**International Public Health Management Development Program**

**under** [**Indian Technical & Economic Cooperation**](http://itec.mea.gov.in/) **(ITEC) Scheme for**

 **Nepal Medical Association**

***A technical proposal from the Department of Community Medicine and School of Public Health,***

***Post Graduate Institute of Medical Education and Research (PGIMER) Chandigarh***

***(an Institute of Excellence under an Act of Parliament, Government of India)***

**Context and Need for intervention**

*“Health initiatives in developing countries often fail not because of lack of scientific knowledge but because of lack of managerial competence”*

The current public health challenges faced by the developing countries and continents (e.g., COVID19 etc.) call for positioning qualified and skilled professionals, who can plan, execute and monitor national health programmes and public health initiatives in order to improve effectiveness and efficiency of health care delivery system. These management competencies are absolutely essential for a good manager for enhancing the performance and productivity of organizations. It is a usual practice that Healthcare Managers are designated to higher ranks based on their seniority without consideration of managerial and administrative capabilities. Further there are minimal formal management trainings in government and private health organizations before taking up senior management positions. Most of the existing courses on Public Health Management are theoretical, extensively elaborative, and does not comprehensively cover various aspects in a single program. Thus, there is a need to devise programmes which will impart the skills required to effectively manage the existing and emerging public health challenges and in-turn enhance the capacity of the public health managerial workforce.

Most of the ITEC countries, including Nepal, are struggling with dual burden of emerging and re-emerging infectious diseases (T.B, Malaria and HIV) and non-communicable diseases (diabetes, cardiovascular diseases and Stroke). Their local health systems are unable to utilise their resources optimally and deliver quality health services in an effective manner. While the reasons for these are many, poor leadership and management capacity has been majorly postulated to contribute to this problem. Lack of effective planning and implementation of policy/program; limited motivation and teambuilding skills; obstacles in training management; poorly designed medical education curriculum lacking management topics; lack of knowledge about effective monitoring and evaluation; high workload due to ineffective time management; have made it even more important to conduct a number of capacity building programs in areas of management and leadership. While the existing training programmes may intend to improve health services performance through improving technical subject knowledge and skills of participants, there has been a sub-optimal effort among ITEC nations to improve the managerial and leadership skills among doctors. The underlying assumption that improved knowledge and skills on management and leadership form such training programmes will improve their managerial performance to tackle these emerging public health challenges. Such trainings will also help in achieving the goal of MoHP to improve the health status of all people living in the country through effective and efficient policy formulation, resource mobilization, monitoring and regulation of delivery of health services by different health institutions for achieving the targets envisaged under Sustainable Development Goals.

**Rationale**

The existing programs on executive leadership and management in the country does-not comprehensively cover various aspects in a single program. Moreover, the programs doesn’t offer insights to enhance the practical management and leadership skills in different settings. Further, there are very few formal leadership trainings in government sector. Therefore, executives are promoted to higher ranks based on their seniority without consideration of managerial and leadership capabilities.

1. **Goal and Objectives**

***Goal***

Enhance the leadership and management skills and competencies of health professionals working under Ministry of Health and Population (MoHP)

***Objectives***

The current program aims to enhance management and leadership skills of middle and senior level managers (primarily doctors) of government sector working in Ministry of Health and Population (MoHP) by:

* Development of an effective leader who can effectively manage existing and emerging public health challenges at different levels of health care delivery system.
* Building capacity of middle and senior level managers in designing, implementing, monitoring and evaluating national health programs along with nurturing soft skills like team building, motivation, networking and communication.
* Equipping participants on appreciating gaps in current national health program and initiatives in their settings and envisioning future trends for effective decision making.
* To illustrate with relevant context-specific case studies, how the managerial functions can be leveraged to improve the overall competiveness within and outside the organizations

**Program Strategy**

The PGIMER will achieve its outputs by working with its key academic and technical partners across the country. The program faculty shall be eminent doctors and healthcare management professionals and experts from various public and private healthcare organizations, health care program leaders from national and international agencies, faculty from ‘Centres of Excellence’ in healthcare and management sector, and grass-root community health senior program managers involved in innovative healthcare initiatives. A blend of teaching methods will be used to address different learning styles and course needs. It would be a mixture of lectures, case studies, problem based learning, group discussions, assignments and participants presentations. The result is a rich learning experience that is relevant, practical and up-to-date.

**Key Highlights of the Program**

The key highlights of the program are; its design which focus on learning through a mix of traditional formal learning methods (lecture, power point presentations, case studies) and informal learning methods (exercises, real case scenarios, management games, videos etc.); its concept wherein emphasis will be on application based learning in which the participants will prepare an action plan for their organization during the program which will be implemented within 6 months of completion of program; and facilitation by an elite panel of experts and facilitators from lead academic and management institutes of the country. **The main goal of the program is to ensure that the learnings during the program are translated to implementation at workplace in their respective settings.**

**Target Audience**

Essential Qualification- Medical graduates

Desirable Qualification- Working in health care program/ projects.

This program is designed for middle and senior level healthcare managers and doctors, organizational leaders, hospital administrators, faculty of medical colleges and management institutes who are working towards advancement of Public Health and responsible for effective and efficient delivery of healthcare program and projects for achievement of Sustainable Development Goals.

The program capacity is **30-40 participants** within an age bracket of 28-50 years.

**Program Content and Dates**

* MODULE:1-Public Health Management Principles
* MODULE:2-Strategic Planning and Management
* MODULE:3- Leadership and Management
* MODULE:4- Organisational Behaviour
* MODULE:5- Health system Strengthening
* MODULE:6- Human Resources Management
* MODULE:7- Public health communication
* MODULE:8- Supply Chain Management
* MODULE:9- Financial Management
* MODULE:10- Quality management
* MODULE:11- Monitoring and Evaluation

The detailed schedule of program is attached as **Annexure-1**

Each module shall be covered in half working day, thus the entire program shall be of **6 days duration** from **20/06/2022 to 25/06/2022**. The field visit shall either be conducted at Shimla (Himachal Pradesh) or Kasauli (Himachal Pradesh) to observe the functioning of different levels of health care facilities and their Health Management Information Systems.

**Program Outcomes**

**At the end of the program, the participants will be able to**

1. Create innovative strategies within national health programs that provide a framework for future action in their settings.

2. Develop performance indicators, analyse data and quality reporting of national health programs.

3. Design and use program budget, manage financial reporting systems to apply to organizations.

4. Learn application of Logical Framework Analysis technique for planning and successfully managing programs.

5. Enhance performance by building leadership competencies and strengthening leadership qualities.

6. Develop in-depth understanding of effective communication, change management strategies for public health advocacy and dissemination of health education messages.

**Benefits to Organization**

1. Health care managers can be effectively designated to senior leadership positions.

2. Improved managerial capabilities for dealing with public health management challenges.

3. Enhanced decision making in routine and crisis situations faced by organizations.

4. Overall increased performance and productivity of organizations in attaining top ranked position.

**Program evaluation and follow-up**

The participants will be evaluated on short- and long-term basis

1) SHORT TERM-

* Pre and Post Program assessment of knowledge on various dimensions of Public Health Management and Leadership
* Feedback of participants regarding their satisfaction on various components of program along with fulfilment of their expectations.

2) LONG TERM –

* Development of individual Action Plans related to their work profile and submission of Action Plan Implementation Report at the end of 3 months post completion of program.

**Annexure ‘1’**

**Program Schedule (Draft)**

**International Public Health Management Development Program (IPHMDP)**

**Under Indian Technical & Economic cooperation (ITEC) Scheme for participants**

|  |  |  |  |
| --- | --- | --- | --- |
| Day | Time | Module | Resource Person(Tentative) |
| Day 1  | 09:00- 09:30 AM | **REGISTRATION** |
| 09:30- 11:00 AM | INAUGURAL SESSION  |
| 11:00- 11:30 AM | **TEA BREAK** |
| 11:30- 12:15 AM | Public Health Management Principles  | Dr. Sonu Goel, Professor, PGIMER |
| 12:15- 12:45 PM | Management exercise/ game | Participants  |
| 12:45- 01:00 PM | SOCIAL MEDIA BREAK | Participants  |
| 01:00- 02:00 PM | **LUNCH BREAK** |
| 02:00- 02:45 PM | Strategic planning  | Dr. Keerti PradhanDean & Professor, Chitkara school of Health Sciences/ Prof. Madhu Gupta, Professor, PGIMER |
| 02:45- 03:45 PM | Management exercise/ game | Participants |
| 03:45- 04:00 PM | **TEA BREAK** |
| 04:00- 04:30 PM | Best practice presentation by the participant | Participants  |
| 04:30- 05:00 PM | FEEBACK SESSION | Participants  |
| Day 2 | 09:00- 09:30 AM | FEEBACK SESSION | Participants  |
| 09:30- 10:15 AM | Management and leadership | Dr. Sanjiv Kumar, Ex – Director, NHSRC/ Dr. Vivek Adhish, Professor, NIHFW |
| 10:15- 10:45 AM | Management exercise/ game | Participants  |
| 11:00- 11:30 AM | **TEA BREAK** |
| 11:30- 12:15 AM | Organisational behaviour | Dr. S K Chadha Ex Professor, Panjab University / Mr. Vivek Atray, (IAS) Motivational speaker |
| 12:15- 12:45 PM | Management exercise/ game | Participants  |
| 12:45- 01:00 PM | SOCIAL MEDIA BREAK | Participants  |
| 01:00- 02:00 PM | **LUNCH BREAK** |
| 02:00- 02:45 PM | Health system strengthening | Dr. Sanjay Zodpey, President , PHFI/ Dr. Atul Kotwal,Executive Director, NHSRC |
| 02:45- 03:45 PM | Case study discussion |
| 03:45- 04:00 PM | **TEA BREAK** |
| 04:00- 04:30 PM | Best practice presentation by the participant  | Participants  |
| 04:30- 05:00 PM | FEEBACK SESSION | Participants  |
| Day 3 | 09:00- 09:30 AM | FEEBACK SESSION | Participants  |
| 09:30- 10:15 AM | Human resource management  | Dr. Preethi Pradhan,Dean, Chitkara school of Health Sciences |
| 10:15- 10:45 AM | Management exercise/ game | Participants  |
| 11:00- 11:30 AM | **TEA BREAK** |
| 11:30- 12:15 AM | Public health communication | Dr. Rajni Bagga, Ex Professor , NIHFW/ Dr. O P Kansal, Consultant, Becton, Dickinson |
| 12:15- 12:45 PM | Management exercise/ game | Participants  |
| 12:45- 01:00 PM | SOCIAL MEDIA BREAK | Participants |
| 01:00- 02:00 PM | **LUNCH BREAK** |
| 02:00- 05:00 PM | FIELD VISIT  |
| Day 4 | 09:00- 09:30 AM | FEEBACK SESSION | Participants  |
| 09:30- 10:15 AM | Supply chain management | Dr. Manjushri Sharma, Assistant Professor, Panjab University/ Dr. Pankaj Arora , Associate Professor , PGIMER |
| 10:15- 10:45 AM | Management exercise/ game | Participants  |
| 11:00- 11:30 AM | **TEA BREAK** |
| 11:30- 12:15 AM | Financial management | Dr.Tanvi Kiran, Assistant Professor, PGIMER/ Dr. Gopal Chauhan, State program Officer , HP |
| 12:15- 12:45 PM | Management exercise/ game | Participants  |
| 12:45- 01:00 PM | SOCIAL MEDIA BREAK | Participants  |
| 01:00- 02:00 PM | **LUNCH BREAK** |
| 02:00- 05:00 PM | FIELD VISIT | Participants |
| Day 5 | 09:00- 09:30 AM | FEEBACK SESSION | Participants  |
| 09:30- 10:15 AM | Quality management | Dr. Praveen Kumar, Professor , PGIMER/ Dr. Jeetu Lal Meena, Director, NHA |
| 10:15- 10:45 AM | Management exercise/ game | Participants  |
| 11:00- 11:30 AM | **TEA BREAK** |
| 11:30- 12:15 AM | Monitoring and evaluation | Dr. Ajay Sood, Ex Professor (NIHFW)/ Dr. Anand Krishnan, Professor , AIIMS |
| 12:15- 12:45 PM | Management exercise/ game | Participants  |
| 12:45- 01:00 PM | SOCIAL MEDIA BREAK | Participants  |
| 01:00- 02:00 PM | **LUNCH BREAK** |  |
| 02:00- 02:45 PM | Concept note preparation for a best practice in healthcare system  | Participants  |
| 02:45- 03:45 PM | Concept note presentation for a best practice in healthcare system  | Participants |
| 03:45- 05:00 PM | **Valedictory ceremony** |

\*9:00 am -9:30 am (Registration, Feedback and Discussion on the previous day sessions), Morning Tea -11:00-11:30 am, Lunch Break- 1:00-2:00 pm, Evening Tea – 3:45-4:00 PM

**Annexure ‘2’**

**Organizational Capacity**

***PGIMER, Chandigarh:***

The Postgraduate Institute of Medical Education and Research (PGIMER) is based in Chandigarh and was established in 1962 by then Prime Minister of India, Pt. Jawahar Lal Nehru.It was declared as an “Institute of National Importance” by an Act of Parliament of India on 1st April 1967 and is currently an autonomous body functioning directly under the Ministry of Health and Family Welfare, Government of India. PGIMER has almost all specialities and super-specialities departments. PGIMER has completed over 1500 research projects and more than 1000 research articles are published every year in national and international indexed journals.

The Department of Community Medicine was instituted in 1977 with the purpose of developing effective models of health service delivery for rural communities and for providing community health orientation to public health professionals. To address emerging challenges in public health education and research, the Department was upgraded to School of Public Health (SPH) in the Tenth Five Year Plan of India (2002-06). It has a WHO supported Learning Resource Centre within the premises. SPH also offers regular PhD, MD, Post Graduate Diploma in Public Health Management (PGDPHM), and Master of Public Health (MPH), along with various short-term courses in areas of epidemiology, health management, health promotion, communicable and non-communicable diseases. SPH is also involved in several research projects in collaboration with national and international organizations and state governments. Each year nearly 45 training programs are conducted with an average attendance of 30 participants per course. Department also works in coordination with several leading national and international agencies such as DBT, ICMR, WHO, UNICEF, UNFPA, DFID, MOH&FW, and MOE&F that financially support research and training projects covering most public health areas

**Annexure ‘3’: Prior Experience of Program Director**

**Dr. Sonu Goel, Program Director** is a medical doctor and specializes in PUBLIC HEALTH. He had done his MBBS and Post-graduation in public health from Indira Gandhi Medical College, Shimla. He is currently Professor in Department of Community Medicine and School of Public Health. He has over 17 years of rich experience in the field. He has written around 80 papers in national and international journals and authored 2 books-one of which by Elsevier’s- ‘Hospital Administration-a problem solving approach’ is among the hot-selling books in India. Besides this, he had authored over 35 chapters in several books. He received fellowships of three prestigious associations (Indian Public Health Association, Indian Association of Preventive and Social Medicine, and International Medical Science Association) and MNAMS, which is very unusual for a young faculty of his age. He is also an alumnus of John Hopkins School of Public Health, Baltimore, US and Maastricht University, The Netherlands.

Dr. Goel has a vast experience of teaching public health management and has been actively involved in designing and implementation various courses for last 10 years. He had attended 4 UNION IMDPs viz. CML, PM, BFM, and MOM between years 2009 till 2011. Additionally, he had also participated in many technical courses including Operational Research course. Currently, he is supporting UNION’s technical courses and SORT-IT (South Asia Operational Research course) as external resource person for the last 4 years. He is working closely with UNION, South East Asia office on other issues like supporting UNION’s grantee for capacity building of stakeholders; and monitoring and evaluation of tobacco, TB-Tobacco and lung health issues (m-health in pneumonia). He has a vivid experience of conducting trainings in liasion with various international and national organisation and agencies. He conceived as new model namely ‘PGIMER-The Union OR model’ in 2014. This partly funded five and half days course was exclusively focused on research needs in tobacco control. He has a rich academic background in Public health management and is the reviewer of many journals of repute including WHO Bulletin, International Journal of Tuberculosis and Lung Disease; Public Health Action; Indian Journal of Public Health; Indian Journal of Community Medicine among many. He is member of many national and international scientific bodies. At this young age, he had completed more than 35 projects independently with almost 10 national and international organizations. He is the Director, Resource Centre for Tobacco Control and Resource centre for Cardio Vascular Health.

**Annexure-‘4’**

***Executive Summary of last physical course conducted (before COVID19)***

***7th International Public Health Management Development Program***

4th -13th February 2020 - Chandigarh, India

The public health challenges faced by the developing countries and continents (India and other developing nations alike) call for positioning qualified and skilled professionals, who can plan, execute and monitor national health programmes and public health initiatives in order to improve performance of health care delivery system. Further, it is a well-known fact that health initiatives in developing countries often fail because of lack of managerial competence.

To address these challenges, an **International Public Health Management Development Program (IPHMDP)** was conceptualized in 2016 by School of Public Health and Department of Community Medicine which aims at enhancing the skills and competencies of middle and senior level program managers for strengthening efficiency of organizations in resource limited settings. In the series, a ten day **7th IPHMDP** was organized by School of Public Health, PGIMER, Chandigarh from 4th -13th February 2020. The program was fully sponsored by Ministry of External Affairs, Government of India under Indian Technical and Economic Cooperation (ITEC) Scheme. In this program, a total of 32 delegates from 22 countries namely Afghanistan, Bulgaria, Cameroon, Cote D’ivoire, Egypt, Indonesia, Jordan, Mauritius, Mongolia, Myanmar, Nepal, Oman, Palestine, Paraguay, Russia, South Sudan, Sri Lanka, Sudan, Tanzania, Thailand, Vietnam and Zimbabwe participated. The current program is **first of its kind public health management program in the country which endeavours to boost skills and competencies of program managers for addressing local public health challenges and increase competency of organizations.** The modules covered during the program were public health management, leadership and management, entrepreneurship, innovations and governance, project/ program strategic planning, organisational behaviour: creating healthy workplace culture, conflict and change management, health management information systems, human resource management, financial management and budgeting, public health communication, supply chain management, quality improvement in healthcare, monitoring and evaluation and mHealth interventions.

In order to ensure the application of learning during the program, every participant has submitted an ‘**Action Plan’** after completion of the program, in which they prioritised the areas (from the program) of implementation in their respective organization. The participants of this cohort will be followed up till 6 months for submission of their action plan implementation report. The best report shall further receive a ‘**Certificate of Appreciation’** from the organisers.

The key highlights of the program were; its design which focused on learning through a mix of traditional formal learning methods (lecture, power point presentations, case studies) and informal learning methods (role plays, exercises, real case scenarios, management games and videos); its concept wherein focus was on application based learning in which the participants prepared an action plan during the program for their organization (to be implemented within 6 months); and facilitation by an elite panel of experts and facilitators from lead academic and management institutes of the country. During the training, the participants had opportunity to meet leaders working in the field of Public Health and got insight of various principles and pillars of Public Health Management. **“IPHMDP Contest”** was also organized during the program wherein various awards pertaining to different activities viz. best dressed person, most active participant, e-IPHMDP, best selfie, best logo representing the program, voracious reader and best cultural performer were honoured during valedictory session of the programs. The active participation by delegates was ensured by presentation of the reflection of key concepts/ teaching of previous day, participation in IPHMDP contest, management games during lunch and evening sessions, and delegating responsibility to them for organizing cultural event at gala dinner.

Beside academics, we provided a platform for cross-cultural learning through sharing of best practices by the participants during the program, presenting books on Indian culture and tourism, along with hosting a cultural event with gala dinner. The meals served during the program (breakfast, lunch and tea/snacks in between) were carefully designed keeping in view the varied profile of participants from different countries. We also ensured to provide the best resource material to participants, which will help them to design similar program in their country.  All the activities during the program were actively uploaded on the IPHMDP Facebook page and You-tube. A parallel e- mail account and WhatsApp group was also maintained by the organizers to keep the participants updated and to provide them assistance during the program. The participants appreciated the overall quality of training and the field tour, where they were exposed to the Indian Health System along with its few best practices. They stated program as a wonderful experience with a blend of learning, through various teaching methods which they can apply in their organization. They also reiterated that the program was well planned, organized, managed and full of knowledge which can be truly implemented across different settings. They expressed their willingness to scale up the program in their respective organizations and countries. The general proceedings and events were widely covered by the audio-visual media.