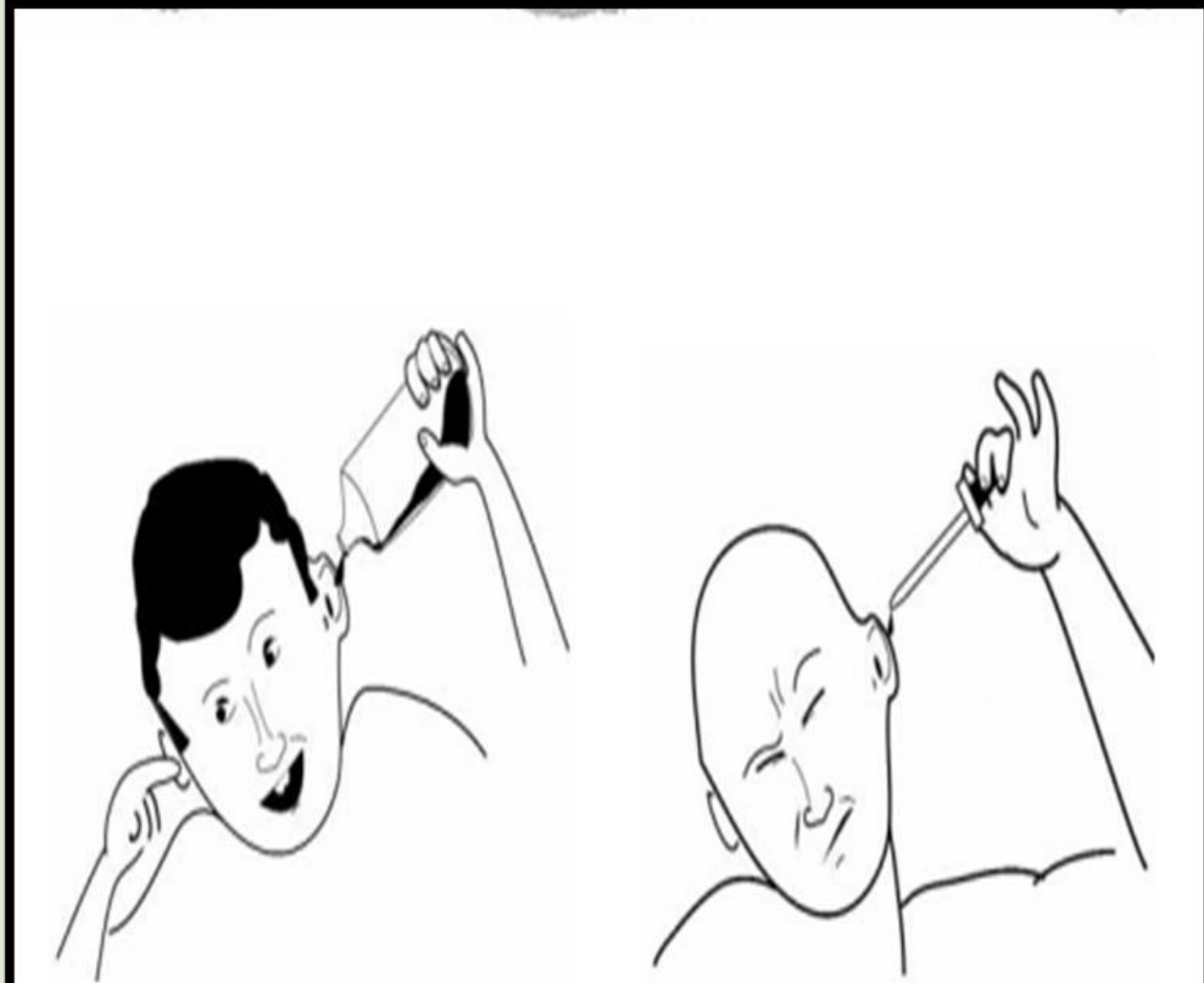
**DO NOT** swim or wash in dirty water



**DO NOT** put anything in your ears:

- hot or cold oil
- herbal remedies
- liquids such as kerosene

**NOTE: ONLY** use medicine given by the nurse or doctor at the clinic/hospital and take the correct dosage



DO NOT put anything in your ears:

- hot or cold oil
- herbal remedies
- liquids such as kerosene



**NOTE: Teach children NOT to put anything in their ears – seeds, beads, stones, sticks.**



That.....



- Discharging ear is one of the most common causes of hearing loss.





- All persons with Discharging ear need treatment (usually an operation).
- Refer all such persons for ear check up.
- Without treatment, Discharging ear can lead to deafness and Life threatening complications







## That.....



- If a child does not have clear speech or is not performing well in studies, it may be due to a hearing loss.
- His/her ears **MUST** be examined and hearing checked.





# HOW TO MAINTAIN NASAL HYGIENE



General point for advice during community visit:

- Always use handkerchief/ clean cloth for cleaning nasal secretion.
- Cover your mouth and nose with a tissue when you cough or sneeze, remember to wash your hands with soap and water after coughing or sneezing.
- Maintain a little distance (one arm distance), while sneezing, cleaning nose in public or around people.
- Never put fingers in your nostril, it might cause bleeding from nose (epistaxis), as nose is very vascular organ.
- Always consult doctor during time of illness, it may rapidly infect other family members and might be serious for small children.





## STEAM INHALATION

Steam inhalation is beneficial and one of the common home remedies used in our country. But there are some cautions with it:

- Never leave children alone for it, they might get burns
- Never come too close to hot water bowl.
- Take vapours both from nose and mouth



# MAINTAIN THROAT HYGIENE

- Drink lots of fluids: Drink at least 1 and a half liters of water each day, that is about 6-8 glasses of water. Avoid tea, coffee, or soft drinks as they usually contain caffeine.
- Breathing:
  - Sit and stand with good posture – that is, neck and back straight and your chin gently tucked in.
  - Avoid bad posture. When you sit or stand in a lazy posture your shoulders tilt forward and your head tilts back and your chin lifts slightly
  - Breathe through your nose. Mouth breathing dries your throat.





- Talking: Limit harmful voice use, such as shouting, grunting, or screaming.
  - Try not to speak over other noise such as television or music or around machinery such as a lawnmower.
  - Do not whisper, as whispering increases air pressure in your vocal cords and may irritate your throat.
  - Use your natural voice, not too high, not too low, or not too loud.
- Everyday
  - Avoid the use of chewing tobacco/ paan/ gutka, cigarette, bidi, etc
  - Limit caffeine-containing drinks as caffeine can increase dryness and irritation in the throat.
  - Not to use smoke/ avoid a smoky environment





# KEY ROLES AND RESPONSIBILITIES OF ASHAs IN ENT CARE



- To identify people with hearing impairment in the village area and prepare a line list
- Screening for hearing impairment in the community and undertaking the exercise of filling Community Based Assessment Checklist (CBAC) for all individuals aged 30 years and above.
- Mobilise individuals found at risk (complaint of reduced hearing) for further screening at HWC-SHC by the CHO/MPW/ANM.
- Mobilise the mother/caregivers for hearing examination for all children (including preterm and low birth weight children) and adolescents for screening for visual acuity at school and Anganwadi levels through RBSK (0-18 years of age).
- Create awareness in the communities regarding maintenance for personal hygiene and environmental and lifestyle modifications, including maintaining ear and nose hygiene and avoiding use of any form of tobacco.





- Create awareness on protection against excessive noise, safe listening and improving the acoustic environment.
- Educate communities about prevention and treatment of common diseases and infections of the ear, nose and throat.
- Monitor and encourage patients with infections and other conditions of the ear, nose and throat to complete their treatment and coordinate with the Health and Wellness Centre.
- Assist in organizing community outreach activities such as hearing camps through HWC. Provide support in mobilizing community members for attending screening camps organized in the community.



- Utilize community-based platforms like VHSNC, VHSND, and other community-level meetings for health talk fixed for the care of the ear, nose, and throat; impart information about healthy habits of the ear, nose, and throat.
- Identify individuals in the community for common conditions such as rhinitis, sinusitis, pharyngitis, infections of the ear or foreign body in the ear, nose, or throat and refer identified cases to the HWC-SHC for a proper check-up by CHO/MPW/ANM.
- Ensure follow-up of patients requiring long-term medication and post-operative patients through home visits.
- Offering support services to hearing aid users e.g. day to daycare such as change of batteries, Do's & Don't while handling the aid, etc.
- Rehabilitation by counseling people about the role of the family in supporting hearing impaired and deaf individuals.





# MPW/ANM

- **MPW/ANM:** They will have a role in outreach as well as SHC/SHC-HWC based activities. Provide you with support and monitor all your activities along with the ASHA Facilitator.



# QUESTION



What is the need for Multipurpose worker (MPW) involvement?



# MPW



- Can create awareness
- Can guide patients regarding the treatment of ear diseases especially Chronic Otitis media
- Can screen for deafness in the community
- Can guide parents regarding the treatment of their deaf/hearing impaired child.
- Can motivate people to educate their Hearing impaired/Deaf children.





# CREATE AWARENESS



- About good ear & hearing care practices, such as:
  - Use of earbuds
  - Prevent entry of dirty water
  - Do not insert anything into the ears
  - Do not get ears cleaned by untrained persons
  - Avoid Loud sounds





# AWARENESS GENERATION REGARDING ENT CARE AND SCREENING FOR DEAFNESS AND EARLY IDENTIFICATION



- Frontline workers, ASHA, Multiple Purpose Worker/Auxiliary Nurse Midwife (MPW/ANM) to be skilled in Primary, basic diagnostic, and community level preventive care for ENT-related problems.
- MPW- F will support the ASHA in carrying out screening and awareness generation activities in the community
- Use Home Visits, Village Health Sanitation and Nutrition Day (VHSND), Urban Health Sanitation and Nutrition Day (UHSND), meetings of Village Health Sanitation and Nutrition Committee (VHSNC), Mahila Arogya Samiti (MAS), and health promotion campaigns to disseminate health promotion messages related to the health of the ear, nose, and throat.
- Early identification of Ear, Nose, and Throat (ENT) related problems, including signs of hearing loss in infants, children, and adults.





# SCREENING AND EARLY DETECTION



- Community-based Newborn screening at home through MPWs for newborns till six weeks of age, during home visits/immunization sessions using devices, which are approved for the Public Health interventions.
- For children from six weeks to 18 years, – Anganwadi Centre (AWC)/ school-based screening will be undertaken through the Rashtriya Bal Swasthya Karyakram (RBSK) for screening of congenital disorders.
- Assist CHO in the screening of individuals for ENT disorder and organize screening camps.
- Informing children and adults with ENT problems, family members, and the general public about available options for their inclusion and integration in the community.
- Counseling and appropriate referral of patients requiring medical/ surgical interventions.





- Wherever deemed suitable, guide the parents/patients regarding the hearing screening: Its need & method.
- Please try to ensure that parents do not ignore their potentially hearing impaired children or wait for them to recover naturally.





## Care and management of Common ENT condition

- Care of running nose, Early identification and referral
- First aid for nose bleeds
- First aid to injuries in consultation with CHO and refer to higher center

## Rehabilitation and Follow up care

- Support ASHA to counsel and provide community-based rehabilitation and support to hearing impaired patients
- Ensure adherence to treatment protocols by regular follow up during a home visit with ASHAs





# ROLE OF STAFF NURSE



# QUESTION



What is the need for STAFF NURSE involvement?



# HEALTH AND WELLNESS CENTRE :ROLE OF STAFF NURSE



1. Care in pregnancy and child-birth.
2. Neonatal and infant health care services
3. Childhood and adolescent health care services.
4. Family planning, Contraceptive services, and other Reproductive Health Care services
5. Management of Communicable diseases including National Health Programmes
6. Management of Common Communicable Diseases and Outpatient care for acute simple illnesses and minor ailments.





# HEALTH AND WELLNESS CENTRE :ROLE OF STAFF NURSE



7. Screening, Prevention, Control, and Management of Non- Communicable diseases
8. Care for Common Ophthalmic and ENT problems
9. Basic Oral health care
10. Elderly and Palliative health care services
11. Emergency Medical Services
12. Screening and Basic management of Mental health ailments





- Ear, nose, and throat (ENT) disorders are one of the common reasons for a visit to a primary care center in both rural and urban communities across the country.
- The rural community of India also currently bears the rising burden of ENT diseases, where the prevalence of ENT disorders ranges from 4.3% to 11% in a certain district.
- Out of these, Ear, Nose and Throat, related disorders contribute to 60%, 27%, and 13% burden respectively, thus making disorders leading to hearing loss a major public health concern.
- The common ear problems include ear wax (18.7%), Chronic Suppurative Otitis media (5.4%), dry perforation of the Tympanic Membrane (0.6%), Congenital deafness (0.2%), and age-related hearing loss i.e. presbycusis (10.5 %).

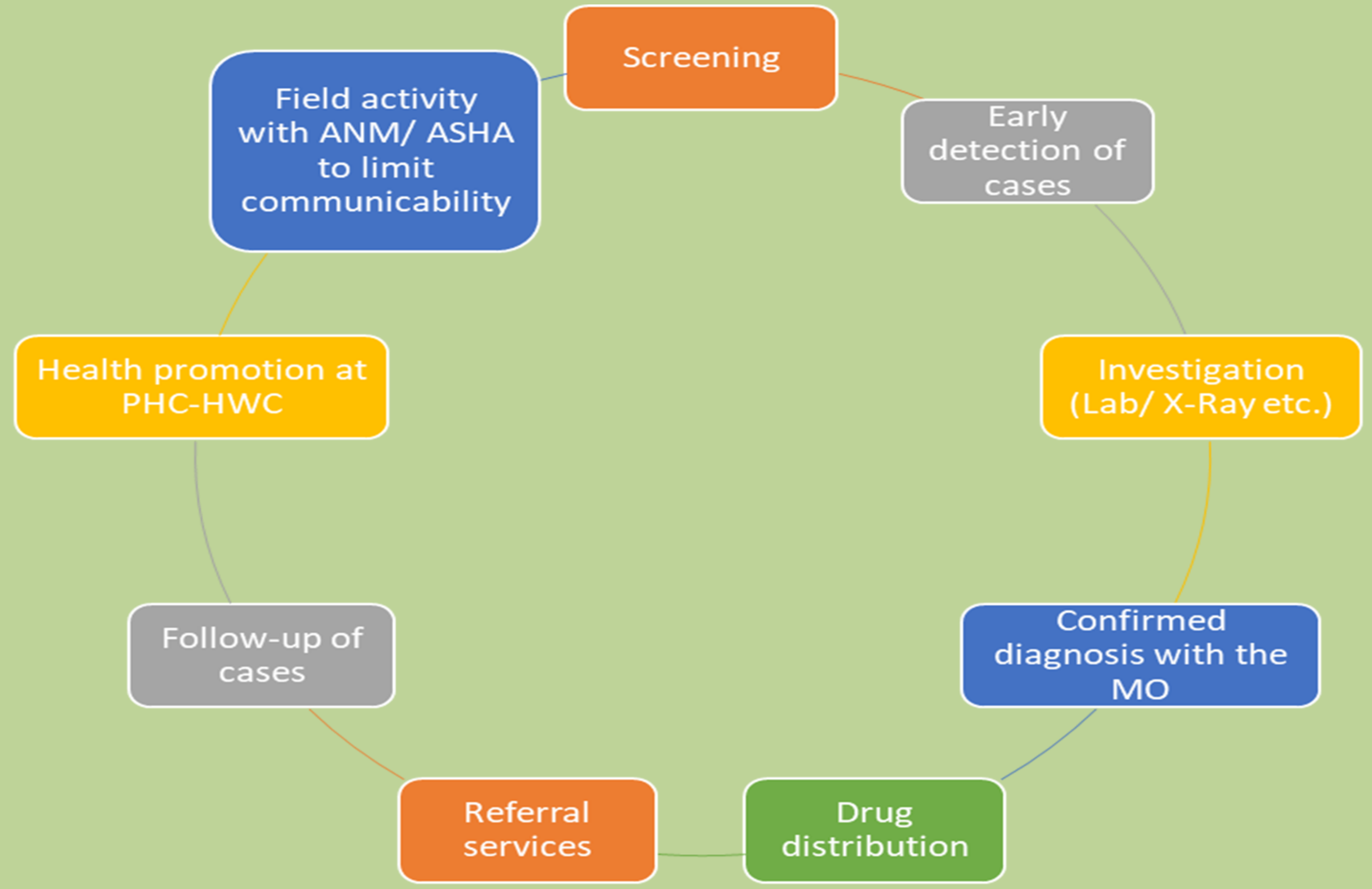


• As a Staff Nurse, it is important for you to be well acquainted with the knowledge and skills to provide ENT services in the catchment area of your PHC-HWC. The staff nurse will play a role in :

- Care for Common ENT problems
- Screening and early detection
- Health promotion activities

• ROLES AND RESPONSIBILITIES OF A STAFF NURSE

- As the primary health care team is committed to providing quality comprehensive health care at PHC-HWC, staff nurse plays a crucial role in screening, early identification of cases, distribution of medicines, and referral of patients suffering from common ENT conditions.
- In order to provide ENT services, it is important to consult a Medical Officer at every possible step, especially in severe cases.
- Diagnosis and treatment must be discussed with Medical Officer or doctor at a higher center before dispensing the drug.





# RESPONSIBILITY OF STAFF NURSE



- Screening/early identification of the most common ENT problems of the patients who report to PHC-HWC
- Supporting and mentoring ASHA/MPW-F on preventive and promotive aspects of common ENT problems, early detection and primary management of common ENT problems, referral and follow up mechanism
- Providing treatment to the patient with ENT problems in consultation with the Medical Officer of HWC
- Assisting Medical Officer in basic ENT procedures.
- Providing follow-up care to the patient who was referred to the higher centers to ensure that they have received complete care and if on treatment, are complying with all the advice given to them. Long term follow up will be necessary for certain cases
- Maintenance of records at PHC-HWC level







# ROLE OF CHO

- Ayushman Bharat initiative was launched as recommended by the National Health Policy 2017 to move from a sectoral and segmented approach to a comprehensive need-based health care delivery to achieve the vision of Universal Health Coverage (UHC).
- Problems related to the Ear, Nose, and Throat (ENT) constitute the bulk of the patients visiting the Out-Patient Department. Owing to the availability of a large number of home-based remedies, patients suffering from common ENT problems seek medical care less frequently.
- From the data available from various community-level surveys in India, the burden of ENT-related illnesses is around 4.3%. Out of these, Ear, Nose, and Throat related disorders contribute to 60%, 27%, and 13% burden respectively, thus making disorders leading to hearing loss a major public health concern.



# KEY ROLES AND RESPONSIBILITIES OF CHO IN PROVIDING ENT CARE SERVICES



- CHO will support the ASHA and MPW in carrying out screening and awareness generation activities in the community.
- CHO will screen, detect and provide primary management to patients presenting to the SHC-HWC with conditions of ear, nose and throat.
- CHO will refer complicated cases, cases of hearing loss and any other case requiring specialized care to the PHC Medical Officer or ENT specialist at the DH.
- CHO will follow up all referred cases for treatment adherence, recovery and any side effect of medications, as well as re-referral if necessary.





# KEY ROLES AND RESPONSIBILITIES OF CHO IN PROVIDING ENT CARE SERVICES

- CHO will organize screening camps to screen for hearing loss and other ENT conditions and coordinate with Medical Officer/specialist for these camps.
- CHO will support ASHA and MPW in Home Visits, Village Health Sanitation and Nutrition Day (VHSND), Urban Health Sanitation and Nutrition Day (UHSND), meetings of Village Health Sanitation, and Nutrition Committee (VHSNC), Mahila Arogya Samiti (MAS) and health promotion campaigns.
- CHO will maintain relevant records at the SHC-HWC and maintain inventory control of drugs and equipment related to ENT care.



SERVICES	PREVENTIVE AND CURATIVE CARE ACTIVITIES	RESPONSIBILITIES
<b>Care for common ENT problems</b>	<ul style="list-style-type: none"><li>▪ Primary management of common conditions of the ear nose and throat – Common colds, Acute</li><li>▪ Suppurative Otitis Media (ASOM), pharyngitis, tonsillitis, epistaxis, foreign body removal.</li><li>▪ Referral of complicated cases to the MO-PHC or ENT specialist as required.</li><li>▪ Early detection of hearing impairment and deafness with referral to ENT specialist.</li><li>▪ First aid for injuries/stabilization and then</li><li>▪ Referral to the MO-PHC or ENT specialist.</li></ul>	CHO/ANM



# WHERE REFERRAL IS MUST:



- Refer immediately to ENT Surgeon District Hospital/ Medical College Hospital:
  - History of foreign body ingestion/ inhalation followed by respiratory distress/ dysphagia/ vomiting.
  - History of foreign body in ear or nose.
  - Ear discharge with fever/ giddiness/ headache/ vomiting/ blurring of vision/ loss of consciousness.
  - Watery discharge from nose following trauma which increases on bending down or coughing.
  - Inability to open mouth.
  - Severe trauma to ear or nose resulting in uncontrolled bleeding.



# MANAGEMENT AND REFERRAL

- Management and/or timely referral of ENT cases with complications that require secondary level care including surgical intervention. This module explains both primary as well as secondary level management of ENT conditions. As Medical Officer, you should provide primary level care to the patient, however, knowledge of secondary level care is important to counsel a patient in case of referral.
- Mapping of the public health facilities which are equipped for confirmation and management of complications of ENT diseases nearest to your HWC for appropriate and timely referral of the patient
- Management of common ENT problems and of referred cases from Health and Wellness Centres (HWCs-SHC) and communities.



- Providing/referral of patients for hearing aids, and other listening and signaling devices.
- Offering support services to hearing aid users e.g. day to daycare such as change of batteries, Do's & Don't while handling the aid, etc.
- Advocacy for appropriate ENT services, including otological and audiological services, at health care facilities as close to the community as possible.
- Organizing screening camps as an outreach activity for the vulnerable and marginalized community.
- Ensure timely follow up of the patients with complications



# IEC/BCC



- Raising awareness on associated risk factors, healthy lifestyle, and benefits of screening for common ENT problems. Key messages include awareness of structure and normal functions of the Ear, Nose, and Throat; and causes and prevention of common ENT problems.
- Using community-based platforms like Village Health, Sanitation and Nutrition Committee (VHSNC)/Mahila Arogya Samiti (MAS) to educate the community on practicing healthy habits related to ENT, and early identification of common ENT problems.
- Educating school teachers and Anganwadi workers about the special needs of children with ENT problems, including deaf children.
- Educating the community on early signs of Ear, Nose, and Throat infections including pain, itching, and swelling.





- Counseling community on early care-seeking for cold, sore throat, allergies, and common ENT problems.
- Creating awareness of the danger of self-medication and counseling on not to attempt removal of foreign bodies from Ear, Nose, and Throat at home.
- Sensitization of community to seek care/advice only from a qualified/trained Healthcare professional for foreign body impaction (Ear, nose, throat) and ear wax conditions.
- Educating the community about accidents and injury prevention.
- Enabling a child-friendly environment to minimize the chances of foreign body insertion in the nose and ears like grains, food particles, insects or objects.



# QUESTION



What is the need for the involvement of Medical Officers in the programme?



# CAPACITY BUILDING

- As In-Charge of PHC- HWC, Medical Officer should train and mentor the team at SHC- HWC level- MPWs and CHOs on preventive and promotive care of common ENT problems, early detection of cases for ENT conditions, primary management of common ENT conditions, referral and follow up mechanism.
- Medical officers should mentor ASHA to identify signs and symptoms of common ENT-related conditions, health promotion, risk factors associated with ENT conditions, and services available at HWCs and referral centers.
- ASHA facilitators should also be trained for enabling better support to ASHAs in the extended package of services.



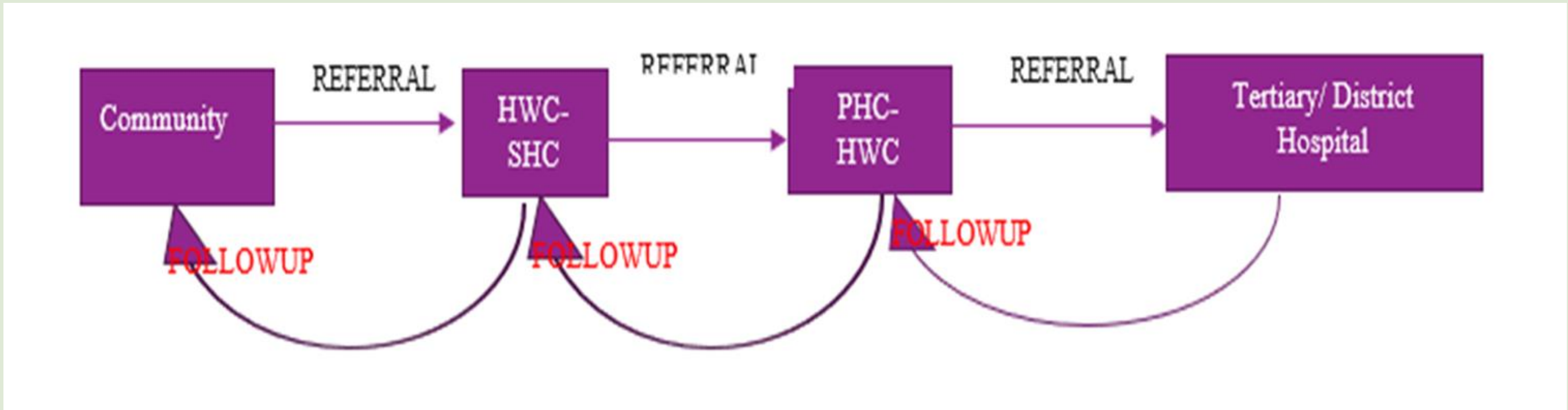
## Monitoring and Supervision-

- Technical support for the Staff Nurse/pharmacist/lab technician/MPW/ASHA/CHO for appropriate maintenance of records and reports on screening, treatment, counseling, referral and follow-up, and timely submission to a higher level.
- Teleconsultation with the CHO/MPW for minor ailments, drug refilling for chronic diseases, and timely decisions on the referral system can be very beneficial at the patient level.



# ROLE AND RESPONSIBILITIES OF MEDICAL OFFICER

- As In-Charge of HWC, MO is not only responsible for service delivery at PHC level but also plays a role of supervisor to support the health care team in the linked SHC-HWC to provide quality to the patients seeking treatment for ENT problems and preventive/ screening activities at community level.





# EQUIPMENT THAT WILL BE AVAILABLE AT PHC LEVEL



- Otoscope
- Ear specula
- Headlight
- Tuning fork
- Probe
- Ear Syringe





# SUMMARY

- Health and wellness centers are crucial for implementation of ENT task force.
- Right from front line workers to Medical officer, Awareness creation ,early diagnosis and referral and management of common ENT problems is required to avoid burden on the overwhelmed district and tertiary level facilities.



# Thank You

