

22-07-2020

# ANM 1st CHN Unit 4.

## (Community Health Nursing)

### Unit-4

### (Health Organizations)

## Organizations of EC, PHC, CHC & District Hospital

### Sub-centre level

- o The sub-centre is the peripheral outpost of the existing Health Delivery System in Rural areas.
- o Most peripheral & First contact - point b/w the primary Healthcare system & the Community.
- o Manned By at least one ANM / female health worker & one male health worker known as multi-purpose worker.

Centre	Plain Areas	Hilly/Tribal/ Difficult Area
Community Health Centre	1,20,000	80,000
Primary Health Centre	30,000	20,000
sub-centre	5000	3,000

## Services Provided

- ① Maternal Health care
- ② Child Health Care
- ③ Family Planning & Contraception
- ④ Adolescent Health care
- ⑤ Assistance to school Health Services
- ⑥ Water Quality Monitoring
- ⑦ Promotion of sanitation including use of toilet & appropriate garbage disposal.
- ⑧ Field visits by appropriate health workers for Disease surveillance & family welfare services
- ⑨ Community Need assessment
- ⑩ curative services for minor ailments
- ⑪ Training of Traditional Birth attendants & ASHA community health volunteers.
- ⑫ National Health Programme

## Elements of Primary Health care

- ① Health Education
- ② Nutrition
- ③ Water & Sanitation
- ④ Immunization
- ⑤ Prevention of Endemic Diseases
- ⑥ Treatment
- ⑦ Drug Availability

## Principles of Primary Health care

- ① Equitable Distribution
- ② Community participation
- ③ Primary Appropriate Technology
- ④ Focus on Prevention
- ⑤ Multi-sectoral Coordination.

## Services Prescribed

- 1) Medical care
- 2) Maternal & child health care
- 3) Family Planning & Contraception
- 4) Counselling & appropriate Referral for safe Abortion service.
- 5) Adolescent Health care
- 6) Assistance to School Health services
- 7) water quality Monitoring
- 8) Promotion of Sanitation including use of toilet & appropriate garbage disposal,
- 10) Field visits By appropriate Health workers For Diseases Surveillance & family welfare services.
- 11) community Need assessment
- 12) Curative services For minor ailments
- 13) Training of Traditional Birth attendants & ASHA / Community Health Volunteers.
- 14) National Health Programmes

- 15 collection & Reporting of vital events
- 16 Basic laboratory supervision
- 17 Monitoring & Supervision
- 18 Selected surgical Procedures
- 19 Mainstreaming of Ayush,

### District Hospital level

District health system is the fundamental basis for implementing various health policies, delivery of health care & now - agreement of health services for defined geographic area.

### Objectives of Indian Public Health Standards (IPHS) for District Hospitals

① Districts Hospital are:

⇒ To provide comprehensive secondary health care (specialist & referral services) to the community through the District Hospital

- (ii) To achieve & Maintain an acceptable standard of quality of care.
- (iii) To make the services more responsive & sensitive to the needs of the people of the District & the Hospital/centres from where the cases are referred to the District Hospitals.

### Services Delivery

- ① The district Hospital should be in a position to provide all Basic Speciality services & should aim to develop super-speciality services gradually.
- o Provision for a Patient's safety, infection control & Healthcare workers' safety has been added.

### Goals/ Objective of Health care Delivery System

- (i) To improve the health status of population & the clinical outcomes of care.
- (ii) To improve the experience of care of patients families & communities.
- (iii) To reduce the total economic burden of care & illness.

- (iv) To improve social justice equity in the health status of the population.

## Principles of Healthcare Delivery System

- (i) supports a coordinated, cohesive health-care delivery system.
- (ii) opposes the concept of fee-for-service practice.
- (iii) supports the concept of prepaid group practice.
- (iv) urges an emphasis be placed on development of primary care.
- (v) supports health care as a basic human right for all people.

## Functions of Healthcare Delivery System

- (i) To provide health services
- (ii) To raise & pool the resources accessible to pay for health care.
- (iii) To generate human & physical resources that make the delivery service possible.
- (iv) To set & enforce rules of the game & provide

Provide Strategic Directions for all Different players involved.

## Characteristics of Healthcare Delivery Systems

- (i) Orientation toward Health
- (ii) Population perspective
- (iii) Intensive use of Information
- (iv) Focus on consumer
- (v) Knowledge of Treatment outcome
- (vi) constrained Resources.

## Health organizations in India

- (i) Central level
- (ii) State level
- (iii) Peripheral level

### AT the central level

- ① The Union Ministry of Health & Family welfare
- ② Directorate General of Health Services.



Central Council of Health & Family Welfare.

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## Functional of Union Ministry of Health & Family Welfare

### Union List

1. International Health Relations; administration of port quarantine.
2. Administration of central institutes.
3. Promotion of Research through Research Centres.
4. Immigration & emigration.

### Concurrent List

1. Prevention & extension of Communicable Diseases from one unit to another.
2. Control drugs & poisons
3. Labour welfare.

### (DHS) >

For Surveys, Planning, coordination  
Programming

## Specific Functions :-

- (a) International Health Relations
- (b) Control of drug standards
- (c) Medical store depots
- (d) Postgraduate training
- (e) Medical education
- (f) Medical Research
- (g) National Health programmes
- (h) Central Health Education Bureau.
- (i) Health intelligence