Report on
Fast Track capacity Building Programme
Date – April-26, 2010 to May-1, 2010.
Contents-
1. Basic information
2. Day today review
3. Annexure
   1. Schedule of the programme
   2. List of resource person
   3. List of Participants

Training Report Format

1. Name of Training: Capacity Building Workshop on District Health Planning & Management

2. Purpose of Training: To build skills to develop district health action plan under NRHM

3. Round & batch: 2nd Round, 7th Batch

4. Venue: Hotel Simran, Station Road Raipur

5. Date: April-26 to May-1, 2010

6. Time: 10:00am to 6:00pm.

7. Duration (in days): 6 days

8. No. of persons trained: 32 from (From 13 District)

9. Profile of the Participants- Block medical officers, Medical officers & BADA.
Day-1

Session-1: Engaging Private Sector in Health Care

Resource Person: Mr. V.R. Raman

Contents:
- Role of private sector in health and healthcare
- Types of private players
- Pros and cons of engaging private sector
- Principles of PPP
- Demand side financing- concepts and models
- Health sector partnerships- supply side partnerships, contractual arrangement and social marketing
- PPP- perspectives

Skill transfer: Skill on how should one enters into PPP.

Perspective/Values imparted: Developing a sensitivity of health sector workers towards poor and larger benefit of the community

Remarks – Mr. Raman started with public and private health care expenditure, definition of health care system, types of private providers. She explained supply side and demand side financing and various example of PPP in India. She also talked about how the PPP model can be implemented successfully at various levels.

Session-2: Community Participation, Health Monitoring & Accountability.

Resources Person – Mr. V.R Raman

Content –
Community participation & Levels of Community Participation.
Why there is need of community monitoring
What is community monitoring?
How to do it and who will do it

Skill transfer: Data Triangulation and process of doing community monitoring

Perspective/Value imparted: Accountability of system for the community
Remarks: Mr. Raman started with Community participation & Levels of Community Participation, why there need of community monitoring and how community is also one of the important stakeholder of the system. He explained various processes for facilitating community monitoring. He also talked about data triangulation and how it can be helpful for district health plan. Then he explained the community monitoring concepts in Chhattisgarh context and various initiative of the state. A brief discussion on AGCA (Auditory Group for Community Action) was done.

Session-3: School Health Programme

Resource Person: Dr. Antony

Contents:
- Objectives of School Health Programme
- Health problems of school child
- Components of School Health Programme
- Health education in Schools
- Content of health education in schools
- Incorporation of School health programme in district health planning and management

Skill transfer: Planning for School Health Programme, some skills on convergence

Perspective/Value imparted: The importance of SHP.

Remarks: The session gave an overview about the school health to participants and explained how it can be implemented well. In the session participants raised so many operational issues related to programme and role of Health and education department.
Dr Antony shared some school health cards and other state innovations. He also shared this year’s school health plan under NRHM and how one can effectively implement the programme with available resources.

Day-3

Session-1: Rashtriya Swasthya Bima Yojana

Resource Person: Dr. Madan Gopal

Contents:
- What is RSBY?
- Why RSBY?
- Benefits of RSBY
- Processes involved in Operationalization

Skill transfer: Issues related to Operationalization of RSBY.
Remarks: Dr Madan started his session with what is insurance and then explained about the objective of the scheme RSBY. He explained each aspect of its implementation. He also talked about roles of various stakeholders and the health care provider in the scheme. Participants raised various operational issues like linkage of scheme with Jeevan deep samiti, and partnership with private providers.

Session-2: Child Health

Resource Persons: Dr. Pravin Khobragade

Contents:
IMR trends in Chhattisgarh and target of the mission
Ways to ensure child survival

Skill transfer: Newborn care and certain child health interventions.

Perspectives/values imparted: Universal coverage

Remarks: The presentation of the by Dr. Pravin started with trends of various indicators like IMR, MMR and breast feeding practices. He explained about the various intervention and innovation for improving the child health. He tried to explain principles of management at birth, various activities like developing newborn corner in facility, how to develop referral linkages etc. The session was followed by the group work in which the participants were provided with the hypothetical situation and they need develop some strategies to improve the child health.

Session-3:- Workforce Management Issues

Resource Persons: Dr. Kamlesh Jain

Contents of the session:
- Workforce management issues like recruitment, posting, transfer, skill upgradation.
- Chhattisgarh Rural Medical Core
- Workforce motivation
- Supportive supervision

Skill transfer: Holding the meeting, supervision, rationalization of manpower,

Perspectives/values imparted: Gender, social discrimination, teamwork, parity of regular-contract employees

Remarks: The Session addressed both theoretical and operational issues related to the subject. Dr. Jain talked about the current situation and challenges of the work force in the state. He spoke about the challenges like unavailability of skilled manpower and the lack of institution. Dr. Kamlesh also talked about how one can manage the available manpower effectively. He also informs participants about the new innovation by the state like CRMC and RMA to address the issues of the Work Force.
This session was followed by Group work on Malaria. Bock wise list of population & no. cases of malaria was provided to the participants. Participants calculated the indices like API, ABER, SPR etc & prepared a Block specific Action Plan for the control of Malaria.

**Day-3**

**Session I: Rational Drug Therapy**

**Resource Person: Dr. Ravi D’souza**

**Contents:**
- Definition of rational drug, essential drugs and irrational drugs
- Situation in India
- Irrational drug use and its causes
- Consequences of irrational drug use
- Do’s and Don’ts of Rational Drug Therapy
- Education of patients
- Tools for RDT

**Skill transfer:** How to practice RDT

**Perspective/Value imparted:** Following the medical ethics and going by the call of market. Have a focus for the community at large. Use of drug formularies and Essential drug list while prescribing any drug.

**Remarks:** The session was very informative and rich in contents. Dr. Ravi covered all the technical aspects about the rational drug therapy how one can practice the same.

**Session-2: Understanding HMIS**

**Resource Person: Mr. C. C. Sontosh**

**Contents:**
- Importance of HMIS
- Information Cycle
- How to put system in place
- Use of HMIS in District Health Planning.
- New HMIS introduced b the GoC
- New register for ANMs which would do away the multiplication of registers
- Importance of HMIS

**Skill transfer:** Use of HMIS
Remarks: Mr. Santosh started with what is HMIS then he explained about the information cycle. He explained about various problem of system how it can be addressed. He also spoke about how HMIS can be used for district health plan. Mr. Santosh talked about various initiative of CG state to streamline HMIS and various other sources of data. He also explained various reporting formats & online accessing data of various districts from CG Blog-website.

Session-3: Village Health Plan

Resource Person – Mr. Sameer Garg

Contents:
- Issues of decentralized planning.
- Planning at village level.
- VHSC & untied fund.
- Trust Vs Mistrust

Skill transfer: Method of Planning at village level.

Remarks: Mr. Sameer started with a question to participants that whether villagers can plan for their health? He discussed how they can prepare their plan & how NRHM facilitate VHP.

Day-4

Session-1: Mainstreaming of AYUSH

Resource Person – Dr. Sumi Jain

Content –
- Status of health care provider in Chhattisgarh
- National Health policy
- NRHM and its strategies for mainstreaming AYUSH (Including Innovation of the state)

Skill Transferred – Operationalization of AYUSH institution and how to converge it with other national programme.

Perspective/Value imparted-

Remarks – The session stared with availability of human resources in CG. Dr Sumi referred Bhore Committee Report, National Policy for ISM&H-1983, and National Policy for ISM&H-2002 to explain the importance of various health care systems and conceptualization of the AYUSH. She talked about NRHM and its various strategies for mainstreaming AYUSH. She also narrated various innovation of the state like AYUSH Deep Samiti and Ayurved Gram.
Participants raised issues like role of each system and how we converge this with various national programmes.

**Session-2: Group activity on DHAP & 30-cluster survey.**

**Resource Person:** Tarang Mishra & Dr. Manoj Patil

**Contents:** 30- cluster survey method.

**Skill transfer:**
- Plan Analysis
- Design of 30 – cluster Survey
- Développement of questionnaire for structure Survey
- Construction of dummy tables to understand data analysis
- Use of information to improve plans
- Converting plans into action – Note-sheet

**Remarks:** Participants were explained the steps of doing 30 cluster surveys and then other part of the assignment. Participants designed questionnaire for their assigned topic which was followed by discussion.

**Day-5**

**Session I & II - Quality Management Protocols in RCH and & Improvement in Quality of Facility Level Services.**

**Resource Person – Mr. Prasanth.**

**Content -**

- Steps to improve Quality of care in the institutions
- Operationalise FRUs
- Family Friendly Hospital certification
- Maternal death review process
- Supportive supervision of health facilities

**Skill Transfer -**

Supportive supervision
Conducting maternal death audit
Developing family friendly facility

**Perspective/Values imparted -**
Remark – Mr. Prasanth started with the some important indicator which gives an over view about state and strengths and challenges of the state. He explained what is quality and why there in need to improve the quality of public health care facility. He also explained about various quality protocols and certification.

He talked about concept of family friendly hospital and how one can develop the facility in family friendly hospital. He also talked about maternal death audit and steps involved in this.

Session-3:- Adolescent Health Issues

Resource Person - Dr. Vandana Prasad

Content -

Who is adolescent?
Major issues to address in this age group.
Changes during adolescence.
How one can address this issue.

Skill Transfer - Rules to deal with Adolescents.

Perspective/Value imparted - sensitivity towards adolescents.

Remarks - Dr. Vandana started with who are adolescent and major issues of this age group. She talked about basic four rules of dealing adolescent and various activity like organizing health camp, life skill education etc.

Day-6

Session-1: Population Stabilization.

Resource Person – Dr. Vandana Prasad

Contents –

- Decentralized district health planning & population Stabilization issues in India.
- Stages of Demographic Evolution.
- Population Momentum.
- Myths & realities about population growth.
- Challenges

Skill Transfer – Issues of Population Stabilization in DHAP.
Remarks- Dr. Vandana started with decentralized district health planning & population Stabilization issues in India. She explained the Stages of Demographic Evolution & Population Momentum. She also addressed the Myths & realities about population growth & Challenges in India.

This session was followed by Valedictory Function & distribution of certificates to the participants by the hands of Mr. P. Anbalgan, Director, Health Services, Chhattisgarh.
# Programme Schedule

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday 26/04/2010</th>
<th>Tuesday 27-04-2010</th>
<th>Wednesday 28-04-2010</th>
<th>Thursday 29-04-2010</th>
<th>Friday 30-04-2010</th>
<th>Saturday 01-05-2010</th>
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<tbody>
<tr>
<td>9.30am-10.30am</td>
<td>Registration</td>
<td>Rastriyu Swathya BimaYojna</td>
<td>Rational Use of Drugs</td>
<td>Mainstreaming of AYUSH</td>
<td>RCH &amp; Improvement in Quality of Facility Level Service</td>
<td>Population Stabilization</td>
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<tr>
<td></td>
<td></td>
<td>Dr. Madan Gopal</td>
<td>Dr. Ravi D’souza</td>
<td>Dr. Sumi Jain</td>
<td>Mr. Prashan</td>
<td>Dr. Vandana Prasad</td>
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<tr>
<td>10.45am-11.45am</td>
<td>Inaugural Session</td>
<td>Child health issues in district health planning in context of SNCU/NICU</td>
<td>Understanding HMIS</td>
<td>Issues in District Health Planning</td>
<td>Quality Management Protocols in RCH</td>
<td>Evaluation (Post-training test) of training</td>
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<td></td>
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<td>Mr. C. C. Santosh</td>
<td>Mr. V. R. Raman</td>
<td>Mr. V. R. Raman</td>
<td>Mr. Prashant</td>
<td>Valedictory session</td>
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<tr>
<td>11.45am-12.45pm</td>
<td>Engaging Private Sector</td>
<td>Child health issues in district health planning in context of SNCU/NICU</td>
<td>Understanding HMIS</td>
<td>Issues in District Health Planning</td>
<td>Quality Management Protocols in RCH</td>
<td>Valedictory session</td>
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<tr>
<td></td>
<td>Mr. V. R. Raman</td>
<td>Dr. Pravin</td>
<td>Mr. V. R. Raman</td>
<td>Mr. V. R. Raman</td>
<td>Mr. Prashant</td>
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<tr>
<td>2pm-3.30pm</td>
<td>Community Monitoring &amp; Accountability</td>
<td>Workforce Management Issues</td>
<td>Village Health Plan</td>
<td>Assignment: RCH (Choice of Strategy) and planning skills</td>
<td>Adolescent Health Issues</td>
<td>Feed back and Valedictory</td>
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<td></td>
<td>Mr. V. R. Raman</td>
<td>Dr. Kamlesh Jain</td>
<td>Mr. Samir Garg</td>
<td>Dr. Vandana Prasad</td>
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**Tea Break**

**Thursday 29-04-2010**

- **11.45am-12.45pm**: Engaging Private Sector
  - Mr. V. R. Raman
  - Mr. C. C. Santosh

**Friday 30-04-2010**

- **2pm-3.30pm**: Adolescent Health Issues
  - Dr. Vandana Prasad
  - Mr. Prashant

**Saturday 01-05-2010**

- **11.45am-12.45pm**: Engaging Private Sector
  - Mr. Raman
  - Mr. C. C. Santosh

- **2pm-3.30pm**: Adolescent Health Issues
  - Dr. Vandana Prasad
  - Mr. Prashant
### List of Resource Persons:

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Name Of the Resource Person</th>
<th>Designation</th>
<th>Topic</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Dr Sumi Jain</td>
<td>Programme Coordinator (AYUSH Cell) SHRC</td>
<td>Mainstreaming of AYUSH</td>
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<tr>
<td>2</td>
<td>Dr. Ravi D’souza</td>
<td>Jan Swathya Sahyog</td>
<td>Rational Use of Drugs</td>
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<td>3</td>
<td>Dr. Pravin Khobragade</td>
<td>Health Officer Unicef CG</td>
<td>Child Health</td>
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<td>4</td>
<td>Dr Madan Gopal</td>
<td>Consultant RSBY, GTZ</td>
<td>RSBY</td>
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<td>5</td>
<td>Mr. Sameer Garg</td>
<td>Consultant SHRC CG</td>
<td>Village Health Plan.</td>
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<td>6</td>
<td>Dr. Kamlesh Jain</td>
<td>SHRC CG</td>
<td>Workforce Management</td>
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<td>7</td>
<td>Mr. Prasanth</td>
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<td>Quality Management Protocols in RCH</td>
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<td>8</td>
<td>Dr. Vandana Prasad</td>
<td>National Convener, PHRN.</td>
<td>Adolescent Health Issues Population Stabilization.</td>
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<tr>
<td>9</td>
<td>Mr. C.C. Santosh</td>
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<td>HMIS</td>
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<td>10</td>
<td>Dr. Antony</td>
<td>Director SHRC CG</td>
<td>School Health.</td>
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<td>11</td>
<td>Mr. V. R. Raman</td>
<td>Consultant ICCHN</td>
<td>Community Monitoring, Engaging Private Sector</td>
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#### Tea Break

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<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>3.45pm-5pm</td>
<td>School Health Programme</td>
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<td>Dr. K. R. Antony</td>
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**Assignment:**

1. Introducing Malaria Planning
2. Rational Use of Drugs
3. Child Health
4. RSBY
5. Village Health Plan.
6. Workforce Management
7. Quality Management Protocols in RCH
9. HMIS
10. School Health.
11. Community Monitoring, Engaging Private Sector
### List of Participants:

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>District</th>
<th>Name</th>
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<tbody>
<tr>
<td>1</td>
<td>Rajnanadgoan</td>
<td>Dr. V. K. Lohiya</td>
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<td>Dr. S. R. Mandavi</td>
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<td>3</td>
<td>Kawrdha</td>
<td>Dr. Narendra Golen</td>
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<td>4</td>
<td>Dr. Sanjoy Kharshan</td>
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<td>5</td>
<td>Korba</td>
<td>Dr. Dipak Raj</td>
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<td>6</td>
<td>Dr. R. Dhaire</td>
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<td>7</td>
<td>Dr. Kamlesh Porte</td>
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<td>8</td>
<td>Bilaspur</td>
<td>Dr. A. S. Shanyal</td>
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<td>Dr. Devesh Pradhan</td>
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<td>10</td>
<td>Mahasamund</td>
<td>Mr. Arivind Soni</td>
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<td>11</td>
<td>Dr. L. L. Dhankar</td>
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<td>12</td>
<td>Dr. L.S. Prashad</td>
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<td>13</td>
<td>Dr. B. R. Malik</td>
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<td>14</td>
<td>Kanker</td>
<td>Dr. S. N. S. Momin</td>
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<td>15</td>
<td>Dr. D. S. Vinod</td>
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<td>16</td>
<td>Dr. A. K. Tikaria</td>
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<td>Dr. Sachin Virkhende</td>
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<td>Mr. S. L. Jain</td>
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<td>19</td>
<td>Dhamtari</td>
<td>Vikas Ku. Sahu</td>
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<td>Shambhu Rajak</td>
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<td>Dantewada</td>
<td>Vishvash Tripathi</td>
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<td>22</td>
<td>Janjgir</td>
<td>Dr. K.K. Dahire</td>
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<td>23</td>
<td>Dr. A. D. Azad</td>
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<td>24</td>
<td>Korea</td>
<td>Dr. G. S. Thakur (CMHO)</td>
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<td>25</td>
<td>Jashpur</td>
<td>Dr. K. Kujur</td>
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<td>26</td>
<td>Dr. Anuranjan Kujur</td>
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<td>27</td>
<td>Dr. C. K. Sai</td>
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