Deputy Health Officer (East) & Project Co-ordinator(TB)

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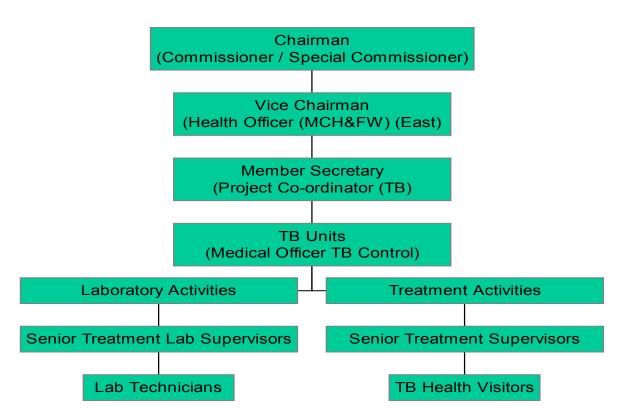
Name of the Office : Deputy Health Officer (East) & Project Co-ordinator (TB) RNTCP, $\mathbf{1}^{\mathrm{st}}$ Floor,

Dasappa Hospital Premises,

Near Town Hall, SJP Road, Bangalore-02.

1. STRUCTURE:

ORGANIZATIONAL STRUCTURE OF RNTCP



- 2. STAFF DETAILS: All RNTCP staff are on contractual basis and the programme is funded by GOI.
 - 1. Medical Officer (Medical Colleges) 5 Nos.
 - 2. Senior Treatment Supervisor 9 Nos.
 - 3. Senior Tuberculosis Laboratory Supervisor 9 Nos.
 - 4. Part Time Accountant 1 No.
 - 5. Data Entry Operator 1 No.
 - 6. Laboratory Technicians 24 Nos.

7. Tuberculosis Health Visitors - 50 Nos.

3. DUTIES & RESPONSIBILITIES:

A. Deputy Health Officer (East) & PROJECT CO-ORDINATOR (TB)

- train MOs and health workers to correctly identify patients who should be
 - investigated for tuberculosis at nearest Designated Microscopy Centres
 - monitor the maintenance of the Tuberculosis Laboratory Register
 - monitor documentation related to sputum microscopy examinations
 - classify and categorize patients for treatment correctly
 - complete TB Treatment Cards of patients
 - ensure proper administration of drugs through directly observed treatment (DOT)
 - identify, train and supervise others who give directly observed treatment (peripheral health workers, community volunteers, etc.)
 - provide health education to patients and their families and train MOs and health workers to do the same
 - monitor the registration of patients in the Tuberculosis Register
 - verify that correct number of sputum specimens have been examined at stipulated intervals and the results have been recorded in the Tuberculosis Register
 - regularly review Tuberculosis Treatment Cards to assess treatment outcomes and to verify that the treatment outcomes have been recorded correctly in the Tuberculosis Register
 - complete and submit the monthly PHI reports in the standardized format
 - complete and submit the quarterly reports on case-finding, sputum conversion, treatment outcomes and programme management
 - ensure maintenance of Binocular Microscope, adequate supply of drugs, printed materials and laboratory consumables
 - conduct regular supervisory visits and provide feedback for corrective actions
 - make active efforts to involve other health service providers of the public as well as the private sector
 - evaluate the performance of the tuberculosis programme in the area

B. MEDICAL OFFICER FOR MEDICAL COLLEGES:

- train Medical students, Interns, PGs and Paramedical staff to correctly identify patients who should be investigated for tuberculosis at nearest Designated Microscopy Centres
 - monitor the maintenance of the Tuberculosis Laboratory Register
 - monitor documentation related to sputum microscopy examinations
 - classify and categorize patients for treatment correctly
 - complete TB Treatment Cards of patients
 - ensure proper administration of drugs through directly observed treatment (DOT)
 - identify, train and supervise others who give directly observed treatment (peripheral health workers, community volunteers, etc.)
 - provide health education to patients and their families and train TBHVs and LTs to do the same
 - monitor the registration of patients in the Tuberculosis Register
 - verify that correct number of sputum specimens have been examined at stipulated intervals and the results have been recorded in the Tuberculosis
 Register
 - regularly review Tuberculosis Treatment Cards to assess treatment outcomes and to verify that the treatment outcomes have been recorded correctly in the Tuberculosis Register
 - complete and submit the monthly PHI reports in the standardized format
 - complete and submit the quarterly reports on case-finding, sputum conversion, treatment outcomes and programme management
 - ensure maintenance of Binocular Microscope, adequate supply of drugs, printed materials and laboratory consumables
 - conduct regular supervisory visits and provide feedback for corrective actions
 - make active efforts to involve other health service providers of the public as well as the private sector
 - evaluate the performance of the tuberculosis programme in the area
- Arranging for CME s and sensitization programme.
- Co-ordinatirng with all the staff.

C. SENIOR TREATMENT SUPERVISIOR:

- supervise the diagnostic and treatment services in the TU area including onsite evaluation of microscopy centres and supervision of DOT providers;
- ensure a regular supply of drugs and other logistics for their uninterrupted availability in all designated centres of the sub-district;
- retrieve unfinished medicine boxes of patients who have died or defaulted (i.e. stopped treatment for two months or more continuously) for reconstitution at district level;
- establish liaison with medical college hospitals and large hospitals, private
 - practitioners and NGOs providing TB services, referral and ensure registration and notification;
- organize regular training and continuing education;
- keep the Tuberculosis Register up-to-date;
- ensure preparation and timely submission of Quarterly Reports on case detection, sputum conversion and treatment outcome, and on programme management;
- make sure symptomatic patients are identified and referred for diagnosis;
- referral for treatment within the TU;
- ensure coordination with VCTC in cross referral and treatment and reporting; and maintain a map of the area detailing all health facilities in the area, including government organizations and NGOs which specifically carry out TB activities, as well as the staff responsible for these activities (name, position and location).

D. SENIOR TUBERCULOSIS LABORATORY SUPERVISOR:

- supervise the diagnostic services in the TU area including onsite evaluation of microscopy centres and supervision of LTs;
- Censure a regular supply of lab consumables and other logistics for their uninterrupted availability in all designated centres of the sub-district;
- establish liaison with medical college hospitals and large hospitals, private
 - practitioners and NGOs providing TB services, referral and ensure registration and notification;
- organize regular training and continuing education;
- keep the Laboratory Register up-to-date;
- ensure preparation and timely submission of Quarterly Reports on case detection, sputum conversion and treatment outcome, and on programme management;
- make sure symptomatic patients are identified and referred for diagnosis;
- referral for treatment within the TU;

- ensure coordination with VCTC in cross referral and treatment and reporting; and maintain a map of the area detailing all health facilities in the area, including government organizations and NGOs which specifically carry out TB activities, as well as the staff responsible for these activities (name, position and location).
- Participate in Onsite evaluation and EQA activities every month.

E. LABORATORY TECHNICIANS

- 1. Sputum collection
- 2. Sputum processing and examination
- 3. Recording and reporting
- 4. Quality control
- 5. Participate in RBRC

LT is an important staff in RNTCP and the purpose of EQA is to identify the errors occurring in smear microscopy and taking corrective action immediately so that errors are not repeated.

- 5. Safety laboratory maintenance
- 6. Materials management
 - Ckeep the microscope in good working condition.
 - Orepare and store solutions and reagents properly.
 - OMaintain records of the Lab consumables and reagents and Order supplies well in advance to avoid shortages.
 - Use freshly prepared reagents within expiry date

F. TUBERCULOSIS HEALTH VISITOR:

- Initial verification of address of the tuberculosis patients. During this period, the contact person whose name is also mentioned in the Treatment Card should also be contacted so as to ensure from him, his concern about the patient.
- Motivation of the patient with respect to treatment requirements and expected duration of the treatment.
- Ensure that every patient diagnosed as a case of tuberculosis is started on treatment within 7 days of diagnosis and treated for the full duration.
- Examination of contacts of sputum-positive cases and recording of the result in theTreatment Card.
- Fix the time and place for DOT, keeping in view the patient's convenience and operational feasibility, so that the DOT is ensured.
- Ensure that all doses in the intensive phase and the first dose of each weekly blister during the continuation phase are taken under direct observation. Also ensure collection of empty blister packs which should be preserved till the end of treatment.
- Ensure timely examination of sputum at defined intervals, until the patient completes the course of treatment.

- Maintain the Treatment Card and update the original card at the PHI on a fortnightly basis.
- Ensure that every Treatment Card you have received is given a TB Number. Put up this card to the Senior Treatment Supervisor (STS) during his visit for transfer of the required information to the TB Register.
- Immediate retrieval of patients who are late for their treatment. During the intensive phase it should be done with in 24 hrs and during the continuation phase within 7 days of the patient missing the dose. If the MPW is unable to retrieve the patient this should be intimated to the MO of the PHI and STS.
- Refer all TB suspects for sputum examination to the nearest microscopy centre/sputum collection center.
- To provide health education to the patient and their families.
- If a community volunteer is a DOT Provider, the MPW needs to ensure that the community volunteer is trained on how to give DOT, how to mark the treatment card and ensure that the original treatment card at the PHI is updated at fortnightly basis. The MPW also needs to supervise the community DOT Provider to ensure that the patient gets DOT as per guidelines.
- Ensure that partially used PWBs (of patients who have died/defaulted/ failed treatment/ transferred out) are returned to the PHI within a month of such event.
- TBHVs working in the medical colleges should ensure coordination between various departments and RNTCP facilities for indoor DOTS.

G DATA ENTRY OPERATOR:

- Collecting and compiling all types of RNTCP reports.
- Maintaining all administrative records and reports.
- Arranging all meetings.
- Assisting part time accountant.
- Monitoring and supervision of all the staff records in place.
- others

H. PART TIME ACCOUNTANT

- 1. Preparing annual and quarterly budgets for the District Societies.
- 2. Ensuring that adequate internal controls are in place to support the payments and receipts.
- 3. Ensuring timely consolidation of accounts/financial statements of all the District.
- 4. Ensuring that common reporting formats as provided in financial guidelines are used by Districts in order that consolidation of accounts is facilitated in the district.
- 5. Supporting the audit of the accounts of the district societies in accordance with the financial guidelines.
- 6. Monitoring expenditure and receipt of SOEs from the Districts

4. SALARY DETIALS:

Deputy Health Officer (East) & Project Co-ordinator (TB) Basic Rs.19,050/-p.m. (as on 01/01/2010) - BBMP
All RNTCP staff are paid consolidated salary funded by World Bank through GOI Medical Officers for Medical College - Rs. 28,000/- p.m.
Senior Treatment Supervisors - Rs.12,000/- p.m
Senior Tuberculosis Laboratory Supervisors - Rs.12,000/- p.m.
Laboratory Technician - Rs.8,500/- p.m
Tuberculosis Health Visitor - Rs.8,000/- p.m.
Data Entry Operator - Rs.8,500/- p.m.
Part time Accountant - Rs.3,000/- p.m.

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Bruhat Bangalore Mahanagara Palike