



Steps to be followed for Universal Screening and Control of Common NCDs

(For Use by ASHAs and ANMs)

ASHA	Community Level activities	ANM
<ul style="list-style-type: none"> ■ Estimating Population to be screened ■ Enumerating adults 30 years and above in routine household visits ■ Filling up family/household folder 	<p>Population enumeration</p>	<ul style="list-style-type: none"> ■ Supervision of population enumeration ■ Cross verification of 10% of population
<ul style="list-style-type: none"> ■ CBAC completion of all 30 years and above ■ Creation of individual health cards ■ Maintenance of Village register/ Family folder ■ Measurement of waist circumference ■ Assessing risk and mobilization on priority for screening ■ Identification of population - Individuals with any risk factor, Individuals with no risk factors and Known cases of NCDs 	<p>CBAC assessment at community level</p>	<ul style="list-style-type: none"> ■ CBAC completion of all 30 years and above (where there are no ASHAs) ■ Ensure supply of CBAC forms, WC measuring tape, individual health cards, registers, etc ■ Training of ASHA in CBAC form filling
<ul style="list-style-type: none"> ■ Sessions on NCDs and their risk factors during VHND/UHND ■ Raising awareness about NCDs, healthy lifestyle and treatment compliance in regular home visits ■ Distribution of health promotion material 	<p>Mobilizing community</p>	<ul style="list-style-type: none"> ■ Identify volunteer in the village/ slums /urban areas or member from VHSNC/MAS ■ Ensure supply of health promotion material ■ Liaise with other partners - school teachers, AWW, PRI/ RWA/ ULBs members ■ Supportive supervision - joint visit with ASHA in the community

