

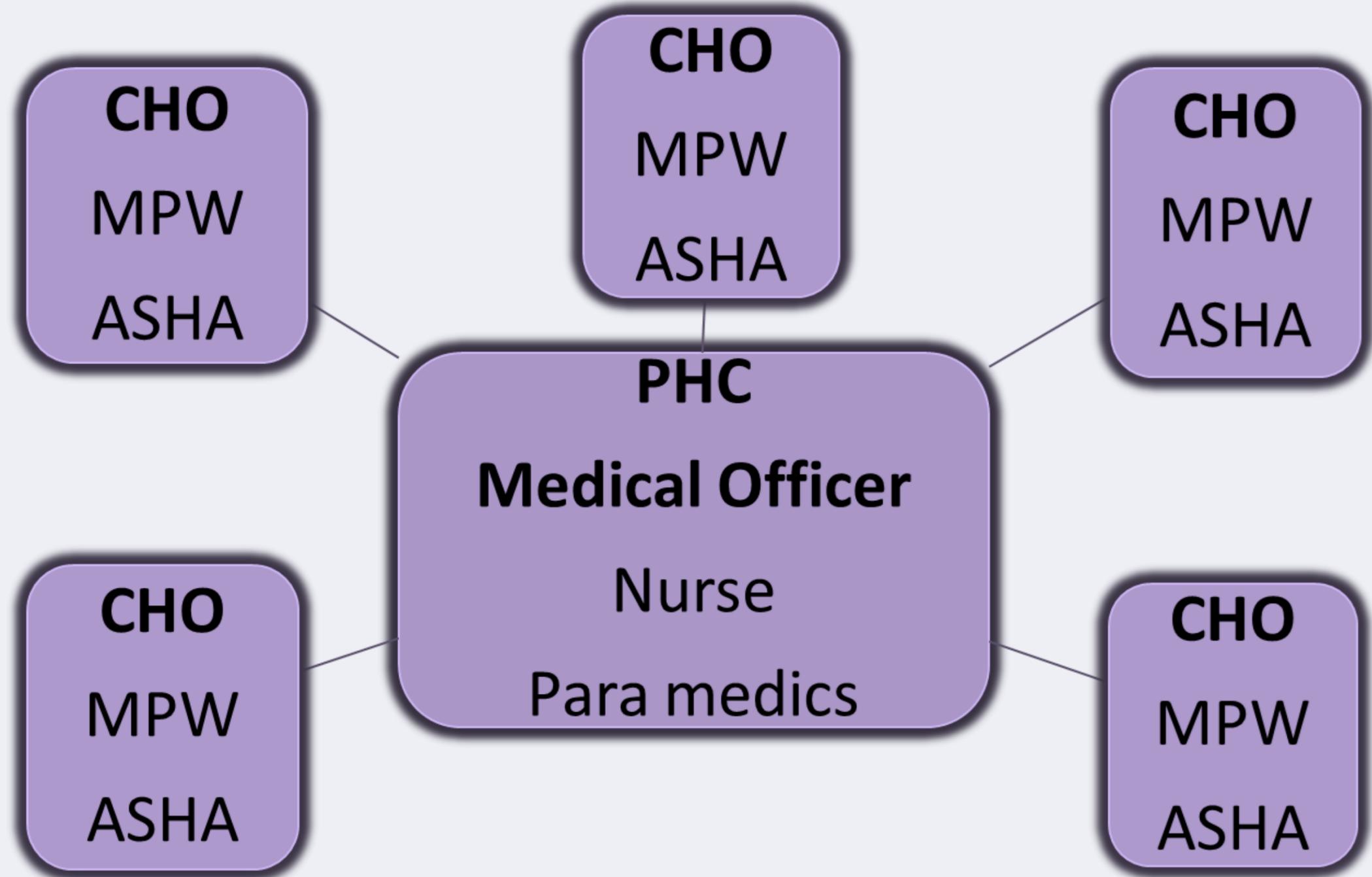


Managing Emergencies with the Primary Health Care Team- Continuum of Care For MO



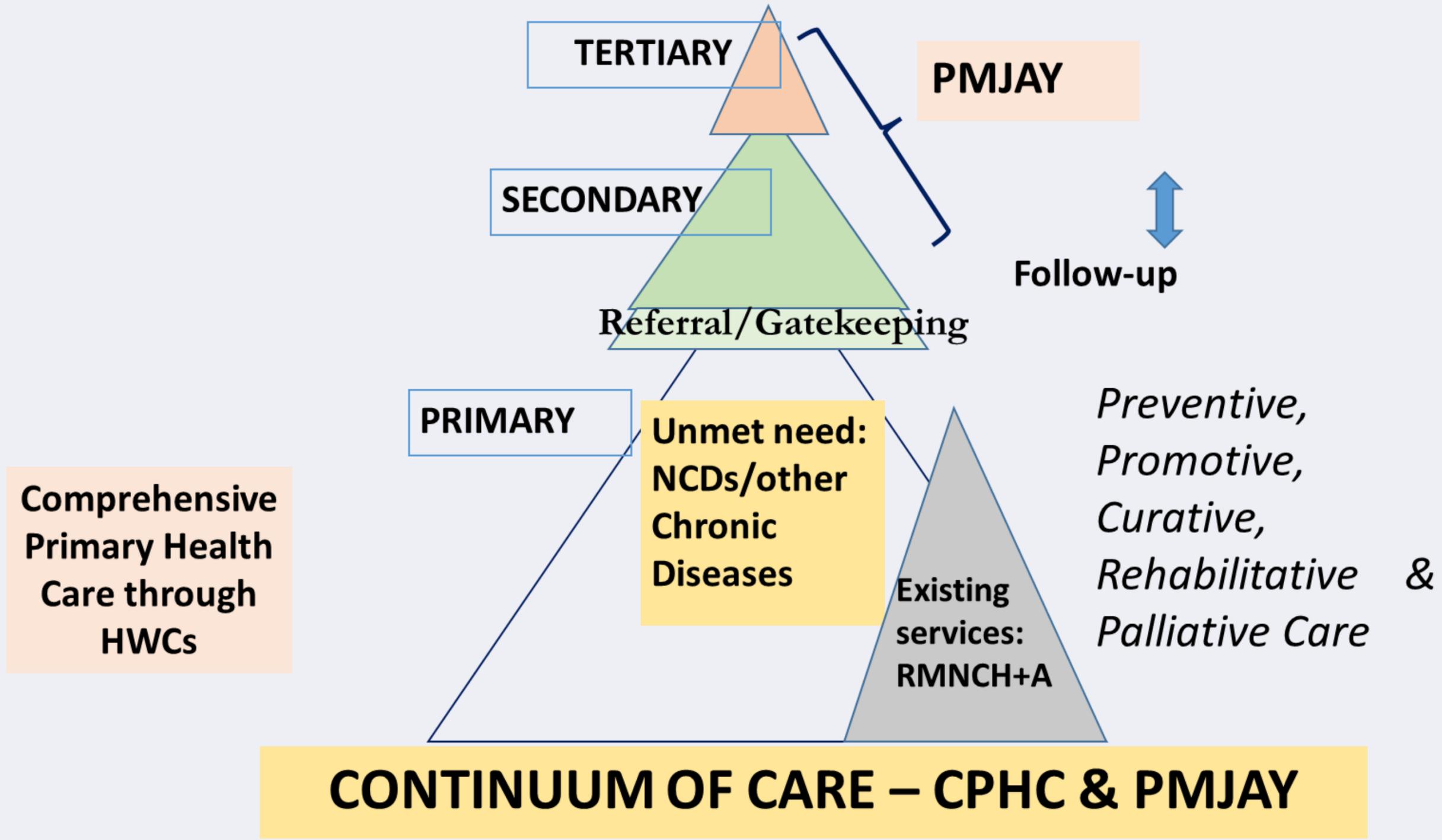


PRIMARY HEALTH CARE TEAM





Universal Health Coverage: Ayushman Bharat-Health and Wellness Centre



CONTINUUM OF CARE – CPHC & PMJAY



KEY ROLES OF THE MO

CLINICAL

- Early detection and management
- Referral
- Follow up
- Counselling of patient and family
- Teleconsultation when possible

PUBLIC HEALTH

- Listing of all high risk populations
- Health promotion and prevention programs
- Disease surveillance where required

MANAGEMENT

- Records and reporting
- Administrative responsibilities
- Supportive supervision of the PHC and Sub Centre teams



PERTAINING TO EMERGENCY CARE

- Group activity - 4 groups
- Each group has a scenario
- List out steps what MO will do in that scenario
- 10 minutes in group
- Choose one leader who will present the answers
- 4 minutes to present





GROUP 1 SCENARIO

Rashmi, the CHO, calls up the MO in her area to say Ashabai, 9 months pregnant came to the sub center in active labor. And just delivered a baby girl 2 kg. However, the placenta has still not come out after 1 hour and so far, 3 big pads are soaked with blood.

Rashmi says she has started an IV drip with NS but wants to know what to do next. Her MPW and ASHA are with her.

How will you respond as an MO. Rashmi has a WhatsApp connection.



GROUP 2 SCENARIO

You were conducting a health education session in Vatli village when some people came running saying that some man had collapsed near his field $\frac{1}{2}$ km away. You have the CHO, MPW and ASHA workers with you for the awareness session. When you reach that place, you find that he is not responding, and you cannot feel a pulse or see any breathing.

What will you do?



GROUP 3 SCENARIO

Today is a busy OPD day – over 100 patients are there and it is only 10.30 am. There is a lot of noise suddenly and Sister shouts saying someone has come to the OPD and is having fits. She says the accompanying person said the fits started in the village over 3 km away. The ASHA has come with the patient also

What will you do?



GROUP 4 SCENARIO

You have just been trained in emergency care and have been asked to plan a mock drill

How will you go about it? Who all will you involve? Where all will you conduct it? List out the details as if it was a checklist for a mock drill for a person in come in a coma





ROLES AT VARIOUS LEVELS



Community/ Field	Sub centre Health & Wellness Centre	PHC	Higher Referral centre
ASHA/ MPW	CHO/ MPW	MO/ NURSE/ PARAMEDIC TEAM	SPECIALISTS
Awareness generation on the preventive aspects of emergency	Assessment , triaging, initial management and stabilisation of all emergencies	Assessment , triaging, initial management and stabilisation and referral of all emergencies	Provide specialised emergency care
raise awareness on Dos and Don'ts for prevention/ action	Referral of cases requiring specialized care after stabilisation	Medico – legal records , reporting and documentation during transfer	Diagnose and specific management of all cases
Facilitate training in first aid – volunteers, schools	Follow up of patients referred	Monthly review , assessment of functionality of equipment and adequacy of referral transport arrangements.	Back referral to the community with regular contact with the MO
initial assessment , management including Basic Care Life Support	Record maintenance, reporting on the appropriate portal	Training and skill building of the front-line workers and CHOs. Training and skill building of the Primary care team Conduct mock drills	Training and skill building of the Primary care team
arrangement of referral transport	Co-ordinate and participate in outreach activities	Supervise , support and co-ordinate all the activities a	



COMMON EMERGENCIES LISTED IN THE OG

- Burns
- Electrocutation
- Altered mental status
- Seizures
- Chest pain
- Poisoning
- Headache
- Shortness of breath
- Stroke
- Snakebite and animal bites
- Near drowning
- Trauma/ injuries

MAINTAINING CONTINUUM OF CARE

Village/Urban Ward

- Identifying potential risk patients – high BP, high risk pregnant women
- Health awareness for prevention of emergencies
- Basic first aid for common emergencies
- Networking with local stakeholders to set up support mechanisms in preparation for emergencies – transport, local volunteers trained in First Aid etc.
- Scouting for potential risk sites – loose wires, open wells, lakes, etc.

- First Aid Care using HABCDE
 - Stabilisation
 - Arrange Transport for referral
 - Referral to PHC or higher centre
 - Teleconsult with medical officer
 - Follow up care
 - Maintain stock of emergency equipment and medicines

SHC-HWC

Follow up all referred cases

CHC/SDH/DH

- Advanced emergency care
- Complication assessment and management
- Hospitalization
- Tertiary linkage/PMJAY

HABCDE approach
 Recognise, Resuscitate and Refer to higher centres
 Teleconsultation with specialists
 Maintain records and all necessary reports including medico legal cases
 Follow up with referred cases

PHC-HWC



EXERCISE

The following slides show a list of various services for Emergency 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
Arrangement of referral transport		
Monthly review , assessment of functionality of equipment		
Assessment , triaging, initial management and stabilisation of all emergencies		
Co-ordinate and participate in outreach activities		



Service	Level of care	Provider
Arrangement of referral transport	Community, HWC, PHC	Anyone in the team
Monthly review , assessment of functionality of equipment	SHC,PHC	CHO, MO
Assessment , triaging, initial management and stabilisation of all emergencies	HWC, PHC	CHO, MO
Co-ordinate and participate in outreach activities	SHC	CHO



Service	Level of care	Provider
raise awareness on Dos and Don'ts for prevention/ action		
Record maintenance, reporting on the appropriate portal		
Facilitate training in first aid – volunteers, schools		
Training and skill building of the Primary care team		



Service	Level of care	Provider
raise awareness on Dos and Don'ts for prevention/ action	Communit y	ASHA, MPW,,CH O
Record maintenance, reporting on the appropriate portal	SHC, PHC	CHO, MO
Facilitate training in first aid – volunteers, schools	Communit y	ASHA, MPW
Training and skill building of the Primary care team	CHC/DH	Specialist



Service	Level of care	Provider
Identification & line listing of any person in the village with hypertension, high risk pregnancies, epilepsy etc.		
ABCD protocol for someone in shock		
Provide specialised emergency care		
Prepare the emergency bay		



Service	Level of care	Provider
Identification & line listing of any person in the village with hypertension, high risk pregnancies, epilepsy etc.	Community	ASHA
ABCD protocol for someone in shock	All levels	All team members
Provide specialised emergency care	DH	Specialist
Prepare the emergency bay	PHC	MO, SN





Thank You

