

Introductory Document

11th Professional Development Course

in

Management, Public Health and Health Sector

Reforms

for

District Medical Officers

(20th July 2009 – 26th September 2009)



आरोग्यम् सुखसम्पदा

Organized by:

**National Institute of Health & Family Welfare,
Munirka, New Delhi**

11th Professional Development Course
in
Management, Public Health and Health Sector Reforms
for
District Medical Officers

(20th July 2009 – 26th September 2009)

Course Director
Prof. Deoki Nandan

Nodal Coordinator
Prof. (Mrs.) M. Bhattacharya

S. No.	Course Coordinators	Dates
1	Dr. Rajni Bagga	20/7/09 to 2/8/09
2	Dr. J.K. Das	3/8/09 to 16/8/09
3	Dr. Pushpanjali Swain	17/8/09 to 30/8/09
4	Dr. T. Bir	31/8/09 to 13/9/09
5	Dr. K.S. Nair	14/9/09 to 26/9/09
Course Co-coordinator		
1	Mrs. Reeta Dhingra	20/7/09 to 26/9/09
Course Associates		
1	Mr. Y.K. Singhal	20/7/09 to 26/9/09
2	Mr. Devmitra Arya	20/7/09 to 26/9/09
Computer Team		
1	Mr. P.D. Kulkarni	
2	Mr. Parimal Parya	
3	Mr. S.P. Singh	
4	Mr. Jagdish Sharma	
5	Mr. Sherin Raj T.P.	
Secretarial Assistance		
1	Miss Radha	
2	Mr. Vikas Kanojia	

Introduction

The issues relating to the Health & Family Welfare of one billion plus population in India are too many. However, those relating to the primary health care including care for mothers & children and population stabilization have social as well as administrative dimensions. The multitude of tasks in this sector cannot be performed by the providers alone. Participation of communities in comprehensive health care business through interrelated sectors other than medical and public health is essential for attainment of the cherished goals indicated in the National Population Policy 2000 and National Health Policy 2002 as well as, for the implementation of the Common Minimum Programme of the Government of India. The National Rural Health Mission (NRHM) is being pursued vigorously in the country to bring about a positive change in the health care delivery system. The PDC curriculum has been suitably modified according to NRHM guidelines by including subjects like running peripheral health facilities planning for FRU's, Village Health & Nutrition Days, linkage with ASHA, equity/gender issues, Roji Kalyan Samiti, integration of health schemes at grassroot level, reporting under NRHM, financial aspects Public Health facility management and preparation of District Programme Implementation Plan etc.

Background

As far as the Government Sector is concerned, operationally, the Chief Medical Officers at district level enjoy the nodal status in respect of health care delivery services supported by Deputy CMOs and respective Programme Officers. Within a few years after induction into service, the prospective incumbents usually get promotion to higher berths, but more often than not find themselves amidst administrative indecision, because of considerable lack of proficiency, related to management aspects of health care services like General Management, Human Resource Management, Financial Management, Materials Management, Disciplinary/Vigilance matters and more importantly the management of on-going projects related to health, which are not taught in the medical colleges. Besides skills like objective measurements of unmet needs in the communities through techniques like PLA, FGD and computer aided solutions for problems are also needed, so that the over all return on investment in health sector is commensurate with inputs.

Thus, the Govt. of India in consultation with the respective State Governments started implementing the reform process within

the country in a phased manner together with capacity building of district level officers as part of it. This was reinforced in a landmark national resolve, at the 8th conference of Central Council of Health & Family Welfare held in New Delhi (28th-29th August 2003), where it was unanimously resolved that “the professional training of Medical Officers in 12-16 years service bracket in Public Health, Management and Health Sector Reforms, should be made a pre-requisite for promotion to CMOs/Civil Surgeons/Hospital Superintendents to equip them to handle their responsibilities better”.

NIHFW started the inaugural programme in 2001 to train the officers in this course. During the pilot stages of the course at NIHFW, the European Commission Technical Assistance (ECTA) office engaged experts from Tata Institute of Social Sciences, Mumbai to evaluate the outcome of the first 3 pilot courses conducted at NIHFW. The observations of the experts who conducted the evaluation, submitted to the Department of Family Welfare, Govt. of India vindicated the usefulness of the course while recommending certain marginal changes, which have been done.

The course subsequently has been rolled out to selected 15 regional training centers throughout the country and two more institutes (SIHFW- Bihar and RIHFW-J&K) are entering into agreement with NIHFW to take up the PDC soon as Collaborating Training Institutes (CTIs). In the coming years senior district/block level medical officers are expected to be trained on similar lines, after completing 12-16 years in their respective posts. Recently the course was again evaluated by Administrative Staff College of India (ASCI) on behest of MOHFW, GOI. The following observations, included in the report made by the participants for the course are given below:-

1. The course was highly appreciated by participants from all the states.
2. Almost every participant of the PDC was of the view that the course has influenced him or her very positively and they wish that such an opportunity should have been given to them earlier in their career, since DMHOs have serious managerial responsibility to perform in terms of managing human, material & infrastructure resources, and funds.
3. Some of the participants of the PDC believe that their newly acquired skills and knowledge have proven to be an irritant to their senior officers who have not had the benefit of the PDC

training before assuming charge of the district and hence training all seniors at district level was essential.

4. The participants benefited from the programme both in terms of personal effectiveness as well as capacity building to contribute to the objectives of NRHM and National Health Policy.
5. The participants were very happy with the computer skills gained during the training.

The Eleventh PDC at NIHFW

A meeting of the CTIs was held at NIHFW on 15th and 16th May, 2009 towards standardization of the course contents, programme schedule, sessional objectives and the field visits. It was decided that 80% will be uniform and 20% local changes permitted. Evaluation formats were also finalized. Based on the suggestions during the meeting the following changes were listed: -

- a). Times for some of the subjects were increased e.g. sessions on finance and programme management.
- b). Action Plans related to NHRM at levels of districts/blocks/PHCs to be prepared.
- c). Meticulously structured, multi-dimensional evaluation forms for sessions and pre/post course were finalized.
- d). Field visits made more structured and to be conducted in low and high performing states.
- e). A set of power-point presentations and sessional objectives adopted.
- f). This standardized package is to be followed by all the CTIs.

The responsibilities for conducting the 11th course is to be shared by almost all the departments of NIHFW with the department of CHA as the nodal coordinating department

Course Content

The course will cover five main areas:

1. Management
 - Basic Management concepts - Functions & principles
 - Planning, Monitoring & Evaluation
 - Human resource management

- Materials management
 - Office procedures & disciplinary procedures
 - Health Management Information System
2. Communication
 - Organization communication
 - Communication with community
 - PLA Techniques
 3. Public Health
 - National Rural Health Mission (NRHM)
 - Health & demographic indicators
 - Principles of Epidemiology
 - Surveillance of diseases
 - Epidemic and disaster management
 - National Health Programmes
 - Population/Health Policies and Acts.
 4. Health Financing
 - Basics of health economics
 - Financial management
 - Alternative financing schemes
 - Public-private partnership
 - Health insurance
 - User fee systems
 5. Health Sector Reform and Decentralization
 - Rationale, implications, types and forms of decentralization
 - Panchayati Raj
 - India's policy with regard to decentralization
 - Dealing with change
 - Role of District Nodal Officers of NRHM.

Computer

- Basic Operations of computers.
- Use of MS Word, MS Excel, Power Point & Internet.
- Preparation of Action Plan on Computer.

Aim of the Course

To improve the competencies of district based doctors called to take on public health & managerial responsibilities and in turn

improve the overall management of health services, and implement the health sector reforms.

Objectives

At the end of the course the participants should be able to:

- Explain the existing status of policies, public health programmes and managerial practices in their district.
- Apply principles and techniques of health management and public health for effective delivery of health care under NRHM.
- Describe the components of health sector reforms and their implementation.
- Identify the changes required in the district health system for instituting reforms.
- Prepare an Action Plan related to NRHM issues in their district.
- Demonstrate adequate computer literacy required for day to day working and making presentations

11th Professional Development Course in Management, Public Health & Health Sector Reforms for DMOs
(20th July to 26th September, 2009)

Day & Date	9:30 am to 10:00 am	10:00 am to 11:15 am	11:30 am to 1:00 pm	2:00 pm to 3:15 pm	3:30 pm to 5:00 pm
Monday 20-07-09	Recap, experience sharing & preparation of port folio	10:00 to 11:00 a.m. 1. Inauguration	11:00 to 11:30 a.m. 2. Ice Breaking and Pre Course Evaluation Prof. M. Bhattacharya and Team	3. Overview of NRHM Mr. Amarjeet Sinha	4 & 5. Organisational Behaviour Laboratory for Developing Self Understanding & Awareness L/D Dr. Rajni Bagga
Tuesday 21-07-09		6, 7, 8 & 9. Organisational Behaviour Laboratory for Developing Self Understanding & Awareness L/D Dr. Rajni Bagga			
Wednesday 22-07-09		10 & 11. Overview of Management in Health Sector: Process, Functions and Skills of Management L/D Dr. A.K. Sood	12. Best Management Practices L/D Prof. Deoki Nandan	13. Human Resource Management L/D Dr. U. Datta	
Thursday 23-07-09		14 & 15. Motivation, Job Satisfaction and Work Procedure L/D Dr. Rajni Bagga	16 & 17. Leadership Styles and Supportive Supervision L/D Dr. Rajni Bagga		
Friday 24-07-09		18 & 19. Team Building and Management of Conflict L/D Dr. Rajni Bagga	20. Stress Management L/D Dr. Neera Dhar	21. Orientation to NDC Mr. Salek Chand	
Saturday 25-07-09		22, 23, 24 & 25. Computer Practice- MS Word Mr. P.D. Kulkarni			

Note: 5.30 p.m. to 7.00 p.m. Computer Practical Sessions everyday

Day & Date	9:00 am to 10:00 am	10:00 am to 11:15 am	11:30 am to 1:00 pm	2:00 pm to 3:15 pm	3:30 pm to 5:00 pm	
Monday 27.07.09	Recap, experience sharing & preparation of port folio	26 & 27. Negotiation Skills L/D Dr. Venkat Raman		28 & 29. Managerial Problem Analysis & Decision Making L/D & Group Work Dr. S. Gupta		
Tuesday 28.07.09		30. Management of Change in the Health Sector L/D Prof. N.K. Sethi	31 & 32. Managing Data and Interpretation L/D Prof. M. Bhattacharya		33. GIS in Health Mr. Parimal Parya	
Wednesday 29.07.09		34. IEC in NRHM L/D Mr. Sanjay Prasad	35, 36 & 37. IEC and BCC Dr. Gita Bamezai			
Thursday 30.07.09		38 & 39. IEC & BCC- Applied in Health Settings Field Visit Dr. Gita Bamezai		40 & 41. Strategic Communication in Health L/D Dr. Sanjeev Kumar		
Friday 31.07.09		42 & 43. PLA/PRA L/D Dr. Y.L. Tekhre		44 & 45. Field visit PLA-PRA		
Saturday 1.08.09		46, 47 48 & 49. Computer Practice Computer Centre				

Note: 5.30 p.m. to 7.00 p.m. Computer Practical Sessions everyday

Day & Date	9:30 am to 10:00 am	10:00 am to 11:15 am	11:30 am to 1:00 pm	2:00pm to 3:15 pm	3:30 pm to 5:00 pm
Monday 3.08.09	Recap, experience sharing & preparation of port folio	50. Overview of Hospital Administration L/D Dr. J.K. Das	51. Essential Drugs L/D Dr. D. Roy	52 & 53. Materials Management L/D Dr. J.K. Das	
Tuesday 4.08.09		54. Equipment Management L/D Dr. A.K. Agarwal	55. Biomedical Waste Management Dr. T.K. Joshi	56 & 57. Quality of Care in Hospitals Panel Discussion Dr. R. Yadav, Dr. M.C. Misra, Dr. Chandra Shekhar Yadav, Dr. Sudha Salhan Moderator- Prof. M. Bhattacharya	
Wednesday 5.08.09		58. Logistics and Supply under NRHM L/D Dr. J.K. Das	59. Consumer Rights and Responsibilities Mr. Bejon Misra	60 & 61. Visit to Holy Family Hospital Mrs. Reeta Dhingra and Mr. D. Arya	
Thursday 6.08.09		62 & 63. Preparation of Action Plan L/D Dr. V.K. Tiwari		64 & 65. Project Formulation and Log-frame Approach L/D Dr. M.A. Arif	
Friday 7.08.09		66, 67, 68 & 69. Preparation of Action Plan Contd..... Mrs. Reeta Dhingra, Mrs. Vandana Bhattacharya and Mr. Parimal Parya			
Saturday 8.08.09		70, 71, 72 & 73. Preparation of Action Plan--- contd... Dr. V.K. Tiwari and Team			

Note: 5.30 p.m. to 7.00 p.m. Computer Practical Sessions everyday

Day & Date	9:30 am to 10:00 am	10:00 am to 11:15 am	11:30 am to 1:00 pm	2:00pm to 3:15 pm	3:30 pm to 5:00 pm
Monday 10.08.09	Recap, experience sharing & preparation of port folio	74. Overview of Public Health L/D Prof. D. Nandan	75. Role of AYUSH in NRHM L/D Dr. D. Katoch	76. Role of Panchayat in Health L/D Dr. T Bir	77. Village Health and Sanitation Committee L/D Prof. M. Bhattacharya
Tuesday 11.08.09		78. ICDS and Convergence in NRHM L/D Dr. Dinesh Paul	79. Trainings under NRHM with emphasis on ASHA L/D Dr. D. Baswal	80. Janani Suraksha Yojana L/D Mr. P.K. Mukhopadhyay	81. Population Stabilization L/D Dr. Arvind Pandey
Wednesday 12.08.09		82. FRU Functioning and Constraints L/D Prof. K. Kalaivani	83. Basic and Emergency Obstetric Care L/D Dr. Himanshu Bhushan	84. Family Planning Programme Updates L/D Dr. S.K. Sikdar	85. Child Health L/D Dr. S. Saxena
Thursday 13.08.09		86 & 87. HMIS under NRHM Dr. Rattan Chand and Dr. V.K. Tiwari		88 & 89. Monitoring and Evaluation of Health Programmes Mr. Parveen Srivastava & Dr. Sanjay Gupta	
Friday 14.08.09		90. Managing Media L/D Dr. T. Mathiyazhagan	91, 92 & 93. Computer Preparation of District Action Plan		
Saturday 15.08.09		94, 95, 96 & 97. Computer Preparation of District Action Plan			

Note: 5:30 p.m. to 7:00 p.m. Computer Practical Sessions everyday

First Field Visit in a low performing state of Uttar Pradesh (17-8-09 to 22-8-09)

<p>Monday 17.08.09</p>	<p>At the Village- PRI, AWW, ANM & ASHA under NRHM and MPW (male) Visit to sub-centre</p> <p>At the PHC- (24 X 7 Services) & FRU</p> <p>Visit to CHC- BDO, BPM, NGO CDPO, Convergence, welfare schemes, Immunization, resource mapping in health for planning, implementation of programmes</p> <p>Visit to the Distt.- DPMO, Public Health Laboratory, RKS</p> <p>Visit to the state - NRHM coordination & implementation, SPMU and Programme Officers</p>
<p>Saturday 22.08.09</p>	<p>(to prepare a report and present at state level)</p>

Day & Date	9:30 am to 10:00 am	10:00 am to 11:15 am	11:30 am to 1:00 pm	2:00 pm to 3:15 pm	3:30 pm to 5:00 pm	
Monday 24.08.09	Recap, experience sharing & preparation of port folio	98 & 99. Biostatics & Indicators in Health L/D & Exercises Dr. Pushpanjali Swain & Dr. M.H. Meitei	100 & 101. Epidemiology Concept & Use L/D & Exercises Prof. M. Bhattacharya			
Tuesday 25.08.09		102 & 103. IMNCI L/D & Exercises Dr. S.V. Adhish	104 & 105. Epidemic Management L/D & Exercises Prof. Deoki Nandan			
Wednesday 26.08.09		106 & 107. IDSP L/D & Exercises Dr. G. Singh	108 & 109. Community Needs Assessment and Resource Mapping in RCH Dr. Bindoo Sharma			
Thursday 27.08.09		110 & 111. Immunization L/D & Exercises Dr. Renu Paruthi & Prof. M. Bhattacharya	112. Role of Nutrition in Public Health L/D Dr. Sheila Vir	113. District Action Plan under NRHM L/D Dr. Tarun Seem		
Friday 28.08.09		114. Strategy for Polio Eradication L/D Dr. Sunil Bahl	115. Iodine Deficiency Disorder and Vit 'A' L/D Dr. Umesh Kapil	116 & 117. Computer Practice		
Saturday 29.08.09			118, 119 & 120. Computer Practice Computer Centre			

Note: 5:30 p.m. to 7:00 p.m. Computer Practical Sessions everyday

Day & Date	9:30 am to 10:00 am	10:00 am to 11:15 am	11:30 am to 1:00 pm	2:00 pm to 3:15 pm	3:30 pm to 5:00 pm	
Monday 31.08.09	Recap, experience sharing & preparation of port folio	121. Non-Communicable Diseases L/D Dr. Sudhir Gupta	122. Leprosy Elimination Programme L/D Dr. P.L. Joshi	123. Mental Health Programme L/D Dr. Manju Mehta	124. Managing Bird Flu & Chikunguniya L/D Dr. Randeep Guleria	
Tuesday 1.09.09		125 & 126. TB & HIV/AIDS Panel Discussion Dr. L.S. Chauhan/ Dr. S. Venkatesh/ Dr. J.N. Banavaliker Moderator Prof. M. Bhattacharya		127. Vector Borne Disease Control Programme	128. Computer Class	
Wednesday 2.09.09		129 & 130. Quality of Care in Health Care Panel Discussion Dr. Dinesh Agarwal/ Dr. K.B. Singh/CMO Prof. Deoki Nandan/ Moderator Dr. M. Bhattacharya		131 & 132. Disaster Preparedness & Management L/D Dr. A.K. Shrivastava		
Thursday 3.09.09		133 & 134. Overview of Health Sector Reforms L/D Mr. J.P. Misra		135. E- Governance L/D	136. Overview of Financial management under NRHM L/D MOHFW	
Friday 4.09.09		137 & 138. Health Care Financing L/D and Discussion Dr. Suparna S. Pachouri and Dr. K.S. Nair		139 & 140. Costing & Budgeting in a Project L/D & Exercises Dr. K.S. Nair & Mrs. Reeta Dhingra		
Saturday 5.09.09		141, 142, 143 & 144. Computer Class Computer Centre				

Note: 5:30 p.m. to 7:00 p.m. Computer Practical Sessions everyday

Second Field Visit from 7-9-09 to 12-9-09

Sunday 6-9-09	Departure for Gujarat/ Tamil Nadu
Monday 7-9-09	Demonstration of various initiatives under NRHM
Tuesday 8-9-09	State/ Distt. NRHM Unit/ SPMU
Wednesday 9-9-09	Financial Management –Fund Flow, PPP, Outsourcing, contracting/ NGOs, Accredited Hospitals
Thursday 10-9-09	Health Insurance- Logistics & Supply and Drugs Distribution, IPHS
Friday 11-9-09	Approval of HMIS
Saturday 12-9-09	Return

Day & Date	9:30 am to 10:00 am	10:00 am to 11:15 am	11:30 am to 1:00 pm	2:00 pm to 3:15 pm	3:30 pm to 5:00 pm	
Monday 14-9-09	Recap, experience sharing & preparation of port folio	145. User Charges in Public Health Services L/D Dr. K.S. Nair	146. Community Health Insurance L/D GOI	147 & 148. Public Private Partnership L/D Dr. Sanjay Gupta		
Tuesday 15-9-09		149. Accounting & Auditing L/D & Exercises Mr. Anoop Gupta	150. IEC in NRHM L/D Dr. T. Mathiyazhagan	151 & 152. Visit to NAZ Foundation		
Wednesday 16-9-09		153 & 154. Gender Mainstreaming Panel Discussion Dr. Dinesh Agarwal, Dr. Neena Raina, Dr. Suneela Garg Dr. Rajesh Mehta Moderator Dr. Poonam Khattar		155 & 156. Systems Approach to Training L/D Dr. U. Datta		
Thursday 17-9-09		157. Office & Disciplinary Procedures L/D Dr. S.K. Chaturvedi	158. Managing Medico Legal Cases L/D Prof. S.K. Verma	159 & 160. CPA & Medical Negligence Panel Discussion Dr. M.C. Gupta/ Mrs. S. Ratna Moderator Dr. U. Datta		
Friday 18-9-09		161 & 162. PNMT & MTP Act Panel Discussion Dr. Dalal, Dr. Dhankar & MOHFW Moderator Dr. U. Datta		163. Programme for Disabled and Handicapped L/D Dr. H.C. Goyal	164. Geriatric Care L/D Prof. A.M. Khan	
Saturday 19-9-09		165, 166, 167 & 168. Computer Class Computer Centre				

Note: 5.30 p.m. to 7.00 p.m. Computer Practical Sessions everyday

Day & Date	9:30 am to 10:00 am	10:00 am to 11:15 am	11:30 am to 1:00 pm	2:00 pm to 3:15 pm	3:30 pm to 5:00 pm
Monday 21-9-09	Recap, experience sharing & preparation of port folio	169. Adolescent Health Programmes L/D Dr. S. Menon	170. Tobacco Initiatives L/D Dr. Poonam Khattar	171. Preparation of finalization of Action Plan Coordinating Teams	
Tuesday 22-9-09		172, 173, 174 & 175. Preparation of Action Plan Coordinating Team			
Wednesday 23-9-09		176, 177, 178 & 179. Presentation on Action Plan All Faculty			
Thursday 24-9-09		180 & 181. Presentation on Action Plan All Faculty		182 & 183. Computer Test	
Friday 25-9-09		184 & 185. Post Course Evaluation Department of E&T		Valedictory	
Saturday 26-9-09		Distribution of Certificates & Wrap Up			

Sessional Objectives

2. Pre Course Evaluation

At the end of the session, the participants should be able to: -

- i) List the expected learning from the course vis-à-vis their role in the field & their fears & expectations .

3. Overview of NRHM

At the end of the session, the participants should be able to: -

- i) List the goals and strategy of NRHM.
- ii) Identify approaches to operationalise the mission goals.
- iii) Discuss problems in implementation.

4, 5, 6, 7, 8 & 9.

Organizational Behaviour Laboratory for Developing Self Understanding & Awareness

At the end of the session, the participants should be able to: -

- i) List steps for self-improvement.
- ii) Discuss the groups/individual behaviour dynamics.

10 & 11.

Overview of Management in Health Sector: Process, Functions and Skills of Management

At the end of the session, the participants should be able to: -

- i) Describe the basic concepts of management .
- ii) Describe the management, process & functions .
- iii) Analyze issues related to management practices in context of health care delivery.

12. Best Management Practices

At the end of the session, the participants should be able to: -

- i) To describe the best managerial practices and how these could be replicated in their own work place.

13. Human Resource Management

At the end of the session, the participants should be able to: -

- i) Describe the importance of human resource as being central to an organisation.
- ii) Discuss the difference between role and job and how to increase their role effectiveness.

14 & 15.

Motivation, Job Satisfaction and Work Procedure

At the end of the session, the participants should be able to: -

- i) Explain work motivation and the ways to motivate subordinates .

- ii) Describe how work motivation can be applied in a district health organization.
- 16 & 17.
Leadership Styles and Supportive Supervision
At the end of the session, the participants should be able to: -
- i) Describe the various styles of leadership .
 - ii) Analyze their-own leadership style.
 - iii) Explain the concept, functions and styles of supervision.
 - iv) Describe the supervisory practices within a district health system.
 - v) Explain the ways of building a health team.
- 18 & 19.
Team Building and Management of Conflict
At the end of the session, the participants should be able to: -
- i) Discuss the process for identifying the causes of conflict.
 - ii) Discuss the process of team building.
20. Stress Management
At the end of the session, the participants should be able to: -
- i) Identify the factors related to stress .
 - ii) Discuss the various methods for reducing stress.
21. Orientation to NDC
At the end of the session, the participants should be able to: -
- i) To access literature in the library and on the net for knowledge gain.
- 26 & 27.
Negotiation Skills
At the end of the session, the participants should be able to: -
- i) Describe how to set up a negotiation process to avoid conflict.
 - ii) Describe how to use arbitration in th e negotiation process.
- 28 & 29.
Managerial Problem Analysis & Decision Making
At the end of the session, the participants should be able to: -
- i) Describe the concept of managerial problem analysis .
 - ii) Discuss the steps in managerial problem analysis .
 - iii) Explain the steps for performance improvement.
30. Management of Change in the Health Sector
At the end of the session, the participants should be able to: -
- i) Discuss the need for a change in an organisation.

- ii) Explain the mechanisms for implementing changes effectively.
 - iii) Discuss barriers to change.
- 31 & 32.
- Managing Data and Interpretation
- At the end of the session, the participants should be able to: -
- i) List the sources of data for health planning at local level .
 - ii) Discuss the important data points.
 - iii) Describe the methods of data interpretation and presentation.
33. GIS in Health
- At the end of the session, the participants should be able to: -
- i) Discuss the use of GIS in Health Sector .
34. IEC in NRHM
- At the end of the session, the participants should be able to: -
- i) Describe need for IEC.
 - ii) Discuss the various IEC packages available under NRHM and the strengths and weaknesses.
- 35-39.
- IEC & BCC – Applied in Health Settings
- At the end of the session, the participants should be able to:-
- i) Discuss IEC & BCC in health sector.
 - ii) Discuss the process of BCC.
- 40 & 41.
- Strategic Communication in Health
- At the end of the session, the participants should be able to: -
- i) Describe the strategic communication in NRHM .
 - ii) Discuss the various methods of communication suited for different stakeholders.
- 42-45.
- PLA/ PRA Practice in the Field
- At the end of the session, the participants should be able to: -
- i) Explain the concept of PLA/PRA.
 - ii) Describe the various methods of PLA/PRA.
 - iii) Discuss the use of PLA/PRA for enhancing community participation.
50. Overview of Hospital Administration
- At the end of the session, the participants should be able to: -
- i) Discuss the different aspects of Hospital Administration .
 - ii) Describe the concept of Quality care as a central initiative .

- iii) Describe the Economical House keeping practices .
51. Essential Drugs
At the end of the session, the participants should be able to: -
i) Discuss the Fundamentals of Logistical practices .
ii) Identify the Essential drug lists in use .
iii) Describe the Rational use of drugs .
iv) List steps in weeding out banned formulations from market .
- 52 & 53.
Materials Management
At the end of the session, the participants should be able to: -
i) Describe the importance of the cycle of material management .
ii) Discuss the importance of using modern scientific method for materials management.
iii) Discuss various techniques of materials management including Inventory Control techniques.
54. Equipment Management
At the end of the session, the participants should be able to: -
i) Describe the importance of purchasing, keeping inventory and maintaining equipment at district level.
ii) Discuss the importance of condemnation procedure in their organisations and the required changes.
55. Biomedical waste management
At the end of the session, the participants should be able to: -
i) Describe the set-up for Biomedical Waste Management .
ii) Discuss the issues related to Biomedical Waste Management in rural & urban areas.
- 56 & 57.
Quality of Care in Hospitals
At the end of the session, the participants should be able to:-
i) Discuss the concept of quality.
ii) Describe the various processes for ensuring quality in hospitals.
58. Logistics and Supply under NRHM
At the end of the session, the participants should be able to:-
i) Discuss the principles of logistics and supply.
ii) Describe the procedures for implementation.
59. Consumer Rights and Responsibilities
At the end of the session, the participants should be able to:-
i) Discuss the rights & responsibilities of consumers.

- ii) Explain ways of consumer education.
 - iii) Describe role of quality services in utilization of health services.
- 60 & 61.
- Visit to Holy Family Hospital
- At the end of the session, the participants should be able to: -
- i) Describe the various functional areas in hospital.
 - ii) Discuss the quality of services provided.
- 62 & 63 and 66 - 73.
- Preparation of Action Plan
- At the end of the session, the participants should be able to:-
- i) Identify the problem in their work place.
 - ii) Diagnose the causes of the problem.
 - iii) Frame goals, objectives and strategies.
 - iv) Prepare an action plan.
- 64 & 65.
- Project Formulation and Log Frame Approach
- At the end of the session, the participants should be able to:-
- i) Explain the concept of Log Frame Approach and need .
 - ii) Identify a health problem in their own district and prepare a project using the Log Frame Approach .
74. Overview of Public Health
- At the end of the session, the participants should be able to: -
- i) Discuss the comparative dimensions of personal health vis -à-vis community health.
 - ii) Discuss the various public health activities.
75. Role of AYUSH in NRHM
- At the end of the session, the participants should be able to:-
- i) Discuss the role of AYUSH under NRHM.
 - ii) Describe the current status.
76. Role of Panchayat in Health
- At the end of the session, the participants should be able to: -
- i) Describe the role of PRI in health.
 - ii) Discuss the constraints in implementing health programmes.
77. Village Health and Sanitation Committee
- At the end of the session, the participants should be able to: -
- i) Describe the role of VHSC.

78. ICDS and Convergence in NRHM
At the end of the session, the participants should be able to:-
i) Identify the role of sectors for convergence .
ii) Explain the mechanism for coordination and convergence .
iii) Describe the coordinate activities under NRHM.
79. Trainings under NRHM with Emphasis on ASHA
At the end of the session, the participants should be able to:-
i) Enumerate the kind of training under NRHM.
ii) Discuss the National Training Strategy.
iii) Discuss the training components of ASHA .
80. Janani Suraksha Yojana
At the end of the session, the participants should be able to:-
i) Explain the concept of JSY.
ii) Describe the implementation of JSY .
iii) Discuss the problems in implementation.
81. Steps in Population Stabilization
At the end of the session, the participants should be able to: -
i) Discuss the components of the Population policy 2000 and operationalization.
ii) Describe the population stabilization processes followed under NRHM.
82. FRU Functioning and Constraints
At the end of the session, the participants should be able to: -
i) Discuss the current status of FRUs.
ii) Describe the processes for improvement.
83. Basic and Emergency Obstetric Care
At the end of the session, the participants should be able to: -
i) Understanding the underlying causes of high MMR in India.
ii) Appreciating the efforts being made under NRHM to address the important causes of high maternal mortality.
iii) The list of remedial interventions to take care of the important causes of maternal mortality.
84. Family Planning Programme Updates
At the end of the session, the participants should be able to:-
i) Discuss the various Family Welfare methods.
ii) Describe the constraints in success of Family Planning Programme.

85. Child Health

At the end of the session, the participants should be able to:-

- i) Explain the various initiatives for child health.
- ii) Discuss the barriers to implementation.

86 & 87.

HMIS under National Rural Health Mission

At the end of the session, the participants should be able to:-

- i) Describe the sources of data and current HMIS.
- ii) Discuss problems in implementation and strategies for improvement.

88 & 89.

Monitoring & Evaluation of Health Programme

At the end of the session, the participants should be able to: -

- i) Assess the progress of the health programme as per guidelines .
- ii) Ascertain if any time/cost over run.
- iii) Decide next course of action .

90. Managing Media

At the end of the session, the participants should be able to: -

- i) Explain the significance of managing media.
- ii) Describe the methods for managing media.

98 & 99.

Biostatistics and Indicators in Health

At the end of the session, the participants should be able to: -

- i) Describe the concepts of bio statistics for use a DMO .
- ii) Discuss the various health indicators and the interpretation.

100 & 101.

Epidemiology Concept and Uses

At the end of the session, the participants should be able to: -

- i) Explain the concept of epidemiology and its use in management.
- ii) Describe the various types of epidemiological approaches for identifying health/disease problems.

102 & 103.

IMNCI

At the end of the session, the participants should be able to: -

- i) Describe the contents of IMNCI .
- ii) Recognise the role of this programme in reducing infant and child mortality.
- ii) Plan for its integration in existing Health Care system .

104 & 105.

Epidemic Management

At the end of the session, the participants should be able to: -

- i) Enumerate the steps for epidemic management.
- ii) Explain the responses for controlling epidemics of communicable diseases.

106 & 107.

IDSP

At the end of the session, the participants should be able to: -

- i) Discuss organization and functions of the Integrated Disease Surveillance Project.

108 & 109.

Community Needs Assessment and Resource Mapping in RCH

At the end of the session, the participants should be able to: -

- i) Describe the importance of CNA Approach.
- ii) Identify steps in CNA approach & resource mapping.
- iii) Discuss use of the data generated from CNA approach & resource mapping.

110 & 111.

Immunization

At the end of the session, the participants should be able to:-

- i) Describe the status and the strengths and weakness in the programme.
- ii) Discuss the recent changes in strategy and how to implement.

112. Role of Nutrition in Public Health

At the end of the session, the participants should be able to: -

- i) Discuss the status of malnutrition in the county .
- ii) Describe the various nutritional programs in the country.

114. Strategy for Polio Eradication

At the end of the session, the participants should be able to: -

- i) Describe the methods and significance of surveillance in Polio Eradication Programme .
- ii) Discuss the problems in implementation & process of monitoring.

115. Iodine Deficiency Disorder and Vit 'A'

At the end of the session, the participants should be able to: -

- i) Discuss current situation of iodine deficiency disorders in India and causes.

- ii) Describe the magnitude of Vitamin 'A' deficiency disorder and nutritional blindness in India.
 - iii) Enlist the doses & schedule for treatment of nutritional blindness and Vitamin 'A' prophylaxis.
 - iv) Discuss challenges in implementation.
121. Non Communicable Disease & Control Programmes
At the end of the session, the participants should be able to: -
- i) Describe the status of NCD in the country.
 - ii) Discuss the Non Communicable Diseases control strategies and progress.
122. Leprosy Elimination Programme
At the end of the session, the participants should be able to: -
- i) Describe current status of leprosy.
 - ii) Discuss the strategy for elimination of leprosy.
123. Mental Health Programme
At the end of the session, the participants should be able to: -
- i) Discuss the mental health programme in the country.
124. Managing Bird Flu & Chikunguniya
At the end of the session, the participants should be able to: -
- i) Describe the Epidemiology of bird flu and chikunguniya.
 - ii) Discuss the measures for control.
- 125 & 126.
TB & HIV/AIDS
At the end of the session, the participants should be able to: -
- i) Describe the programs for TB and HIV/AIDS .
 - ii) Discuss the link between the two diseases and areas of administrative convergence .
127. Integrated Vector Borne Disease Control Programme
At the end of the session, the participants should be able to: -
- i) Discuss the activities being undertaken under IVBDCP and the strengths and weakness in the programme.
- 129 & 130.
Quality of Care in Health Care
At the end of the session, the participants should be able to:-
- i) Describe the concepts of quality.
 - ii) Discuss constraints in implementation of Quality in Health care and measures to improve them.

131 & 132.

Disaster Preparedness & Management

At the end of the session, the participants should be able to:-

- i) List the various events and disasters, which require preparedness.
- ii) Describe the contingency plans for managing them .

133 & 134.

Overview of Health Sector Reforms

At the end of the session, the participants should be able to: -

- i) List the major health sector reforms .
- ii) Discuss the various Health Sector Reforms and their implementation status .

135. E-Governance

At the end of the session, the participants should be able to:-

- i) Discuss the importance and methods of E -Governance.

136. Overview of Financial Management under NRHM

At the end of the session, the participants should be able to: -

- i) Describe the main financial procedure carried out at district levels.
- ii) Describe how to control finances by forward planning.

137 & 138.

Health Care Financing

At the end of the session, the participants should be able to: -

- i) Describe the concept of health care financing.
- ii) Describe alternative ways of financing in workplace.
- iii) List out the main thrust areas of these policies.
- iv) Discuss the status of implementation of these policies.

139 & 140.

Costing & Budgeting in a Project

At the end of the session, the participants should be able to: -

- i) Describe the costing of various activities.
- ii) Describe different types of budgeting procedures.
- iii) Discuss performance based budgeting.

145. User Charges in Public Health Service

At the end of the session, the participants should be able to: -

- i) Discuss the implementation and advantages of user charges .
- ii) The functioning of Rogi Kalyan Samiti for utilization of user charges.

146. Community Health Insurance
At the end of the session the participants should be able to: -
i) Appreciate the need for insurance cover to avoid indebtedness due to illness/treatments.
ii) Explain concept of risk pooling.
- 147 & 148.
Public-Private-Partnership
At the end of the session, the participants should be able to: -
i) Describe importance of public – private partnerships.
ii) Describe mechanisms to develop public private partnerships.
- 149 & 150.
Accounting & Auditing
At the end of the session, the participants should be able to: -
i) Describe the main financial procedures carried out at district levels.
ii) Describe how to maintain accounts and to make UCs, SOEs etc.
- 151 & 152.
Use of Computer MS Excel
At the end of the session, the participants should be able to: -
i) Explain the use of computer for managing finances (MS excel).
- 153 & 154.
Gender Mainstreaming
At the end of the session, the participants should be able to: -
i) Describe the concept of gender sensitivity .
ii) Discuss the means for mainstreaming.
- 155 & 156.
Systems Approach to Training
At the end of the session, the participants should be able to:-
i) Discuss the methods for assessing training need and conducting trainings in health sector.
157. Office Disciplinary Procedures
At the end of the session, the participants should be able to: -
i) Describe the shortcomings in functioning of an office.
ii) Describe the steps in implementing disciplinary procedures.
iii) Describe various vigilance procedures.
158. Managing Medico-Legal Cases
At the end of the session, the participants should be able to: -
i) Describe the need for knowledge on medico-legal issues.

- ii) Discuss the various medico -legal issues of relevance.
- 159 & 160.
- CPA & Medical Negligence
- At the end of the session, the participants should be able to: -
- i) Describe the important aspects of CPA & and other examples of medical negligence.
 - ii) Discuss the operationalization of these acts in their districts.
- 161 & 162.
- PNDT Act & MTP Acts
- At the end of the session, the participants should be able to: -
- i) Describe the various acts, problems in implementation and solutions.
163. Programme for Disabled and Handicapped
- At the end of the session, the participants should be able to: -
- i) Describe the status of disability and handicap in the country.
 - ii) Discuss the role of district officers in prevention and empowerment.
164. Geriatric Care
- At the end of the session, the participants should be able to: -
- i) Describe the status of geriatric care in India and role of Govt. & NGOs.
169. Adolescent Health Programme
- At the end of the session, the participants should be able to: -
- i) Discuss the status of Adolescent health in the country.
 - ii) State the need for services for adolescents.
 - iii) Describe the existing policy/ services in the country.
170. Tobacco Initiatives
- At the end of the session, the participants should be able to: -
- i) Describe the initiatives taken by Government.
 - ii) Discuss the tobacco related legislations.
 - iii) Explain the steps to initiate programmes in their workplace.
- 171-181.
- Preparation and Presentation of Action Plan
- 184 & 185.
- Post Course Evaluation
- A structured format used.

22-25, 46-49, 91-97, 113, 116-120, 128, 141-44, 165-168, 182 & 183

Computer Classes

At the end of the session, the participants should be able to: -

- i) Describe the MS Word, MS Excel & Power Point, internet and their use.
- ii) Demonstrate the skills to work on them and prepare Action Plan on Power point.
- iii) Discuss RIMs software in monitoring immunization.

Methodology

The programme is need-based, participatory, practical and involving extensive use of exercises, management tools, case studies, group-work & presentation, field demonstration and 'hands on' training in the field. The course coordinators are aware that as many of the district doctors already have considerable experience of the subjects, they will be encouraged to share experiences using resources provided by the trainers.

As a part of the training district doctors will be expected to produce an "Action Plan" related to NRHM for their own district during the course of the training. Each participant would also have to work on given assignments, which would form the Portfolio.

Nature of Participants

Participants will be senior medical officers preferably from districts, which are already implementing health sector reforms with the service experience of 12-16 years faculty from the Department of Community Medicine and SIHFWs.

Background Material

Material has been developed on majority of the topics for and for reference.

Evaluation of Course

The evaluation of the course will be carried out as

- Pre course evaluation of participants.
- Sessional assessment by the District doctors.
- Post course evaluation of participants.

- Assessment of District Action Plans.
- Assessment of portfolios.

Course Outcome

To develop effective public health managers for the delivery of quality health care under current health sector reforms at the district level in tune with NHRM.

Award of prizes and Certificate

- A certificate will be given to each participant for undergoing the training.
- The Best Action Plan will be awarded a prize .
- A prize would also be awarded for the best portfolio.

Funding

Funded by Ministry of Health & Family Welfare.

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Aim of the Course

To improve the inherent competencies of district based doctors to take on public health & managerial responsibilities and in turn improve the overall delivery of health services and to implement the objectives of the on going National Rural Health Mission in the country



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