





# SUPERVISED SUPPLEMENTARY FEEDING PROGRAMME (SSFP)



# **ROLES & RESPONSIBILITIES**



## **Roles and Responsibilities of AWT in SSFP programme**

#### At SSFP programme level

- 1. Responsible for overall management of children with SAM.
- 2. Measure weight and height/length at AWC and categorize the children into-normal, MAM or SAM as per weight for height Z scores.
- 3. Perform Appetite test for children identified as SAM

Organize weekly SSFP sessions at AWC and ensure the following:

- · Weigh, measure and height/length of every child who has come for follow-up.
- Examine children for danger signs, fill the enrolment form and refer to NRC if any complication is present.
- Record medical history.
- Distribute balamrutham+ and replenish the stock.
- Maintain the SSFP card and SSFP register.
- · Enrol children transferred from the NRC.
- · Organise health and nutrition-individual/group counselling sessions of caregivers at the follow up session.
- Refer children according to the situation which also includes filling of referral slip.
- · Maintain records/registers and prepare the monthly reports with the help of Supervisors.

#### At Village level

- 1. Screening of all children between 6 to 59 months of age at NHD by measuring their weights, heights, MUAC and checking for bilateral pitting edema.
- 2. Conduct home visits for children who are defaulters (do not attend the SSFP follow up visits after enrolment), are not gaining weight or have any medical condition that requires follow-up.
- 3. Organise activities (group meetings, mother's meeting etc.) for community mobilization regarding identification of children with SAM.
- 4. Provide health and nutrition education to mothers of MAM and SAM children and demonstrate feeding with the support ASHA



#### **Roles and Responsibilities of ANM in SSFP programme**

- 1. During SSFP at VHND, assess and confirm nutrition status of children with SAM identified by AWT or ASHA during screening in the last one month or self referral.
- 2. Measure MUAC of children with SAM and check for bilateral pitting oedema.
- 3. Assess for medical complications by taking medical history, identification of danger signs and by performing physical examination.
- 4. Decide whether the child has to be enrolled in the SSFP programme or referred to NRC.
- 5. Start medical treatment for all children with SAM enrolled in the SSFP programme.
- 6. Confirm discharge of those children who fulfill the discharge criteria.
- 7. Perform medical examination of all children discharged from the SSFP programme on the corresponding followup visits on VHND.
- 8. Enroll and start treatment of all children with SAM who are diagnosed in between VHNDs and brought to NRC by AWTs.
- 9. Sensitise community about SSFP programme. Counsel mothers regarding IYCF practices, immunisation and basic hygiene and safe drinking water.



### **Roles and Responsibilities of ASHA in SSFP programme**

- 1. Prepare a list of children with MUAC < 11.5 cm and 11.5 <12.5 cm and share it with the ANM and AWT.
- 2. Mobilise caregivers and children with SAM and MAM to visit the SSFP clinic for initial assessment and enrollment by ANM/AWT in the community based programme.
- 3. Assist the ANM and AWT in organising the SSFP session at AWC.
- 4. Plan weekly home visits to families having children with SAM and MAM.
- 5. Conduct followup visits for all children that exit from the community based programme.



# **Roles and Responsibilities of Supervisor in SSFP programme**

To ensure quality in service delivery and smooth functioning of the programme, Supervisors will visit the various AWCs and HH with SAM and MAM children as part of SSFP program. They will provide oversight and onsite support to the service providers (ANM, AWT) for proper management of cases at the community level.

#### Supervisors will observe the following:

- 1. Review the case load
- 2. Review whether the staff has been trained on the standard operating procedures
- 3. Availability of supplies of therapeutic food
- 4. Review the outcomes (especially defaults, deaths and non-responders)
- 5. Review record maintenance
- 6. Review transfers or up-referrals
- 7. Review availability of tools and equipment
- 8. Observe the skills of the AWT and ANM on assessment, conducting appetite test, triaging and counseling
- 9. Discuss performance and management with the service provider