

**GUIDELINES FOR CERTIFICATE COURSE IN COMMUNITY HEALTH CARE
UNDER ALLIED HEALTH SCIENCES**

TEACHING FACULTY :

<u>DESIGNATION</u>	<u>NO. OF POST REQUIRED</u>	<u>MINIMUM QUALIFICATION / DESIGNATION</u>	<u>EXPERIENCE (IN YEARS)</u>
COURSE DIRECTOR or PROFESSOR/PRINCIPAL	1	DEPUTY DIRECTOR DPH Or MD(SPM)	5 YEARS in Public Health Service
ASSOCIATE PROFESSOR / ASSISTANT PROFESSOR	1	ASSISTANT DIRECTOR (STATISTICS)	2 YEARS IN Public Health Service
	2	MEDICAL FACULTY M.B.B.S. + ANY PG (OPTIONAL)	
	6	PUBLIC HEALTH NURSE M.Sc(N) / B.Sc(N)	
	1	ENTOMOLOGIST (M.Sc./B.Sc.)	
	1	HEALTH EDUCATOR (Dip. Health Education)	

ADMINISTRATIVE STAFF :

<u>DESIGNATION</u>	<u>NO. OF POST REQUIRED</u>
ADMINISTRATIVE OFFICER	1
CLERK	1
ACCOUNTANT	1
LIBRARY	30 No. of books
SKILLS LAB	Yes

TIE UP GENERAL HOSPITAL NEAR BY:

<u>PARTICULARS</u>	<u>PER DAY</u>		
OUT PATIENTS	500		
IN PATIENTS	100		
BED STRENGTH	100 7 Centres, 2 Session of admission & Exams. 120 No. of Admission per session		
<u>PARTICULARS</u>	<u>REQUIREMENTS</u>		
EQUIPMENTS	1. Semiautoanalyser 2. Cell Counter – 3 Part 3. Lab. Centrifuge 4. Binocular Microscope 5. Micro pipettes – Variable Ranges – 2 Nos 6. VDRL Shaker 7. Refrigerator – 310 Lts. 8. Blood Tube Agitator 9. UPS Back Up		
MULTI MEDIA	LCD/TV		
<u>PARTICULARS</u>	<u>NO. OF ROOMS</u>	<u>SQ.FT.</u>	

<u>BUILT-UP AREA</u> 1. Class Room 2. Patients Preparation Room 3. Administrative officer 4. Professor room 5. Assistant Professor 6. PG - Room 7. Examination Rooms 8. Op registration 9. Waiting Hall 10. Counseling Room 11. Lab 12. Clinical Demonstration room		
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13. Op - Procedure room 14. Staff Nurse room 15. Store room 16. Record + computer room 17. Follow up clinic (Old cases) 18. Emergency treatment room 19. Rest room (Toilet) 20. Day care chemo		
<u>PARTICULARS</u>	<u>NO. OF BOOKS</u>	<u>NO. OF JOURNALS</u>
LIBRARY	30	-

<u>PARTICULARS</u>	<u>REQUIREMENTS</u>
MAXIMUM INTAKE OF STUDENTS	120 PER SESSION OF ADMISSION (JANUARY & JULY)
REGISTRATION DETAILS	As per University Norms

Note:

Signature of the Inspection team
with name and date

Regulation of Certificate Course in Community Health Care at Recognized (7) Training institutions under the control of Directorate of Public Health and Preventive Medicine

1. Introduction

Universal Health Coverage (UHC) is the single most powerful and strategic intervention that public health has to offer through primary care. It is inclusive and unifies services and delivers health care in a comprehensive and integrated way, based on primary health care.

The foundation for UHC is a universal entitlement to comprehensive health security for access to adequate food and nutrition, appropriate medical care, access to safe drinking water, proper sanitation, education, health-related information, and other contributors to good health. Any social government is primarily and principally responsible for ensuring and guaranteeing UHC for its citizens by providing health and related services and addressing the wider determinants of health to effectively guarantee health security.

Government of India mandated all the States to transform the Health Sub Centres into Health and Wellness Centres (HWCs) under “Ayushman Bharat Scheme”. Transformation of Health Sub Centres (HSC) into Health and Wellness Centres (HWC) is to be operationalized through a team led by Mid-Level Health

Care Provider (MLHP) and such providers will undergo a bridge course for 6 months in Community Health Care.

Mid-level healthcare provider will be trained in a set of primary healthcare and public health competencies through a six-month training programme. In the State, the Village Health Nurse (VHN) in HSCs shall undergo the 6 months Mid-Level Health Providers (MLHP) bridge course in 'Diploma in Community Healthcare' with 6 months of internship. The ANM/VHN will be awarded "Diploma in Community Healthcare" after the successful completion of the 6 months' course with internship for another 6 months. Total duration of the course will be 1 year including internship.

2. Purpose

The purpose of Diploma in Community Healthcare is to prepare a VHN to function at HWC with the specific skills to full fill the health needs of the community and thereby reducing the financial hardship.

3. Objectives of this course

On completion of the course, the CHC trained VHN will be able to

- (i) Care during pregnancy and childbirth
- (ii) Deliver neonatal and infant care services
- (iii) Provide childhood and adolescent health care services

- (iv) Educate and provide family planning ,contraceptive services and other reproductive services
- (v) Manage and treat all communicable disease linked in national health programmes
- (vi) Provide general outpatient care for acute simple illness and minor ailments
- (vii) Screen and manage non communicable diseases
- (viii) Provide screening and basic management of mental health ailments
- (ix) Provide care for common ophthalmic and ENT problems
- (x) Provide basic dental care
- (xi) Provide geriatric and palliative health care services
- (xii) Provide basic trauma care and emergency medical services

4. Strength of Directorate of the Public Health and Preventive medicine

The Directorate of Public Health and Preventive Medicine (DPH&PM) has a mandate to implement the national and state health programmes for reaching the levels attained by developed countries in human development by ensuring universal access to health facilities. Through this Directorate, the Government has been focusing on preventive and promotive health measure using this department as the base with interventions aimed to prevent and manage diseases, injuries and other health conditions through surveillance and promotion

of healthy behaviour among communities and environmental public hygiene. Functions of Public Health include Health Promotion through healthy behaviour, prevention of communicable and non-communicable diseases, organizing of community based high quality health services with focus on maternal and child health empowering public to make healthy decisions, disaster prevention and management and ensure the availability of a competent public health workforce. The Directorate of Public Health and Preventive Medicine of Tamil Nadu, formed during 1923, is engaged in the above said context in protecting, promoting the health of people, by immunization, health education, application of hygiene and sanitary measures and monitoring of drinking water quality and environmental hazards also and thereby reducing the burden of morbidity, mortality and disability in the State.

Continuing education, In-service training and Pre-service training programmes are organized for the Health Officers, Medical Officers, Nurses and other paramedical staff through 8 Regional Training Institutes (RTI) namely Institute of Public Health, Poonamallee, Health and Family Welfare Training Centres (HFWTC) at Egmore and Madurai, Health Manpower Development Institutes at Villupuram and Salem, Institute of Vector Control and Zoonoses, Hosur and Regional Institute of Public Health, Thiruvaramkulam, Pudukottai and HFWTC,

Gandhigram, Dindigul. The Institute of Public Health Poonamallee is recognized as a national collaborative training centre with National Institute of Health and Family Welfare, New Delhi. In these eight institutes one year Multi-Propose Health Worker (Male) Training course is conducted.

The Training programmes organised by the National Health Mission, Capacity building trainings in Skilled Birth Attendants (SBA), Emergency Obstetric Care (EmOC, six months training), Life Saving Anaesthesia Skills (LSAS, six months training), Skill lab programmes, Integrated Management of Neonatal and Childhood Illness, Immunization, Integrated Disease Surveillance and Control Programme (IDSP), Computer Training and other NHM training programmes are organized in these training institutes.

Presently there are twelve Government Auxiliary Nurse and Midwifery (ANM) Training Schools in the State. These Schools are conducting two years ANM Training course.

The State Government have authorized the Director of Public Health and Preventive Medicine as the Chairman, Board of Examination for conduct of two years ANM Training course run by Private Institutions vide Government Order (Ms) No:44, Health and Family welfare (N1) Department dated 20.02.2017. Accordingly, so far 16 ANM Private Training Institutions were

permitted by the Government to start ANM Training course from the academic year 2017-18.

The State Government have also authorised the Director of Public Health and Preventive Medicine to approve new guidelines and syllabus and as the Chairman, Board of Examination for Multipurpose Health Worker (Male) / Health Inspector / Sanitary Inspector 2 years course conducted by Private Institutions vide Government Order (Ms) No: 107, Health and Family welfare (N1) Department, dated 13.04.2017. Accordingly, so far 25 Private Institutions are permitted by the Government to start Multipurpose Health Worker (Male) / Health Inspector / Sanitary Inspector Training course from the academic year 2017-18.

Based on the above strength the Directorate of Public Health and Preventive Medicine is proposing to start the Diploma in Community Health Care for Village Health Nurses in the following institution under its control for implementing Universal Health Coverage programme.

1. Institute of Public Health, Poonammalle, Chennai - 56
2. Health and Family Welfare Training Center, Egmore, Chennai - 8
3. Health and Family Welfare Training Center, Madurai - 625014
4. Health Man Power Development institute, Salem - 636030
5. Health Man Power Development institute, Villupuram - 605401

6. Regional Institute of Public Health, Thiruvankulam,
Pudukottai District - 622303.

7. Institute of Vector Control and Zoonoses, Hosur,
Krishnagiri District - 635126.

5. Eligibility for Admission

(I) GNM qualification from Government or Government approved
Private GNM Institution.

(II) B.Sc Nursing Courses

(iii) ANM qualification from Government or Government
approved Private ANM School, not exceeding 53 years of age
which is recognized by Indian Nursing Council, namely:

(iv) Eligibility for enrolment with university is to have
completed ANM course and working under the Directorate of
Public Health & Preventive Medicine.

(v) DP & PM to complete the Registration, Verification of
Certificates of the candidates and issue Bonafide Certificate of
all candidates.

(vi) Must possess physical fitness for camp life.

Further, the selection of the candidate will be made by the
Directorate of Public Health and Preventive Medicine.

6. Registration

A Candidate admitted to the Certificate in Community
Health care in any one of the affiliated institutions as requested
above shall register his / her name with this University by

submitting the prescribed application form for registration duly filled, and a declaration in the format to the Controller of Examination of this University through the affiliated institution within 30 days from the cut-off date prescribed for the course for admission. The applications should have the date of admission of the course.

7. Migration / Transfer of Candidate

A student studying in the Certificate in Community Health care cannot be allowed to migrate/transfer to another institution.

8. Commencement of the Course

The course shall commence from January and July of every academic year.

9. Number of Candidates for Admission

120 students per batch during January and July per institution two batch per year for each institution.

10. Medium of Instruction

English and Tamil and shall be the medium of instruction for all the topics for study and examinations of the Certificate in Community Health care course.

11. Curriculum

The Curriculum and the syllabus for the course are enclosed.

12. Teaching Hours

Theory - August/February every year after 6 months

S.no	Paper	Theory Hrs	Tele mentoring/Extension for Community Healthcare Outcome	Total
1	Paper 1	27	17	44
2	Paper II	80	52	132
3	Paper III	47	36	83
4	Paper IV	44	35	79
5	Test	10		10
		208	140	348

Practical

Paper	Duration	RTI (MCH)	HSC (MCH)	CHC	PHC	UPHC	HSC	Total Days	Total Hours
Paper V	Days	9	4	8	8	1	45	75	510
Paper VI	Days	1	6	2	2	1	25	37	246
	Total Days	10	10	10	10	2	70	112	
Total Hours		160		80	80	16	420		756

13. Duration of the Course

- The duration of the course for the Certificate in Community Health care is one year. Of which 6 months will be the teaching/ training in the affiliated institutions and its centers and in the field. They shall be permitted to appear for exam.
- Six months will be the compulsory community internship at their working place. At the end of the

internship they have to submit the project work/Log Book.

14. Commencement/Cut-Off Dates for Admission /Examinations

Date of commencement of the batch and admission process completion/examination date are given in the table below

Batch	Date of Commencement of the Course	Last date for Completion of Admission	Theory Exam
1 st	1 st January	31 st January	August
2 nd	1 st July	31 st July	February

After completion of 6 months of theory, they will be permitted to undergo field training/compulsory community internship for 6 months irrespective of their appearing / result of theory / practical examinations.

15. Withdrawal from the course

In the event of withdrawal of a candidate from the course before the stipulated period, the competent authority shall decide on merit of the case.

16. Commencement of the examination

- Theory Examination will be conducted at the end of the first six months of the course. After 6 months of teaching/training will be posted for their compulsory community internship of 6 months duration irrespective of their theory results.

- If the date of commencement of examination falls on Saturdays / Sundays or declared Public Holidays, the examination shall begin on the next working day.
- If any failure in theory, shall be completed / passed in the consecutive supplementary UG sessions of exams.

17.Attendance required for admission to examination

- No candidate shall be permitted to appear in any one of the parts of The Certificate in Community Health Care unless she has attended the course in the subject for the prescribed period in an affiliated institution recognized by this University and produce the necessary certificate of study, attendance and satisfactory conduct from the Head of the institution.
- A candidate is required to put in a minimum of 85% of attendance in both theory and practicum separately before admission to the examinations.

18.Setting of Question papers and Examiners for Theory and Practical

Question papers will be prepared by the senior faculty from the Regional Training Institutes. Examiners for theory, practical and paper correction will be senior faculty from the Regional Training Institutes, ANM Schools, Block Medical Officers, District Maternal Child Health Officers

19.Theory and Practical Examination

Theory and Practical examinations will be conducted after
6 months of teaching/training.

Paper	Course	Internal assessment t	University Examination n	Total
Theory				
Paper I	Foundations of Community Health	50	100	150
Paper II	Primary health care of common conditions	50	100	150
Paper III	Maternal and child health	50	100	150
Paper IV	Nutrition ,Health Education and Health Management in Information System	50	100	150
Practical				
Paper V	Public Health and Primary Health care skills (1 & 2 papers)	50	100	150
Paper VI	Maternal and Child health skills (2 & 4 papers)	50	100	150

- a) Theory- Internal assessment by two Assignments and Internal examination (50 Marks) for each paper
- Two assignments for each paper and each carries 15 marks
 - Internal Assessment 20 marks

Theory exam Pattern (100 Marks) at the end of 6

months Three Essay : $10 \times 3 = 30$

Ten short answers : $10 \times 5 = 50$

Ten ultra-short answers : $10 \times 2 = 20$

b) Practical- Internal assessment by one LOG book for each practical paper each LOG book carries 50 Marks

Practical Exam and Marks for the LOG book shall be included in IA.

Practical Exam at the end 6 Months (100 Marks)

Case discussion (Two) $2 \times 20 = 40$

Spotters (TEN) $10 \times 3 = 30$

Simulation problems $10 \times 3 = 30$

c) Project and Viva at the end of year (100 Marks)

Project 50 + Viva 50 = 100

*Project +Viva will be evaluated for 100 Marks with Minimum Pass Percentage of 50 %.

20. Marks qualifying for pass:

- 50% of marks in aggregate in Theory (100 Marks) and Theory I.A (50 Marks) taken together after 6 months.
- 50% of marks in aggregate in Practical (100 Marks), Practical I.A (50 Marks) taken together after 6 months.
- 50% Marks in Project admitted at the end of 1 year of course.

21. Examination and marks

In the first six months four internal test will be conducted and two assignment will be given each paper. Assignments and internal examination shall be part of the internal evaluation and the marks will duly be given for the same.

Week 4	Field Training	Field Training	Field Training	Field Training	Field Training	RTI
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**Field Training* - the VHNs will attend practical session/ 2 Hours of theory session in the HSCs, CHCs and District Hospital and it will be monitored and coordinated by the faculty of the regional training centers.

a. Second Six Months

They will posted for the compulsory community internship for the six month and the end of the six months they have to submit the Project Work /Log book

27. Subjects

a. Theory : 4 Papers

1. Foundations of Community Health
2. Primary Health Care of Common communicable and Non communicable Disease
3. Maternal and Child Health
4. Nutrition, Health Education and HMIS

b. Practical: 2 Papers

1. Public health and primary health care skills
2. Maternal and child health

c. Project and Viva - Field Training

Certificate in Community Health Care Syllabus

I Foundations Of Community Health

Introduction to Public Health and Epidemiology

Concepts of Community Health

Health Care Planning and Organization of Health

Care at various levels Environmental Health and Sanitation

**Introduction to Epidemiology, Epidemiological
Approaches and Processes Demography, Surveillance
and Interpretation of data
Bio-Medical Waste Management and Infection Control**

➤ **Primary Health Care Of Common Communicable and
Non Communicable Diseases**

**Communicable Diseases and Management under National Health
Programme**

Epidemiology of specific communicable disease
Communicable Diseases -1
Communicable Diseases -2
Communicable Diseases -3

**Non-Communicable Diseases and Management under National Health
Programme**

Epidemiology of specific Non-communicable
diseases Non-Communicable Diseases – 1
Non-Communicable Diseases – 2
Occupational diseases
Screening, Management, Prevention and Referral for
Mental Health Disorders Care of the Elderly

**Management of Common Conditions and Emergencies including
First Aid**

Common Conditions-1- Gastro Intestinal system Common Conditions-2-
Respiratory System Common Conditions-3- Heart, Blood Urinary System
Disorders Common conditions of Eye, Ear, Nose and Throat
First Aid in common Emergency Conditions
Disaster Management

Over View of Surgical conditions, Referral and Followup Care

Common Surgical Conditions -1
Common Surgical Conditions -2
Congenital Malformations
Common Cancers

➤ **Maternal And Child Health Maternal**

Health

Introduction to RMNCH +A Programme

Ante Natal Care

Intra natal care

Early Identification, Management and Referral of Complications

Post Partum Care

Reproductive Health and Adolescent Health

Gynecological Conditions

Family Planning methods, Spacing Techniques

and Counseling Medical Abortion and MTP Act

Counseling in Reproductive Health, and other Adolescent Problems

Teenage Pregnancies – Consequences and Complications

New Born and Child Health Care

Essential Care of Newborn at Birth

Management of Common Neonatal Problems-1

Management of common childhood problems

Introduction to Rashtriya Bal Sureksha Karyakaram

Universal Immunization Programme (UIP)

IV Nutrition, Health Education And HMIS

Nutrition

Introduction to Nutrition and Nutritional assessment

Nutrition during Pregnancy and Lactation

Nutrition for Infant, Child, Adolescent and Elderly

Nutritional Deficiency Disorders

Food Borne Diseases, Food Safety and Rehabilitation

Communication, Management and Supervision

Behavior Change Communication skills and other Soft Skills

Work management and administration

Leadership, Supervision and Monitoring

Health Management Information System

Financial Management Accounts and Computing

Records and reports

Essential Drugs

Essential Drugs – 1

Essential Drugs – 2

Essential Drugs – 3

Practical

Paper V Public Health and Primary Health Care Skills

Public Health Skills

- Community need assessment and identification of common health problems
- Nutritional Assessment (including interpretation of Growth chart)
- Investigation of an outbreak/surveillance
- Organizing and conducting special clinics
- Social mobilization skills
- Health education and counseling
- Report writing and IT skills including interpretation and use of data

General Skills and Laboratory Skills

- Universal precautions and bio-medical waste management
- Procedures for basic tests
- Common blood tests and preparation of peripheral smear(Rapid kit for Malaria, Enteric Fever and Dengue)
- Examination of swelling, lump, joint etc.
- Eye and ENT examination

- Screening and management of common dental conditions
- Suturing of Superficial wounds
- Drugs dispensing and injections

Skills for Management of Common Conditions and Emergencies

- Basic life support (BLS)
- Assessment and management of fevers
- Management of common aches and pains
- First aid techniques and stabilization care in common emergencies-1
- First aid techniques and stabilization care in common emergencies-2
- Geriatric and palliative care.

Paper VI Maternal and Child Health Care

Maternal Health Skills

- Assessment of health status of woman
- Ante Natal, Intra natal, Post natal Examination and Care
- Organizing Labor Room
- Conducting Normal Deliveries
- Identification, Care and Referral of Complications during Labor
- Post Natal Examinations and Care
- Emergency Contraceptives and Injectable Contraceptives and Follow-up Care

Reproductive and Adolescent Health Skills

**Assessment and Management of STI/RTI/HIV Insertion
and Removal of IUDs
Management of Abortion-Counseling
Adolescent Counseling**

Newborn and Child Health Skills

New Born Resuscitation

Assessment of Newborn

Kangaroo mother Care

Infant and Young Child Feeding & Counseling

Promoting and Monitoring Growth and Development and plotting Growth Chart

Immunization and Safe Injection Practices

Use of Equipments (Suction Machine, Oxygen Administration Device, Ambu-Bag, Radiant Warmer, phototherapy Unit)