GOVERNMENT OF NAGALAND DIRECTORATE OF HEALTH & FAMILY WELFARE: NATIONAL HEALTH MISSION NAGALAND: KOHIMA

Guidelines for Mobile Medical Unit (MMU) Operations

Subject: Guidelines for Conducting Health Camps in Far-Flung and Hard-to-Reach Areas

1. Introduction

To ensure effective delivery of primary healthcare services in remote, underserved, and hard-to-reach areas, the Mobile Medical Unit (MMU) team shall conduct regular outreach health camps. These guidelines are issued to streamline operations, improve service quality, and ensure accountability. Each MMU team must conduct a **minimum of 12 health camps per month**.

2. Objectives

- 1. Provide accessible and affordable primary healthcare to populations in remote locations.
- 2. Strengthen early diagnosis, treatment, and referral services.
- 3. Promote health awareness, preventive care, and community participation.
- 4. Support national/state health programmes through outreach activities.

3. Monthly Camp Requirements

- 1. Each MMU must conduct a minimum of 12 health camps per month.
- Camps should be distributed across far-flung, hard-to-reach, and underserved villages/settlements.
- 3. The monthly schedule must be prepared in advance and approved by the District Health Office/CMO.
- 4. Rescheduled or cancelled camps must be reported with valid justification.

4. MMU Team Composition

Each MMU team should generally comprise:

- Medical Officer
- Staff Nurse
- Pharmacist
- Laboratory Technician

- Driver
- Accredited Social Health Activist (ASHA)/Local Health Volunteer (as required)

5. Pre-Camp Preparations

- 1. Finalize the location in coordination with village authorities/ASHA workers.
- 2. Conduct community mobilisation and inform beneficiaries in advance.
- 3. Ensure MMU vehicle is in good working condition with adequate fuel.
- 4. Verify availability of essential medicines, consumables, and diagnostic supplies.
- 5. Prepare outreach registers, IEC materials, and reporting formats.
- 6. Ensure functioning of basic diagnostic equipment (BP apparatus, glucometer, haemoglobin analyser, etc.).

6. Activities During the Camp

1. Registration: Maintain camp-wise beneficiary register.

2. Clinical Services:

- General OPD
- Screening for NCDs (BP, Diabetes, Cancer Screening as per protocol)
- o Minor ailments management
- First aid

3. Diagnostic Services:

- Basic lab investigations available within the MMU
- Point-of-care testing
- 4. **Dispensing:** Provide free medicines as per prescription.

5. Health Education:

- Nutrition
- Hygiene
- Maternal and child health
- Communicable and non-communicable diseases
- Referrals: Refer complicated cases to the nearest PHC/CHC/District Hospital and document referral details.

7. Post-Camp Responsibilities

- 1. Submit camp reports to the District Programme Management Unit (DPMU).
- 2. Update service delivery data in the MMU portal.
- 3. Report any medical emergencies, outbreaks, or critical observations immediately.
- 4. Ensure safe waste disposal as per biomedical waste guidelines.
- 5. Review stock level and replenish medicines/consumables.

8. Vehicle and Equipment Maintenance

- 1. The MMU vehicle must undergo routine servicing every month or after prescribed kilometres.
- 2. Equipment must be calibrated and maintained to ensure accurate results.
- 3. The driver must maintain a logbook for movement, fuel consumption, and kilometre record.
- 4. Any vehicle breakdown must be reported immediately.

9. Safety and Compliance

- 1. Team must follow infection prevention and control (IPC) protocols.
- 2. Ensure safe storage and handling of medicines and medical supplies.
- 3. Maintain confidentiality of patient records.
- 4. Follow all government-issued health guidelines and standard operating procedures.

10. Monitoring and Evaluation

- 1. DPMU/CMO office will review the monthly performance of each MMU.
- 2. Camps will be evaluated based on:
 - Number of camps conducted
 - Number of beneficiaries served
 - Quality of services
 - Completeness of reporting

La amé mys.

(Dr. KEVEDUYI THEYO)
Mission Director