



Urban Primary Health Centres (UPHC) in Key Focused Areas.

ODISHA

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Part-I

Introduction:

NUHM framework mandate for Urban Primary Health Centre (UPHC) in every 50,000 urban population. This will be achieved by both adapting/upgrading the existing facilities and adding new ones. The geographical and social distribution of UPHCs within the city will maximize access for the urban poor. The UPHC should address the health needs of the urban poor, unorganized workers, including both in notified and non-notified slums and people living in the urban areas also.

It will be the explicit mandate of the UPHC to provide priority services to urban poor people, especially those in most difficult circumstances such as street and slum children, the aged, disabled, single women, un-organized workers in unsafe occupations, and survivors of violence. The UPHC will not only integrate RMNCH+A services but also integrate all vertical disease control programs and non-communicable diseases program. It must also cover the preventive, promotive and curative services.

Objectives of UPHC

- To provide comprehensive primary health care to the urban population in general and particularly the urban poor.
- To achieve and maintain an acceptable standard of quality of care.
- To make the services more responsive and sensitive to the needs of the urban poor.

A Scope of work in the UPHC in rented building

- 1.1 **Coverage** : Each UPHC covers around 50000 urban population or as per the mapping (it is only be proposed against the new UPHC in the city/town)
- 1.2 **Location of the UPHC**:The UPHC shall be located nearby to the proposed new urban UPHC and should be within 1 km from the proposed new UPHC site. It will be functioning in the rented and Govt. building. Once the building is ready, the UPHC will be shifted to the new building. In case of the non-available of rented building, the Govt. building/community building may be taken for the said purpose and the maintenance cost of the building may be paid from house rent provision in the PIP.
- 1.3 **OPD timing**:As per the Govt. notification no. 5993 dated March 2014, the OPD services will be provided twice in day i.e **(8.00 am to 11.00 am)** morning and **(5.00 pm to 8.00 pm)** in the evening. The notified timings will be strictly followed.
- 1.3 **OPD Consultation**: Free medical consultation will be provided to the patients in the OPD. Provision will be made for two observation beds in the UPHC.

- 1.4 Specialist OPD services:** The UPHC will provide free consultation on specialist services as per the need. It is proposed to engage O&G, Paediatric specialist, Medicine/Dental/Skin VD –one day in a week. This service can be extended more days based on the available of resources/need. The specialist will be available in morning and evening time. The remuneration of the specialists will be paid on monthly basis by the respective UPHC through E Transfer/A/c Payee Cheque. The MO I/C, UPHC will certify the availability of the Specialists in the UPHC for payment.
- 1.5 Diagnostic services:** Basic lab diagnosis/laboratory investigations like general pathology, malaria, dengue, Hemoglobin, Urine albumin and sugar, RPR test for syphilis and Blood Grouping and Rh typing etc. will be provided.
- 1.6 Drugs:** As per the Essential Drug List for the Primary health care services of Govt. of Odisha, free drugs will be available in the UPHC.
- 1.7 Referral services:** Referral services shall be provided as per the provision made in RMNCH+A including Family Planning.
- 1.8. For Outreach services,** there will be one ANM for each 10,000 urban population.

B Services under UPHC

1 Clinical/Institution based service

1.1 Maternal Health

- Early registration of all pregnancies in the first trimester (before 12th week of pregnancy). However, even if a woman comes late in her pregnancy for registration she should be registered and care given to her according to gestational age. Recording of tobacco use by all antenatal mothers.
- Minimum 4 antenatal checkups and provision of complete package of services during the specialist visit.
- Follow up with high risk cases
- Tracking of left out ANC cases.
- Associated services like providing iron and folic acid tablets, Tetanus Toxoid injection etc. Ensuring at-least 1 ANC preferably the 3rd visit, must be seen by a doctor.
- Counseling services
- Nutrition and health counseling. Brief advice on tobacco cessation if the antenatal mother is a smoker or tobacco user and also inform about dangers of second hand smoke.

- Identification and management of high risk and alarming signs during pregnancy and labour. Timely referral of such identified cases to FRUs/ other hospitals which are beyond the capacity of Medical Officer UPHC to manage.
- Free services under communicable and non-communicable diseases free of cost will be provided in the UPHC.

1.2 SAB Delivery Services in UPHC with DP

In some of selected UPHCs, SAB delivery services would be available to minimize normal delivery load at 2nd referral hospital. In such case, JSY benefit will be disbursed to the beneficiaries.

1.3 Family Welfare (FW) services

- Education, Motivation and Counseling to adopt appropriate Family planning methods.
- Provision of contraceptives such as condoms, oral pills, emergency contraceptives, IUCD insertions.
- Referral and Follow up services to the eligible couples adopting permanent methods (Tubectomy/Vasectomy)
- Counseling and appropriate referral for couples having infertility.

1.4 Management of Reproductive Tract Infection:

- Sexually Transmitted Infections
- Health education for prevention of RTI/STIs.
- Treatment of RTI/STIs.

1.5 Nutrition Services (coordinated with ICDS)

- Diagnosis and nutrition advice to malnourished children, pregnant women and others.
- Diagnosis and management of anemia and vitamin A deficiency.
- Referral of SAM cases to NRC in the fixed day

1.6 Immunization services

Immunization session will be held on each Wednesday in all the immunization points and hospital. The staff nurse will ensure immunization in the UPHC. The ANM will organize minimum 4 sessions in every Wednesday of the month. They will organize the sessions based on the micro plan developed at the UPHC.

1.7 Micronutrient (Vitamin A & IFA) management: Supervised weekly distribution of Iron-Folic with education about the issue and administration of Vitamin A in needy cases.

- 1.8 De-worming:** Supervised Bi-annually schedule Prior IEC Siblings of students also to be covered.

2 Outreach services

- Regular immunization in fixed day basis in a fixed site
- UHND in fixed day basis in a fixed site
- Periodic Health checkups and health education activities, awareness generation and Co-curricular activities by MAS and ASHA
- Promotion of Safe Drinking Water and Basic Sanitation through community groups like MAS, Urban ASHA and others
- Chemoprophylaxis for Malaria in high malaria endemic areas for pregnant women as per NVBDCP guidelines.
- Disinfection of water sources and Coordination with Public Health Engineering department for safe water supply by MAS and WKS.
- Promotion of sanitation including use of toilets and appropriate garbage disposal
- Testing of water quality using H₂S - Strip Test (Bacteriological).
- Refer to district public health laboratory
- Referral transport to pregnant women and sick neonates
- Promotion of RSBY to BPL families for free treatment of complicated diseases in empaneled health institutions.

C National Health Programs

1 Communicable Diseases

1.1 Revised National Tuberculosis Control Program (RNTCP)

- Some of the selected UPHCs shall be designated as DOTS Centres to provide treatment as per RNTCP treatment guideline/designated microscopic centre per 1 lakh population as per norm.
- Collection and transportation of sputum samples as per the RNTCP guidelines
- Linkages with private practitioners, ULB members and urban health care providers.
- Sensitization training to AWWs, ASHA and community volunteers for TB suspects, supervision of DOTS, organization of awareness campaigns and over all facilitate implementation of RNTCP activities, etc.

1.2 National Leprosy Eradication Program

- Health education to community regarding Leprosy.
- Diagnosis and management of Leprosy and its complications including reactions.
- Training of leprosy patients having ulcers for self-care.

- Counseling for leprosy patients for regularity/ completion of treatment and prevention of disability.

1.3 National Vector Borne Disease Control Program (NVBDCP)

Diagnosis and Management of Vector Borne Diseases is to be undertaken as per NVBDCP guidelines for UPHC:

- Diagnosis of Malaria cases, microscopic confirmation and treatment.
- Cases of suspected Dengue and JE to be provided symptomatic treatment, hospitalization and case management as per the protocols.
- Complete treatment of microfilaria positive cases with DEC and participation in and arrangement for Mass Drug Administration (MDA) along with management of side reactions, if any.

1.4 Integrated Disease Surveillance Project (IDSP)

- Weekly reporting of epidemic prone diseases in S,P & L forms and SOS reporting of any cluster of cases
- UPHC will collect and analyze data and will report to UCHC/other referral unit.
- Appropriate preparedness and first level action in out-break situations.
- Laboratory services for diagnosis of Malaria, Tuberculosis, and tests for detection of faecal contamination of water (Rapid test kit) and chlorination level.

1.5 HIV/AIDS

- Referral of HIV/AIDS cases to UCHC/Referral hospital/ART/FICTC to UCHC for treatment.
- IEC activities to create awareness on prevention and control of HIV/AIDS.
- Training will be conducted by OSACS

2 Non-communicable Diseases (NCDs)

2.1 Prevention, Promotion and Health Counseling

- Health promotion for behavior change and communication
- Opportunistic screening for Diabetes and Hypertension using glucometer kits and BP measurement
- Clinical diagnosis and treatment of common CVDs including Hypertension and Diabetes
- Identification of early warning signals of common cancer
- Early diagnosis of COPD
- Detection of Breast/Cervical cancer/oral cancer
- Early diagnosis of mental health disorders

- Early diagnosis of blindness (cataract and night blindness)
- Early diagnosis of sickle Cell Anemia, Thalassemia, Fluorosis, IDD, etc.
- Identification of suspicious cancer cases through camp approach and in PPP mode
- Referral cases to UCHC/Referral hospitals

2.2 Treatment

- Diabetes
- Hypertension
- Treatment of blindness(night blindness)
- Treatment of other allergic pulmonary conditions

2.3 IEC/BCC

Display of IEC materials on NCDs, advocacy campaigns, leaflets, wall writings, hoardings, etc.

D Training

- Imparting training to UPHC staff in basic health care.
- Orientation training of health workers in various National Health Programs including RCH, Adolescent health services and immunization
- Skill based training to Urban ASHAs MAS and RKS
- Initial and periodic Training of paramedics in treatment of minor ailments.
- All health staff of UPHC would be trained in IMEP.
- Whenever new/higher responsibility is assigned or new equipment/technology is introduced, there must be provision of training.
- Trainings in minor repairs and maintenance of available equipment
- Training of paramedics in indenting, forecasting, inventory and store management
- Development of protocols for equipment (operation, preventive and breakdown maintenance).
- Periodic skill development training of the staff of the UPHC in the various jobs/responsibilities assigned to them.

E Basic Laboratory and Diagnostic Services

Essential Laboratory services including

- Routine urine, stool and blood tests (Hb%, platelets count, total RBC, WBC, bleeding and clotting time).
- Diagnosis of RTI/STDs with wet mounting, Grams stain, etc.

- Sputum testing for mycobacterium (as per guidelines of RNTCP).
- Blood smear examination malarial
- Blood for grouping and Rh typing
- Blood sugar testing
- Cervical cancer test
- RDK for Pf malaria in endemic areas.
- Rapid tests for pregnancy/NISHAYA Kit
- RPR test for Syphilis/YAWS surveillance
- Rapid test kit for fecal contamination of water
- Blood Sugar.

Validation of reports: Periodic validation of laboratory reports should be done with external agencies like UCHC/Medical colleges for Quality Assurance.

F Record of Vital Events and Reporting

- Recording and reporting of Vital statistics including births and deaths.
- Maintenance of all the relevant records concerning services provided in UPHC.
- Maternal Death Review (MDR)

G UPHC Infrastructure

The UPHC in the rented and Govt. accommodation should have the details are as follows:

UPHC Building

Location

It should be located within 1km from the proposed new sites for establishment of the UPHC. The building should have facilities for electricity, all weather road communication, adequate water supply and telephone. UPHC should be away from garbage collection, cattle shed, water logging area, etc. UPHC shall have proper boundary wall and gate.

Sign-age

The building should have a prominent board displaying the name of the Centre in the local language at the gate and on the building. UPHC should have pictorial, bilingual directional and layout sign-age of all the departments and public utilities (toilets, drinking water). Prominent display boards in local language providing information regarding the services available/user charges/fee and the timings of the centre. Relevant IEC material shall be displayed at strategic locations. Citizen charter including patient rights and responsibilities shall be displayed at OPD and Entrance in local language.

Firefighting equipment – fire extinguishers, sand buckets etc. should be available and maintained to be readily available when needed. Staff should be trained in using firefighting equipment.

All UPHCs should have Disaster Management Plan in line with the City Disaster management Plan. All health, staff should be trained and well conversant with disaster prevention and management aspects. Surprise mock drills should be conducted at regular intervals.

Rooms in the rented /govt. building

- There should be adequate space like 5 rooms for OPD consultation, laboratory, drugs dispensing, specialist consultation, general store, office room, observation room etc.
- This should have adequate space and sitting arrangements for waiting attendants/patients as per patient load.
- Minimum 2 toilets should be in the rented space.
- The walls should carry posters imparting health education.
- Toilets with adequate water supply separate for males and females should be available.
- Waiting area should have adequate number of fans, coolers, benches or chairs.
- Safe Drinking water should be available in the patient's waiting area.
- There should be proper notice displaying departments of the centre, available services and names of the doctors, users' fee details and list of members of the Rogi Kalyan Samiti / Hospital Management Committee.
- A locked complaint/suggestion box should be provided and it should be ensured that the complaints/suggestions are looked into at regular intervals and addressed.
- The surroundings should be kept clean with no waterlogging and vector breeding places in and around the centre.

Other amenities

Adequate water supply and water storage facility (over head tank) with pipe water should be made available. Alternative power backup (inverter/generator) should be available in the UPHC and proper lighting arrangement should be made within the UPHC area.

Computer

Each UPHC should have computer with Internet connection for Management Information System (MIS) purpose.

H Staff of UPHC (non DP)

- Medical Officer 1
- Staff Nurse 2
- Lab. Tech. 1
- Pharmacist 1

- Attendant/ support staff 2
 - Part time specialists 2
- (Additional manpower if approved by Govt./NHM)

Regarding selection of manpower in the UPHC, a committee under the chairpersonship of ADMO-PH will be examined the applications and selects the candidate as per the merit list.

Staff for Outreach Services

As per the mapping, the ANM five(5) in numbers(virtual sub-centre) attached to UPHC will be organising outreach camps/programs in their catchment area, i.e., 10000 urban population each. The ANM will report to MO(I/C) of the concerned UPHC.

I Rogi Kalyan Samiti (RKS)

The Rogi Kalyan Samiti (RKS) will be formed at each UPHC as per the approved guideline. The Chief Functionary of the agency managing the UPHC may be added as Member in GB and EB as special invitee. The respective RKS of UPHCs in the targeted facility will be provided with Annual Untied Fund for meeting urgent discreet needs. Separate RKS guidelines have been communicated for effective functioning of RKS at health institution level. Fund provision is given below;

| Norms | Amount |
|---------------------------------|---------------|
| UPHC running in rented building | Rs. 1.00 lakh |

The amount can be modified by GOI.

J Infection Management and Environment Plan (IMEP) at UPHC

The infection management at UPHC level will be carried out as per the provision under IMEP guidelines prepared by Health & Family Welfare Department, Government of Odisha. Some of the key activities are as follows.

- Procurement of logistics like Bins, Wheel borrow, consumables. Strategic points may be identified where BMW is generated. The recurring expenditures for procurement of logistics may be met from RKS fund.
- Signage
- Containment area development plan
- Authorization from OPCB
- Review cum coordination meeting
- Sanitation committee

K Quality Assurance

Standard Quality Treatment Protocol will be followed as per the Government norms.

L Social audit

To ensure accountability, the Citizen's Charter should be made available in the UPHC. Every UPHC should have a Rogi Kalyan Samiti for improvement of the management and service provision of the UPHC. The Samiti is the appropriate authority to generate its own funds (through users' charges, donation etc. and utilize the same for service improvement of the UPHC. The State Health Society/ City Health Mission/City Health Society/District Health Society /Rogi Kalyan Samiti& others should also monitor the functioning of the UPHCs.

M Statutory and Regulatory Compliance

Clinical establishment Act will be followed to address the statutory and regulatory compliance.

N Monitoring & Evaluation

Monthly review meeting of the ANMs will be conducted under the chairperson/chairmanship of MO(I/C). The report of the virtual sub-centre shall be compiled and consolidated. The monthly report of the U-PHC will be submitted in the prescribed format by 1st week of each month to CHC/District/City with a copy to DPMU/CPMU.

The UPHC may submit the reports as per the details given below;

- Monthly HIMS
- Monthly medicine indent
- Monthly report of communicable and non-communicable disease
- Monthly report of vital statistic
- Monthly UHND report
- Monthly status report of MAS
- Monthly status report of ASHA
- Monthly FMR
- Weekly report of Fixed Day Services (FDS), IDSP, Malaria
- Annual Medial Statement (AMS)
- Annual Administrative Report

The MO (I/c) should visit at least 5% of UHND sites in each month

- Monitoring and supervision of activities of ANM through regular meetings/periodic visits by LHV and Medical Officer etc.
- Monitoring of all National Health Programs by Medical Officer
- Monitoring of MAS, Urban ASHAs by LHV and ANM activities

Internal Mechanisms:

- Record maintenance, checking and supervision.
- Medical Audit
- Death Audit
- Patient Satisfaction Surveys: For OPD patients.
- Evaluation of Complaints and suggestions received

External Mechanisms: Monitoring through the State Health Society/ City Health Mission/City Health Society/District Health Society /Rogi Kalyan Samiti /Community monitoring framework. (as per guidelines of GOI/State Government).

Annexure II: List of Suggested Equipment's and Furniture including Reagents and Diagnostic Kits for UPHC

Essential

1. Equipment for New Born Care and Neonatal
2. IUCD insertion kit.
3. Equipment/reagents for essential laboratory investigations.
4. Refrigerator.
5. ILR (Small) and DF (Small) with Voltage Stabilizer.
6. Cold Boxes (Small & Large): Small- one, Large –two.
7. Vaccine Carriers with 4 Icepacks: Two per SC(maximum 2 per polio booth) + 1 for PHC.
8. Spare ice pack box: 8, 25 & 60 ice pack boxes per vaccine carrier, Small cold box & large cold box respectively.
9. Waste disposal twin bucket, hypochlorite solution/bleach: As per need.
10. Freeze Tag: 2 per ILR bimonthly.
11. Ice box.
12. Computer with accessories including internet facility.
13. Binocular microscope.
14. Equipment under various National Programmes.
15. Adult weighing scale.
16. Baby weighing scale.
17. Height measuring Scale
18. Sponge holding forceps – 2.
19. Vulsellum uterine forceps – 2.
20. Tenaculum uterine forceps – 2
21. Torch without batteries – 2.
22. Battery dry cells 1.5 volt (large size) – 4.
23. Bowl for antiseptic solution for soaking cotton swabs.
24. BMW & IMEP facility as per norm.
25. Kits for testing residual chlorine in drinking water.
26. H₂S Strip test bottles.
27. Head Light
28. Ear specula.
29. B.P. Apparatus table model – 2.
30. Stethoscope – 2.
31. Artery Forceps-6
32. Eles forceps-6
33. Needle Holder-4
34. Cutting needles of different Sizes- Small, Medium, Big-6
35. Suturing materials silk
36. Scissors- 2 pairs
37. Stitch Cutter-2
38. Toothed forceps-6
39. Plain forceps - 6
40. Tooth extractor Universal - 1
41. Mouth gag - 1

42. Gastric tube for waxing-6
43. Needle Cutter of different Sizes-6

Desirable

1. Room Heater/Cooler for immunization clinic with electrical fittings as per need.
2. Ear Syringe.
3. Otoscope.
4. Nebuliser – 1

List of equipment for Pap smear

1. Cusco's vaginal speculum (each of small, medium and large size)
2. Sim's vaginal speculum – single & double ended -(each of small, medium and large size)
3. Sterile Gloves
4. Sterilised cotton swabs and swab sticks in a jar with lid
5. Kidney tray for keeping used instruments
6. Bowl for antiseptic solution
7. **Antiseptic solution:** Chlorhexidine 1% or Cetrimide 2% (if povidone iodine solution is available, it is preferable to use that)
8. Cheatle's forceps
9. For vaginal and Pap Smears:
10. Clean slides with cover slips
11. Cotton swab sticks
12. KOH solution in bottle with dropper
13. Saline in bottle with dropper
14. Ayre's spatula
15. Fixing solution/hair spray

Requirements of the laboratory

Essential

Reagents

1. Uristix for urine albumin and sugar analysis
2. ABO & Rh antibodies
3. Gram's iodine
4. Crystal Violet stain
5. PH test strips
6. RPR test kits for syphilis
7. H₂S Strip test kits for faecal contamination of drinking water
8. Test kits for estimation of residual chlorine in drinking water using orthotoludine reagent
9. 1000 Nos Whole Blood Finger Prick HIV Rapid Test and STI Screening Test each.
10. 1% hypo chloride solution

Essential

Glassware and other equipment:

1. Colorimeter
2. Test tubes
3. Pipettes

4. Glass rods
5. Glass slides
6. Cover slips
7. Differential blood cell counter (Desirable)
8. Glucometer (Desirable)

List of Furniture at UPHC

The list is indicative and not exhaustive. The Furniture/fittings and Medical and Surgical items are to be provided as per need and availability of space and services provided by the PHC.

Essential Items

1. Examination table 1
2. Writing tables with table sheets 1
3. Plastic chairs (for in-patients' attendants) 6
4. Armless chairs 16
5. Full size steel almirah 7
6. Table for Immunization/FP/Counselling 1
7. Bench for waiting area 2
8. Wheel chair 1
9. Stretcher on trolley 1
10. Wooden screen 1
11. Foot step 2
12. Stool 2
13. Medicine chest 1
14. Lamp 1
15. Side Wooden racks 2
16. Fan in each room
17. Tube light in each room- CFL, LED
18. Basin 2
19. Basin stand 2
20. Buckets 4
21. Mugs 4
22. LPG stove 1/ Induction heater
23. LPG cylinder 1
24. Dustbin 5- BMW Buckets
25. Coloured Puncture proof bags as per need
26. Generator/Inverter (5 KVA with POL with immunization purpose)
27. Coloured poly bags as per need
28. Generator/Inverter (5 KVA with immunization purpose)

Essential Medical/Surgical items

1. Blood Pressure Apparatus 3 (Non-mercury is desirable)
2. Stethoscope 3
3. Tongue Depressor 2
4. Thermometer Clinical 2
5. Hub cutter 2
6. Needle Destroyer 2

7. Instrument trolley 2
8. I V stand 2
9. Macintosh for labour and OT table As per need
10. Red Bags As per need
11. Black bags As per need
12. One observation bed, mattress, bed sheet and pillows