## 4th International Public **Health Management Development Program**





#### Organized by:

Department of Community Medicine and School of Public Health, Post Graduate Institute of Medical Education and Research, Chandigarh (India)

#### **Sponsored by:**

**Indian Technical & Economic Cooperation Programme (ITEC)** Ministry of External Affairs, Govt. of India











# INDEX

•	Foreword	1-2
8	Preface	3-4
ķ	Executive Summary	5-6
٤	Key Highlights of Program	
•	Program Description	8-17
Š	i. Preamble	3.7
	ii. / Goal	
	iii. Program Objective	
	iv. Program Audience	
	v. Program Benefits	
	vi. Program Contents	
3	vii. Program Duration and Venue	
	viii. / Teaching Methodology	
Š	ix. Program Schedule	
1	Program Proceedings	18-51
•	Cultural event and Study Field Tour	39- 46
	Valedictory Session	48-51
÷	Contest Winners	52-53
ŀ	Action Plans of Participants	54-74
•	Participants Feedback	78-80
	Day wise Quantitative Feedback Analysis	78
	ii. Field Feedback Analysis	79
	iii. Overall Feedback	80
•	Program Evaluation	8
	Recommendation	82 - 83
١,	Way Forward	84
÷	Picture Gallery	85 - 88
Ę	Press Coverage	89 - 91
÷	Social Media Responses	92 - 95
• (	ANNEXURE	
Š	ANNEXURE-1: Program Committee	96-97
	ANNEXURE-2: Program Directors & Coordinator	98
	ANNEXURE-3: Program Facilitators	99-100
	ANNEXURE-4: Program Organizers	101
	ANNEXURE-5: Program Participants	102-107
	ANNEXURE-6: Feedback Form	108 - 109
6	ANNEXURE 7: Pre & Post Program Evaluation Form	110 - 113
	ANNEXURE 8: Best case Presentation	114
	ANNEXURE-9: Token of Appreciation	115-118
	ANNEXURE-10: Feedback Report from Participant	119-120
	ANNEXURE-11: Material developed during the program	

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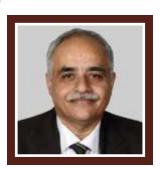
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It gives me an immense sense of immense pride in bringing out the report of the International Public Health Management Development Program conducted by Department of Community Medicine and School of Public Health, PGIMER Chandigarh from 20th -25th June 2022. It is a privilege for PGIMER, Chandigarh that Ministry of External Affairs, Government of India, has chosen the Department of Community Medicine and School of Public Health for hosting the current program in series of programs being conducted for last 7 years. Our institution is an 'Institute of National Importance' under the Act of Parliament, Government of India, and has been carrying several training programs. I am being told that this regular series of IPHMDP being conducted since last seven years has been ever receiving extraordinary response from all ITEC nations, which is really encouraging.

Management and leadership skills are important for the delivery of good health services. Leaders have a vision of what can be achieved, which they communicate to others and evolve strategies for realizing the same. Public health managers must possess both public health and management skills in order to be effective. By closely scrutinizing the content and teaching methodology of the program, I am sure that this program will lead to capacity building of middle and senior level managers in designing, implementing, monitoring and evaluating health program operations in context to their respective countries and also to equip them in management and leadership skills for effective decision making.

दूरमाय/Tel.: +91-172-2748363, 2755556 फैक्स/Fax: +91-172-2744401 ई–भेल/Email: dpgi@pgimer.edu.in वैयसाईट/Website: pgimer.nic.in, pgimer.gov.in I am extremely happy to learn that a total of 45 senior participants from Nepal travelled to attend this well-constructed 6 day program. The program is 'one of its own kind which employs varied learning methodologies like case studies, games, role plays, group discuss, field tour etc. for strengthening management and leadership skills. These type of programmes open new horizons in the field of public health management and develop cross-cultural networks for the improvement of global public health. I wish that after attending the six-day extensive training, all the international delegates will be able to apply the principles of public health management once they go back to their respective organizations.

I am personally encouraged to see more such programs for policy makers and senior implementers in near future. These programs help the ITEC nations in adopting good practices through case-based approach, peer-to-peer learning and field exposures. I fully hope that the program was able to meet the pre set objectives, which was evident from the overwhelming positive feedback from participants and faculty of program. I would also extend my sincere thanks to Ministry of External Affairs, Government of India for selecting PGIMER for conducting this program. I also congratulate the entire organizing team of the program and Department of Community Medicine & School of Public Health for the grand success of program and wish them good luck for future endeavours.

### स्नातकोत्तर चिकित्सा शिक्षा एवं अनुसंधान संस्थान, चंण्डीगढ़ – 160012 (भारत) Postgraduate Institute of Medical Education & Research, Chandigarh-160012 (INDIA)

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#### From Program Director's Desk

"No matter how much we can do by ourselves at our own settings, is never enough. In a spirit of true cooperation, we must join hands in an action-oriented effort to solve the global public health challenges."

The International Public Health Management Development Program (IPHMDP) was conceived by Department of Community Medicine and School of Public Health in the year 2016 in collaboration with International Union against TB and Lung Diseases and Chitkara University. This program aims to enhance the skills and competencies of middle and senior level program managers and academicians for addressing public health challenges and strengthening efficiency of organizations in limited resource settings. This program is entirely on No-Profit Basis and first of its kind in the country which is being conducted in government set-up to enhance management competencies of programme managers for improving the performance and productivity of their organizations.

The current programme is 14th in the series of International Public Health Management Development Program (IPHMDP) which is fully sponsored by Ministry of External Affairs, Government of India under Indian Technical and Economic Cooperation (ITEC) Scheme. The earlier 13 programs were conducted from May 2016 to June 2022, with an overwhelming response from the participants. It aims at building capacity of middle and senior level public health managers in designing, implementing,

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monitoring and evaluating program/ project operations in context to their respective setting and countries. The program focuses on developing critical thinking and problem-solving skills among global delegates for warranting their adaptation in their country in order to effectively manage the existing and emerging public health challenges for overall strengthening of health care systems. I believe in development of management and leadership skills as a multi-dimensional concept in cross cultural setting, encompassing the economic, social, institutional and physical elements of development through this program. Thus, the vision of the program is in completely consonance with the mandate of ITEC program of establishing relation of mutual concern and inter-dependence based upon the common idea and aspirations along with fostering solid economic foundations.

Alike previous programs, the current program has been designed to provide a unique platform for advancing academic expertise, ideas exchange and variety of opportunities for academicians, program managers both from government and private setups to develop impeccable management capabilities. The approach used in the program was a mix of learning methods (traditional formal learning through lecture, power point presentations, group discussions, role plays and informal learning through case studies, exercises, videos, real case scenarios, and field visits); Application centred learning (participants prepare an action plan during the program to be implemented within 3 months of completion of program); Experience based teaching (by an elite panel of experts and senior academician); Peer learning (through sharing best practices of various countries by the participants) and Cross-cultural integration (Yoga sessions, local cuisine, field trips and hosting a cultural event with gala dinner). I truly hope that the participants replicate the learning during the program into real-life practice in their country settings.

I extend my sincere thanks to Ministry of External Affairs, Government of India who had sponsored this imperative program under the flagship of Indian Technical Economic Cooperation (ITEC) Scheme in order to spread knowledge and skills to the countries of global south (south-south cooperation) under the ancient Indian philosophy 'Vasudeva Kutumbakam' i.e. 'the world is one family'. I also take this opportunity to thank my entire team Dr. Kritika Upadhyay, Dr. Kanika Mehta, Dr. Nidhi Jaswal and Mr. Rajeev Chaudhary who left no stone unturned in providing best of hospitality, cuisine, entertainment and an academically rewarding time to share and exchange ideas over the six-day intensive scientific program. I must also thank all the participants for their proactive participation in all the sessions which motivate us to keep the flame of knowledge alive for such programs in future.

Dr. Sonu Goel

Program Director (IPHMDP)

A chieving universal health coverage by 2030 requires positioning qualified and skilled public health professionals, especially from developing countries and continents (India and other developing nations alike), who can plan, implement and monitor national health programmes and public health initiatives in order to improve performance of health care delivery system. Further, it is documented that Sustainable Development Goals (SDG) cannot be achieved without addressing availability and distribution of trained public health management officials. The available literature has cited that health initiatives in developing countries often fail because of lack of managerial competence.

In this context, an International Public Health Management Development Program (IPHMDP) was conceptualized in 2016 by Department of Community Medicine and School of Public Health 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 past 7 years, 900+ participants from 80+ countries participated which showed an ever increasing enthusiasm among global participants. In march, 2022 Nepal Medical Association requested Indian Technical and Economic Cooperation, Ministry of External Affairs, Government of India that Department of Community Medicine and School of Public Health, PGIMER, Chandigarh conducts a program for their officials from 20th June-25th June 2022 which shall boost their management and leadership skills. After lot of deliberations with officials of ITEC, Nepal Medical Association a program was designed. 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 45 delegates from Nepal participated.

The current program is 'first of its kind' public health management program in the country which endeavors to boost skills and competencies of program managers for addressing local public health challenges and increase competency of organizations. The modules covered during this comprehensive program were strengthening the health care system of Nepal?-learnings from India, management and leadership approaches in health care settings, communication and advocacy, making strategic and operational plans- applications, monitoring and evaluation of programs and tools and artificial intelligence and its application in healthcare. 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 3 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, and management games); its concept wherein focus was on application based learning in which the participants prepared an action plan during the program

### **Executive Summary**

for their organization (to be implemented within 3 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.

'IPHMDP Contests' was also organized during the program wherein various awards pertaining to different activities viz. best dressed participant of the day, most active participant of the day, e-IPHMDP i.e. active participant on social media, best logo representing the program, voracious reader, best cultural performer and best action plan were bestowed to the participants during the 'valedictory ceremony' of the program. Few participants with extra ordinary representation were honored with special titles such as leadership award, best team player and humility award. 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/ energisers 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 leadership and along with hosting a cultural event with gala dinner, where they got a chance to informally interact with each other which actually helped in peer learning and developing network for future endeavours. Everyday, few participants were also given opportunity to assume leadership position, besides giving chance to 3 volunteers to act as cultural night organizers. Yoga and bhangra sessions in early mornings were flavours of the program for depicting Indian culture and energizing them for the program.

The participants enjoyed the excellent 'Hi-Touch' hospitality of our team including the fact that the meals served during the program (breakfast, lunch and tea/snacks in between) were carefully designed keeping in view the profile of participants. We also ensured to provide 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 Twitter page with appropriate hash tags social media (eg. #ITECNetwork, #MEA\_INDIA #MOHFW\_INDIA, #IPHMDP, #INDIAINNEPAL #PGIMER etc.). A parallel e- mail account and whatsapp group was also maintained by the organizers to keep the participants updated (on daily basis) and to provide them assistance during the program.

During the program, the participants appreciated the overall quality of training along with the field tour, where they were exposed to the Indian Health System along with its few best practices. They felt that it was a **wonderful experience** with a blend of learning, through various teaching methods which they can apply in their organization. They revealed that the program was well planned, organized, managed and full of knowledge which can be truly implemented in field settings and across different organizations. 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 and social media.

### **Key Highlights of the Program**



#### **Appropriate participant blend**

- Senior clinicians and academicians
- Medical and public health professionals
- Gender and age distribution



■ Public health and management Experts





#### Mix of teaching methods

- Formal: Lectures, Power point presentations, Case studies, Exercises
- Out of the box: Management games, Role Plays and Field Visits

#### **Learning management with fun**

Games, energisers etc. were embedded within formal teaching





#### **Application centred learning**

Field visits to showcase best practices and innovations (in hospital and health care facilities) Action plan preparation by participants during the program for their organization (To be implemented within 3months)



Facebook page, Twitter, e- mail account and Whats-app group for ease of communication





#### **Environmental friendly**

Individualized good-quality steel bottles for water consumption. No plastic disposable cups for tea/ coffee consumption



Yoga and Bhangra sessions Sharing of best practices by participants Hosting a cultural event with gala dinner.



#### **Preamble**

"Health initiatives in developing countries often fail not because of lack of scientific knowledge but because of lack of managerial competence".

The aim of good management is to provide health services to the community in an appropriate, efficient, equitable, and sustainable manner. The skills and ideas that healthcare managers bring to the table provide a fresh approach to tackle various situations with significant patient benefits. Beside demonstration of technical expertise, considerable portion of manager's time is generally spent on skills and competencies such as motivating staff, communicating and negotiating with stakeholders, advocacy and leadership. There are very few formal management trainings in government and private health organizations. Most of the existing courses on Public Health Management are theoretical, extensively elaborative, incomprehensive and are unable to provide all the necessary skills. In order to improve effectiveness and efficiency of health care delivery system, there is a need to devise programs which shall impart skills required to manage the existing and emerging challenges and inturn leading to capacity building of the public health.

#### Goal

Enhance the skills and competencies of middle and senior level program managers with respect to leadership, team building, planning, monitoring, evaluation, project management, resource allocation, and public health communication to address public health challenges as well as strengthen efficiency of organizations in resource limited settings.

### **Program Objectives**

- 1. To enable participants understand the concepts and principles of health management.
- 2. To build capacity of middle/senior level managers in designing, implementing, monitoring and evaluating context-specific program and project operations.
- 3. To illustrate with relevant case studies, how the managerial functions can be leveraged to improve the overall competitiveness within the organization.
- 4. To equip participants on identifying gaps in current scenario and envision future trends in health care management for effective decision making in diverse settings.

### **Program Audience**

This program is designed for managers and organizational leaders working in the domain of public health, hospital administrators, faculty of medical colleges and management institutions who are responsible for effective and efficient formulation and implementation of healthcare program or projects. In the current program, a total of 45 participants from Nepal across the globe participated to enhance their skills in public health management.







#### Program Benefits =

#### **Participants**

At the end of program, the participants are expected to

- 1. Create innovative strategies within the organisation for improving its efficiency.
- 2. Enhance performance by building and strengthening leadership.
- 3. Learn application of various techniques for planning and successfully managing projects.
- 4. Develop performance indicators, analyse data and quality reporting.
- 5. Design and use program budget, manage financial reporting systems to apply to organizations.
- 6. Develop in-depth understanding of effective communication and change management strategies.

#### - 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 Contents —

Lecture 1: Strengthening the health care system of Nepal?-learnings from India,

Lecture 2: Management and leadership approaches in health care settings

**Lecture 3:** Communication and advocacy

Lecture 4: Making strategic and operational plans- applications,

**Lecture 5:** Monitoring and evaluation of programs and tools

**Lecture 6:** Artificial intelligence and its application in healthcare.

#### Program Duration and Venue =

**Duration:** The duration of program was six days from 20th – 25th June, 2022

Venue: Hotel Parkview, Sector 24, Chandigarh





### **Teaching Methodology**





LECTURE (POWER-POINT PRESENTATION





MANAGEMENT GAMES





MANAGEMENT EXERCISES





**ROLE PLAY** 





#### **CASE STUDY**





#### **STUDY TOUR**





FIELD VISIT





**GROUP WORK** 

International Public Health Management Development Program (IPHMDP)

Organised by: Dept. of Community Medicine and School of Public Health, PGIMER, Chandigarh

Sponsored by: Indian Technical & Economic cooperation (ITEC) Scheme,

Ministry of External Affairs, GOI

Day	Time	Module	Resource Person		
	09:00- 09:30 AM	REGISTRATION			
	09:30- 11:00 AM	INTRODUCTIONS			
	11:00- 11:30 AM	TEA BREAK			
	11:30- 12:15 AM	Strengthening the health care	Maj. General (Dr, Prof.) Atul		
		system of Nepal?-Learnings from	Kotwal, Executive Director, NHSRC		
		India	MISKC		
	12:15- 12:45 PM	Management exercise/ game	Participants		
Day 1	12:45- 01:00 PM	SOCIAL MEDIA BREAK	Participants		
20.06.22	01:00- 02:00 PM	LUNCH BREAK			
(Monday)	02:00- 02:45 PM	Management and leadership	Dr. Sanjiv Kumar, Ex – Director,		
		approaches in health care settings	IIHMR		
	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		
	07:00-07:40 AM	Bhangra & laughter therapy	Dr. Nidhi Jaswal, Technical Officer, Endgame Hub and RCTC		
	09:00- 09:30 AM	RECAP SESSION	Participants		
	09:30- 10:15 AM	Communication and Advocacy	Dr. Rajni Bagga, Ex Professor, NIHFW		
	10:15- 10:45 AM	Management exercise/ game	Participants		
	11:00- 11:30 AM	TEA BREAK			
	11:30- 12:15 AM	Making strategic and operational	Dr. Sonu Goel, Professor,		
		plans- applications and tools	PGIMER		
Day 2 21.06.22	12:15- 12:45 PM	Management exercise/ game	Participants		
(Tuesday)	12:45- 01:00 PM	SOCIAL MEDIA BREAK	Participants		
	01:00- 02:00 PM	LUNCH BREAK			
	02:00- 05:00 PM	· · · · · · · · · · · · · · · · · · ·			
	02:00-02:30 PM	Telemedicine centre			
	02:30-02:40 PM	Travel time			
	02:40-03:10 PM	Tele evidence centre			
	03:10-03:20 PM	Travel time			

	03:20-03:50 PM	ROTTO			
	03:50-04:00 PM				
Day 2 21.06.22 (Tuesday)		Travel time			
	04:00- 04:30 PM	Skill centre			
(100000)	04:30- 04:40 PM	Travel time			
	04:40- 05:00 PM	Community Medicine and School of Public Health			
	09:00- 09:30 AM	FEEBACK SESSION	Participants		
	09:30- 10:15 AM	Monitoring and Evaluation of programs	Dr. Ajay Sood, Ex Professor (NIHFW)		
	10:15- 10:45 AM	Management exercise/ game	Participants		
Day 3	11:00- 11:30 AM	TEA BREAK			
22.06.22 (Wednesday)		AI and its application in healthcare	Dr. SN Panda, Professor and Director Research, Chitkara University research and innovation network, Chitkara university		
	12:45- 01:00 PM	SOCIAL MEDIA BREAK	Participants		
	01:00- 02:00 PM	LUNCH BREAK			
	02:00 PM Onwards	STUDY TOUR TO SHIMLA (TRAVEL)			
Day 4 23.06.22	09:00- 5:00 PM	STUDY TOUR TO SHIMLA- OBSERVING GOOD PRACTICES OF HEALTHCARE SYSTEM FIELD VISIT (CONTD.)			
(Thursday)	07:00 PM onwards	CULTURAL NIGHT AND GALA DINNER			
Day 5 24.06.22	09:00-02:00 PM	FIELD VISIT			
(Friday)	02:00 PM onwards	BACK TO CHANDIGARH (TRAVEL)			
	09:00- 09:30 AM	FEEBACK SESSION	Participants		
	09:30- 10:15 AM	ACTION PLAN PREPERATION			
	10:15- 10:45 AM	Management exercise/ game	Participants		
	11:00- 11:30 AM	TEA BREAK			
Day 6 25.06.22 (Saturday)	11:30- 12:15 AM	ACTION PLAN PREPERATION			
	12:15- 12:45 PM	ACTION PLAN PRESENTATION	Participants		
	12:45- 01:00 PM	SOCIAL MEDIA BREAK	Participants		
		T. Control of the Con			
	01:00- 02:00 PM	LUNCH BREAK			
	01:00- 02:00 PM 02:00- 02:45 PM 02:45- onwards	ACTION PLAN PRESENTATION (CONTD.)  Valedictory ceremony	Participants		

<sup>\*9:00</sup> 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

# STUDY TOUR TO PGIMER, CHANDIGARH FOR DEMONSTRATION OF BEST PUBLIC HEALTH PRACTICES

International Public Health Management Development Program (IPHMDP)
Organised by:

Dept. of Community Medicine and School of Public Health, PGIMER, Chandigarh

# Sponsored by: Indian Technical & Economic cooperation (ITEC) Scheme, Ministry of External Affairs, GOI

DATED: 21.JUNE.2022 (TUESDAY)

02:00-02:30 PM	Demonstration: Telemedicine centre  Dr. (Prof.) Meenu Singh Professor I/C Telemedicine centre Department of Telemedicine, PGIMER	
02:30-02:40 PM	Travel time	
02:40-03:10 PM	Demonstration: Tele evidence centre  Dr. (Prof.) Vipin Kousha Medical Superintendent, PGIMER	
03:10-03:20 PM	Travel time	
03:20-03:50 PM	Demonstration: ROTTO	Dr. (Prof.) Vipin Koushal Medical Superintendent, PGIMER
03:50-04:00 PM	Travel time	
04:00- 04:30 PM	Demonstration: Skill lab	Dr. (Prof.) Jayshree M Department of Plastic Paediatric Medicine Dr. Navneet Dhaliwal J.M.S. Department of Hospital Administration
04:30-04:40 PM	Travel time	
04:40-05:00 PM	Community Medicine and School of Public Health	Dr. (Prof.) Arun K Aggarwal Prof. and Head, DCM and SPH, PGIMER

#### STUDY TOUR TO SHIMLA FOR DEMONSTRATION OF **BEST PUBLIC HEALTH PRACTICES**

International Public Health Management Development Program (IPHMDP) Organised by:

Dept. of Community Medicine and School of Public Health,

Sponsored by:

Indian Technical & Economic cooperation (ITEC) Scheme, Ministry of External Affairs, GOI

Date: 23.06.22 and 24.06.22 (Thursday and Friday)

Day 4: 23.06.22					
09:30-10:00 AM					
10:00-12:00 PM	Visit to health and wellness centre				
10.00 12.00 PW	V -0-1 10001-1-1 01-10 11 0000 0 00				
	Demonstration of telemedicine				
	service				
	Digital program monitoring				
	system				
	Integration of various programs				
12:00-01:00 PM	Travel time				
01:00-02:00 PM	Lunch				
02:00-02:45 PM	Visit to Parimahal – Health and Family welfare Training centre				
	1. Demonstration of Skill Lab	-			
02:45·03:30 PM	2. Experience sharing: An	Dr. Omesh Kumar Bharti			
	innovation toward rabies free	State Epidemiologist,			
	Himachal Pradesh	SIHFW, Department of Health &			
		Family Welfare, HP			
03:30-04:15 PM	3. Experience sharing: TB free	Dr. Ashok Bhardwaj			
	country	Chairman, National Task Force,			
	,	National Tuberculosis			
		Elimination Program			
04:15·05:00PM	4. Demonstration of integrated	Dr. Gopal Chauhan			
	approach and digital surveillance	State Program Officer, NTCP,			
	of NCD	HP			
	5. Tobacco free village concept				
Day 5: 24.06.22					

Day 5: 24.06.22

09:30·10:00 AM	Travel time	
10:00-01:00 PM	Visit to Indira Gandhi Medical Institute, S	Shimla
01:00-02:00 PM	Lunch	

### Day 1 (20th June 2022, Monday)

#### Registration (9:00 AM - 9:30 AM)

The senior officials from Nepal comprising of physicians, academicians and public health managers were welcomed at the registration desk in a traditional style with a tilak ceremony. They were all greeted with a warm smile and a beautiful rose by the organizers. A welcome



letter was given to each participant by Dr. Sonu Goel (Program Director) and the members of organizing team badged delegates with the program logo. It was followed by official registration of the participants and distribution of program kits which included a comprehensive module of the program; ID Card; Information Booklet, Notepad and Brochure, Pen and Pen Drive, book entitled 'Six Thinking Hats and 'Seven Habits of Highly Effective People' and a steel Water Bottle. All the material in the kit were individualized with name of participant written on it.







The participants were divided into 7 groups - Movers, Shakers, Rockers, Breakers, Takers, Shooters, and Hoppers. After completing the registration process, the delegates were seated and the program kits were distributed.

The participants were allocated into groups (Movers, Makers, Shakers, Rockers, Takers and Hoppers) of 5-6 participants per group which were randomly shuffled every day for ensuring interaction amongst participants and peerlearning.



#### Pre-Test and Introduction of participants (9:30 AM - 10:00 AM)

A pre-test-questionnaire comprising of 30 questions was shared with the delegates using Google forms for assessing their baseline knowledge about public health management.



Therefore, participants introduced themselves to the group in a unique and memorable way through an interactive ice-breaking session





called "Pass the Ball". The participants were supposed to introduce him/herself and then pass on the ball to any of the participant of the group. The participant receiving the ball then introduce him/herself comprising of name, designation, hobbies and one expectation from the program. The session was highly enjoyable, with participant's happy and smiling faces gracing the occasion. They showed great enthusiasm in getting to know their fellow participants for the coming six days of the program.

A pre-test and pre-read questionnaire was then shared with the delegates using Google forms for assessing the baseline knowledge about public health management and their responses were recorded.

#### Inaugural session (10:00 AM - 11:00 AM)

The coordinator and host for the event Dr. Kritika Upadhyay welcomed the delegates and distinguished guests for the program. Dr. Sanjiv Kumar, Former Executive Director, IIHMR, and National Health System Resource Centre (NHSRC) New Delhi; Maj. Gen. Prof Atul Kotwal, Executive Director, NHSRC, New Delhi and Dr. Lochan Karki, President, Nepal Medical Association were among the Guest of Honours for the inaugural ceremony. They were extended



floral welcome by Dr. Sonu Goel and his team. Thereafter, the guests were invited for the lamp lighting ceremony with a background note of



Saraswati Vandana and the audience were briefed that the lamp symbolizes the life, light of divinity, wisdom, intellect and good work. Thus, this light brings a hope of protection against ignorance and brings positive thoughts amongst us to fight negativity in our lives and bring wisdom by learning new things.



Dr. Sonu Goel, Program Director, IPHMDP and Professor, Department of Community Medicine and School of Public Health, PGIMER, Chandigarh extended a very warm welcome to distinguished guests and delegates attending the program. He stated that the program would provide the participants a platform for formal and informal learning as well as networking. He reiterated the importance of public health stating that it is an art as well as science of

preventing diseases, prolonging life and promoting health. It's a significant contributor towards economy of a country and ensures productive society. He emphasized the role of public health management in such scenario especially in limited resource settings of developing countries and in achieving Universal Health Coverage. Dr. Goel provided the participants with an overview of the host institution and key highlights of the City Beautiful along with the program's aims and objectives in a lucid manner. He also provided a glimpse of the journey of last 13 International Public Health and Management Program



(IPHMDP), held over last 7 years, describing the contents along with the unique mix of teaching methodology to be adopted in the current program. He gave a brief description of the contents and enthusiastically gave the audience an insight into the forthcoming journey of the program. All the participants were excited to learn the new aspects discussed in the program overview. An "IPHMDP Contest" was announced to the participants which had various activities viz. Most Participatory participant, Best dressed Participant, Best Selfie, Best Logo and Tagline, Best cultural performer, Best Action Plan and e-IPHMDP. Dr. Sonu mentioned that the program is helpful in developing strategies for implementation in their home country and respective states, expanding professional networks and in doing so making new friends

and everlasting memories.

Dr. Sanjiv Kumar, Former Executive Director, IIHMR, and National Health System Resource Centre (NHSRC) New Delhi congratulated Department of Community Medicine and School of Public Health, PGIMER, Chandigarh, especially the proactiveness of Dr. Sonu Goel for organising this program and sustaining it for past 7 years. He briefed about public health challenges in developing countries and how these types of programs aim to build capacity of



middle and senior level managers in effective planning and implementation, operational management and monitoring and evaluation. The two-way exchange of knowledge through the programme will assist delegates from neighbouring countries to replicate the best practices in their own country or states, highlighted Dr. Kumar. At the end, he thanked Ministry of External Affairs for the initiative and hoped for more similar programs at PGIMER, Chandigarh.

Maj. Gen. Prof Atul Kotwal, Executive Director, NHSRC, New Delhi proudly announced that conducting the 14th program in the series is an honour for PGIMER, Chandigarh while





welcoming all the participants from Nepal, he thanked Indian Technical Economic Cooperation (ITEC), Ministry of External Affairs, Government of India for sponsoring this program and extended the full support of NHSRC in collaborating with similar programs in the future. He emphasised relevance of such programmes in public health which contribute towards fostering leadership and management skills among health professionals across globe.



It was emphasized that all the doctors need some additional management and leadership skills to administer the various health programs running across the globe and this health management program provides the platform to acquire these skills. He concluded his speech by welcoming the delegates once again and wished successful completion of 14th IPHMDP event.

Dr. Lochan Karki, President, Nepal Medical Association (NMA), congratulated Prof. Sonu Goel, Program Director, IPHMDP, and his team for organizing such a comprehensive program for delegates of Nepal. He said he is expecting a lot from the program, which is not just academic

benefits but also future collaborations for training other hundreds of officials of NMA. Also, he shared his interest in conducting similar courses and publishing research on it. He also shared his expectations related to the multiteaching methodology of the program. Lastly, he thanked the Department of Community Medicine and School of Public Health, PGIMER, Chandigarh, for their efforts and dedication and wished all the participants all the best.



#### **Group Photograph**



Tea Break (11:00 AM-11:30 AM)

A short tea break was organized for the participants before the next technical session.





#### **Energizer: 'Sit and Stand'**

The post high tea session started with an energizer for 5 minutes. All the participants of the program were asked to sit when said 'stand' and vice-versa, first slowly and then at gradually rapid pace.

Before the commencement of the technical sessions, one of the participants gave a flute performance on the Bhajan 'Om Jai Jagdish Hare' and mesmerized the audience.





Session 1: Strengthening the healthcare system of Nepal?- Learnings from India (11.30 AM-12.45 PM)

Speaker: Major Gen Prof. (Dr.) Atul Kotwal, Executive Director, NHSRC, New Delhi

Starting with the demographic structure of Nepal, Dr. Kotwal explained the evolution of health system in Nepal. He also highlighted various health indicators of Nepal including MMR, IMR, institutional delivery, fertility rate, etc. referring to the Nepal Multiple Indicator Cluster Survey (NMICS) 2019. Focusing on the burden, he mentioned that over 70% of the deaths in Nepal account from non-communicable diseases. Various lessons to be learned from India were shared with the participants during





the session. Talking about the way forward, it was mentioned that the health care system of any country could be strengthened by making service packages available; strategically organizing the delivery of services, and availability of adequate Human Resources for Health (HRH) to ensure the delivery of services. These strategies could be complemented by the community engagement, quality of care, information and technology, financing, etc, he further added.

# Short Interview Session with Major Gen Prof. (Dr.) Atul Kotwal, Executive Director, NHSRC, New Delhi

#### Moderator: Dr. Sonu Goel, Director, IPHMDP

When asked about 'Do you feel that the programs like IPHMDP are helpful for other countries?', Dr. Kotwal replied that yes, such program leads to cross learning and paves the way for collaborative work in which countries get opportunities to look at each other's health system. He further added that programs like IPHMDP helps in building network and collaboration with other countries. The officials receiving training may





replicate the learnings of the training in their settings based upon their feasibility. Talking about the USP of the program, he mentioned that inclusion of interactive exercises and team-building games have made this program more practical and applied. Also, the cultural program by the participants themselves is the first of its kind initiative being undertaken as a part of this program.

#### **Felicitation**



Dr. Sonu Goel, Professor, PGIMER felicitated Dr. Atul Kotwal with the hand monument. The participants also honored him with the souvenirs of Nepal.

#### Participant Reflection & Lunch (1:00 PM - 2:00 PM)

During the lunch break, the participants were asked to volunteer for giving testimonials regarding the program. Five participants volunteered and were asked few questions related to the program, its objectives and benefits. The participants praised the distinctiveness of the program in terms of various competitions for the participants. It was



further said that they would recommend this program to other colleagues. They also emphasized that such type of programs should be made mandatory for all physicians, academicians and public health managers. The participants stated to replicate the learnings of the program in their settings once they go back.

#### Energizer: I am a book

The session was followed by an interesting energizer by Dr. Nidhi Jaswal, Technical Officer, RCTC and Tobacco Endgame Hub, DCM-SPH, PGIMER, Chandigarh entitled "I am a Book". In this energizer, the participants were shown a book and were asked to imagine themselves as that book. They were supposed to act or change positions similar to the positions of the book being changed by Dr. Nidhi Jaswal.





# Session 2: Management and Leadership Approaches in Healthcare Settings (2.00 PM-3.45 PM)

#### Speaker: Dr. Sanjiv Kumar, Ex-Director, IIHMR, New Delhi

Dr. Sanjiv Kumar started his session by asking participants to think about a situation where they get to work as a 'team'. He ignited their thought process by making different teams to discuss and enlist the various desired qualities





of a leader. He explained the role of leadership in public health and explained conceptual approaches and strategies for addressing health in a population. He deliberated upon Leadership and Management Strengthening Framework given by World Health Organization. Later, he highlighted the importance of motivation and confidence in acquiring new skills. Emphasizing the importance of leadership in public health, Dr. Sanjiv mentioned various qualities of a leader by giving examples from case studies. He said that leader set the mission, fix the priorities and maintain standards across the entire spectrum of organization's activities. He further detailed on the similarities and differences between leadership and management in healthcare profession. He said that the leader has to lead him (self-management) first before leading a team.





The main leadership skills reported by for public health professionals viz. listening, advocacy, networking, emotional competencies, working with difficult persons/ behaviours, empowering the staff etc. were discussed during the session. He further briefed that a leader holds fast to his basic values to set examples for others. The underlying essence of the presentation was -"Effective leadership is a continuous and transformational journey". After the session, an exercise was given to the participants to prepare a personal plan for improvisation of atleast ONE leadership skill. The participants worked in group which was followed by presentation.

#### **Felicitation**

Dr. Sonu Goel, Professor, PGIMER felicitated Dr. Sanjiv Kumar with the hand monument. The participants also honored Dr. Kumar with the souvenirs of Nepal.





# Short Interview Session with Dr. Sanjiv Kumar, Ex-Director, IIHMR, New Delhi

#### Moderator: Dr. Sonu Goel, Director, IPHMDP

Dr. Goel enumerated the achievements of Dr. Sanjiv Kumar and thanked him for joining the program. When asked about the good aspects of the program, Dr. Sanjiv said that this program is always evolving as cross-learning is felicitated through this program and new concepts are incorporated in the next program. Adding to this, he praised the organizing team as they get the best people for a respective subject from the country. Also, he appreciated the enthusiasm shown by the participants in the program. In continuaton to this, Dr. Goel asked that if





these type of leadership and management courses are relevant for diverse countries, to which Dr. Kumar replied that when you have participants from different countries then you get an opportunity to learn new things. But he emphasized on having country specific courses so that the focus is on various aspects from that specific country. Talking about the collaborations with various organizations, he retrieted that this is the best approach to get the best out of these type of programs.

#### Discussion and feedback (4:30 PM-5:00 PM)

At the end of the day, feedback from participants was taken for every session. The feedbacks from participants were collected using Google forms. After the feedback session, doubts of the participants were addressed by Dr. Kritika and important announcements were made for the next day.



### Day 2 (21st June, 2022 Tuesday)

#### Laughter Yoga and Bhangra Session (7:00 AM – 8:00 AM)

To mark the International Yoga Day, a very energetic laughter yoga and bhangra session was conducted for the participants of the program which was hosted by Dr. Nidhi Jaswal, Technical Officer, DCM&SPH, PGIMER Chandigarh. All the participants actively participated in the session and thoroughly enjoyed it.





#### Reflection of previous day (9:00 AM - 9:30 AM)



The day began with the feedback from the participants about the previous day's sessions. Volunteers from the previous day Dr. Poonam and Dr. Bina presented the first day feedback. They did an interactive recapitulation of the sessions. This was followed by declaration of winners of 'Best Dressed' contest who was Ms. Shanta Chauhan and 'Most participatory participant' Ms. Bina. One participant from each of the six groups volunteered to be the group leader for that day,



who was then asked to coordinate the activities within his/her group. The necessary announcements related to the day were made by the organizers.



#### Session 3- Communication and Advocacy (9:30AM-10:45AM)

#### Speaker: Dr. Rajni Bagga, Ex-Professor, NIHFW, New Delhi

Dr. Rajni Bagga began her speech by orienting upon the concept of communication to the participants of the course. She reiterated that communication is the most important component in the leadership and most of the conflicts occur due to lack of effective communication. To explain the concept of communication in detail, Dr. Bagga divided the participants into two groups to discuss





the barriers and the easiest aspects of the communication respectively. The barriers of communication were then discussed by the group 1 i.e. lack of providing feedback, linguistic barrier, interpretation by the receiver, judging and prejudices; listening. The easiest aspects of the communication were described by group 2 i.e. pictorial messages, verbal (words & language) and non-verbal (body language), homogenous groups etc. After a thorough discussion, Dr. Bagga briefed

the participants with the notion of barriers, its types and deliberated upon the 4 IPC skills viz. verbal, non-verbal, listening and feedback to overcome the barriers in communication. At the end, she highlighted how one's behavior and attitude can determine the skills (aggression, sympathy, empathy etc.) and makes it the root cause of all the failures and successes.



#### **Felicitation**

Dr. Sonu Goel, Professor, PGIMER felicitated Dr. Rajni Bagga with the hand monument. The participants also honored Dr. Bagga with the souvenirs of Nepal.





# Short Interview Session with Dr. Rajni Bagga, Ex-Professor, NIHFW Moderator: Dr. Sonu Goel, Director, IPHMDP

After welcoming, Dr. Bagga in the program, Dr. Goel asked how the communication plays a major role for the managers and public health professionals to get better results in their work in management?? She said that the most important component for being a leader or a manager is communication because most of the problems in manage-ment occurs due to lack of communication, too-much communication or faulty communication. Leadership is all about communication with the people who empower and motivate them. When asked about the frequency and benefits of



conducting such programs, Dr. Bagga said that to promote the health care services and to reuse the best available resources, the management is the need of the hour.

#### Tea Break & Selfie Time (11:00 AM-11:30 AM)

A short tea break was organized for the participants before the next technical session. The participants enjoyed taking selfies with the placards which were arranged by the organizers to break the monotony between the sessions.













# Session 4: Making Strategic and Operational Plans-Applications and Tools (11:30 AM-1:00PM)

Speaker- Dr. Sonu Goel, Professor, Department of Community Medicine and School of Public Health, PGIMER, Chandigarh

Dr. Sonu Goel commenced his session by giving a very interesting exercise to the participants in which they had to build a tower with the help of newspapers and tapes. The participants were divided into 4 groups. This activity fostered the team building, collaborative action planning and execution, coordinating, critical thinking and problem solving skills among the participants. It was followed by brief oration of the components of planning (tasking was group wise) viz.



assigning roles and responsibilities, gauzing strengths and limitations, innovation, concept, focus on the goal and common sense. In addition to this the participants enumerated some of the strengths and barriers in planning on the basis of the exercise.





Thereafter, the participants assigned with another exercise to embed GANTT chart (planning and practical tool) by planning a birthday party. The components needed to plan a birthday party were then enumerated by the participants which were incorporated in the GANTT chart. Dr. Goel then explained the notion of GANTT chart to the participants with the help of this exercise. Therefore, he took examples



from the health sector like planning a health camp or an intervention and asked participants to plot the activities on the GANTT chart. The participants therefore enjoyed the session.

The exercises were followed by the steps of the planning, its objectives and types. In continuation to this, he listed the steps of

rationale planning and the planning cycle. Furthermore, he described the logical framework approach (LFA) in program planning and implementation and explained that LFA is an analytical tool for improving the quality of programs/ projects by objective oriented project planning and management. The steps of LFA - stakeholder analysis, SWOT analysis, problem tree, objective tree analysis, strategy analysis, logical framework matrix and monitoring and evaluation were put forward by him. He concluded his lecture by saying that LFA is an objective and target oriented approach for planning of project. It provides a better basis for systematic monitoring



and analysis of effects of project. He also affirmed that unless inputs and process are clearly specified, it's difficult to achieve outputs, outcomes and impact.

#### Lunch Break (01:00 PM-02:00 PM)

A lunch break was organized for the participants before moving to the field visit.

# Field Visit to Post Graduate Institute of Medical Education and Research, Chandigarh (02:00 PM-05:00 PM)

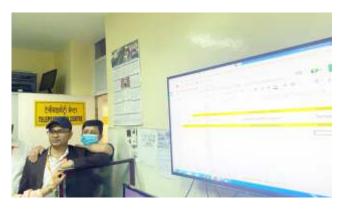
In the post lunch session, a field visit was organized to demonstrate the best practices in patient care settings at PGIMER, Chandigarh. We started the study tour by visiting the telemedicine centre in Nehru Block. All the participants were divided into two groups: first group observed the telemedicine unit where Dr. Amit explained the



infrastructure required for building a telemedicine centre and its application in teaching and for consultation. The second group witnessed the tele psychiatric unit where the importance of



innovation and creativity for effective management of psychiatric patients from long



distance were highlighted. Thereafter, the two groups were shifted to witness respective facilities. The telemedicine and tele psychiatric unit saved lot of money, efforts of patients while receiving good quality care from senior doctors of PGIMER, Chandigarh. Then the group moved on to other innovative uses of information technology at PGIMER, such as use of videoconferencing for Tele-Evidencing. Participants observed the functioning of tele evidencing unit and discussed various challenges regarding the setting up of network, integration and quality of network, scheduling and punctuality etc. Talking about the



impact of the innovation, the consultant stated that more than three thousand Tele- Evidences have been successfully conducted till date and there has been a reduction in fuel utilization and substantial man hours have been saved per month. Lastly she told about the video on the tele-evidencing project of PGI which was highlighted by the Union Health Minister in the Parliament of India.





Later, the audience visited the Department of Hospital Administration were participants were briefed about India's largest organ donation facility, Regional Organ and Tissue Transplant Organization (ROTTO) by Ms. Saryu, Coordinator. She stated ROTTO is currently engaged in Liver, Heart, Kidney, Bone Marrow and Corneal transplant programs and commendably taking organ donation awareness drives to the masses.



She also mentioned about the organizational system being followed by the institute for organ donation due to which there has been a tremendous hike in organ donation from last many years. She concluded the session by providing insight into the challenges they faced while strengthening the ROTTO and shared how these challenges were converted into opportunities. Followed this the delegates observed the skill lab at the Advanced Pediatric Centre of the institute

where Dr. Rahul, Junior Resident of Department of Hospital Administration shared the concept behind its development. Few participants also viewed the simulation lab at the Pediatric Intensive care unit. At the end, the participants proceeded for Department of Community Medicine and School of Public Health, PGIMER for interaction with the faculty. The day ended with a group photograph and with smiling faces.









#### Feedback

At the end of the day, feedback from participants was taken for every session using Google forms. After the feedback session, chits for best dressed and most participatory participant contest were collected from the participants. Thereafter, doubts of the participants were addressed by the organizers and important announcements were made for the next day.

### Day 3 (22nd June, 2022 Wednesday)

### Reflection of previous day (9:00 AM - 9:30 AM)

The technical sessions commenced with a feedback from the participants about the previous day's sessions. Dr. Anil presented the previous day feedback. One participant from each of the six groups volunteered to be the group leader for that day, who would coordinate the activities within his/her group. For the cultural night to be organized on the second last day, participants were asked to volunteer to be the cultural night director, where they would be responsible for organizing the events and games. Participants were also asked to



volunteer for presenting best case practices on the following day. Other necessary announcements for the day were also made.





#### Game: Make a logo and tagline (9:30AM-10:00AM)

Participants were divided into six teams. Each team selected its leader. The teams were asked to design the logo and tagline befitting the current International Public Health Management Development Program. These logos would be displayed in the valedictory ceremony where the team leader would discuss key features of logo that led to its development.





#### Session 5: Monitoring and Evaluation of programs (10:00AM-10:45AM)

Speaker- Dr. Sonu Goel, Professor, Department of Community Medicine and School of Public Health, PGIMER, Chandigarh

Dr. Sonu Goel began the session by explaining the terms monitoring, evaluation, surveillance, supervision, and review along with differences and similarities between them, citing various examples. He then stressed upon the importance of monitoring to keep track of different activities under various programmes and briefed the differences between a project and a programme. He described the steps which are essential before undertaking program evaluation i.e. why to evaluate, what to evaluate,



how to evaluate changes, how to see whether changes are result of program, when to evaluate, which methods of evaluation to be used and who should do evaluation.

This was followed by discussion about the differences between goals and objectives, program processes and procedures, inputs outcome and impact in regard to the monitoring





with the help of suitable examples. This was followed by a short exercise where participants wrote one input, output, process and outcome in their respective settings. Further, Dr. Goel oriented about some interesting facts about data ,its types and explained the conversion of data into information in a nutshell. He then explained different types of indicators, how to develop indicators for various programs and how to choose the numerator and denominator



for the indicators. In continuation to this, the errors in the interpretation of data were put forward by him. Towards the end, an exercise to understand the components of monitoring and evaluation was discussed. Participants appreciated the session by displaying the feedback board.

#### Tea Break (11:00 AM-11:30 AM)

A short tea break was organized for the participants before the next technical session.





Session 6: Al and its Application in Healthcare (11:30 AM-1:00PM)

Speaker- Dr. SN Panda, Professor and Director Research,
Chitkara University research and innovation network, Chitkara University, Punjab

Dr. SN Panda commenced his session by explaining the concept of artificial intelligence and some related terms viz. algorithms, machine learning, neural networks, data mining, cloud technologies etc. Further, he enumerated the various applications of artificial intelligence and its uses to the participants. While explaining the role of AI in health care, he reiterated the fact that AI is everywhere from gaming to finance to data security. In addition to this, Dr. Panda quoted few examples related to various applications of artificial intelligence which are used to detect and treat different diseases like diabetic retinopathy. After this, the evolution of AI and its various uses in healthcare were



highlighted by him. At the end, Dr. Panda quoted various examples from healthcare where artificial intelligence has been proved as a boon.





#### **Felicitation**

Dr. Sonu Goel, Professor, PGIMER felicitated Dr. S.N. Panda with the hand monument. The participants from Nepal honored him with the souvenirs of Nepal.





# Short Interview Session with Dr. S.N. Panda, Professor & Director Research and Innovation, Chitkara University, Punjab

Moderator: Dr. Sonu Goel, Director, IPHMDP

Dr. Sonu started the interview by welcoming him to the interview session. He asked how you felt participating first time as a facilitator in this course. He replied it is a privilege for him to interact with a senior medical doctor from Nepal and share his innovation in the field of medicine. He added I have not just got a platform but have builded new collaborations. Next, he asked, 'Do you feel that programs like IPHMDP are helpful for other countries?' Dr. Panda replied that such a program gives an insight into various opportunities and learnings for strengthening the health system at a lower level of functionaries. Lastly, he was asked to provide



a message to the participants, to which he said taking challenges will lead to innovation. So, apply these learnings during the program to bring positive societal change.

### Lunch (1:00 PM - 2:00 PM)

After the technical session participants enjoy the lunch and moved to Shimla for study tour.

### Day 4 and 5 (23rd and 24th June, 2022 Thursday and Friday)

#### Shimla Tour (2:15 PM onwards)

After the insightful session on monitoring and evaluation the participants left for the study tour to Shimla at around 2:30 PM. Shimla is the capital of a north Indian state - Himachal Pradesh lying in the Himalayan foothills. Once the summer capital of British India, it remains the terminus of the narrow-gauge Kalka Shimla





Railway, completed in 1903. The participants along with the organising team and Dr. Sonu (Program Director) left from Chandigarh in small buses booked by program organizers. On the way, Program Director briefed the participants about the purpose of study tour. He also told the



participants about the cultural variations in the neighbouring states to Chandigarh such as Haryana, Punjab and Himachal Pradesh and cognizance to the Indian culture and heritage. Around 4:00 PM a halt for a short coffee break





was made, participants were excited and busy capturing the beautiful scenic views. Thus, four hours journey passed within no time and finally the programme group reached Snow Valley Resorts, Shimla at around 6 pm. The accommodation was arranged in a four star hotel with a panoramic views of the Shimla city. Participants were asked to get fresh and join around 8:30 PM for dinner.

On the next day (23 June 2022) everybody met at the breakfast table at around 7:30 AM. Dr. Goel briefed the participants about the planned activities for the day which focused on the understanding of various levels of health care institutions of country. At 9:30 am, the participants left for Primary Health Centreand health and wellness centre Annadele, which was around 15 minutes from the resort. The participants were divided into groups, each group visited four different stations where they



were informed about the functioning of Centre, flow of data, out reach services, immunisation, outpatient services, laboratory services, X-ray and dental room along with various newer health care innovations in state of Himachal Pradesh. A face to face interaction with the medical officer and other staff took place for better understanding of primary health care in India. They appreciated the visit and took good practices to be implemented in their settings.









Then the participants boarded the buses and left for Parimahal – State Health and Family welfare Training centre. In the training centre the first talk by Dr. Omesh Kumar Bharti, State Epidemiologist, SIHFW, Department of Health & Family Welfare, HP and Padam Shri Awardee was on Experience sharing: An innovation toward rabies free Himachal Pradesh. Dr. Omesh shared his 20 years long on making Himachal Pradesh rabies free and he worked to

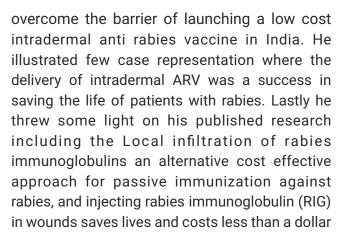




per patient by "pooling strategy". The session ended with interesting queries and discussion.



The next session was on integrated digital approaches for prevention and control of NCDs by Dr. Gopal Chauhan, State Program Officer, NPCDCS, Himachal Pradesh. Dr. Chauhan stated the population of state Himachal has high burden of NCDs even being a hilly state. He discussed integrated application diversity which has taken







data of entire population of Himachal Pradesh in over 15+ health problems including NCDs, which has also won a national award. He also reflected on the strategies for making state 100% tobacco free educational institution by 2025. He further discussed the concept of tobacco free villages under which ban on manufacture, storage, sale or distribution of chewable tobacco products, ban on e-Cigarettes, ban on loose cigarettes and loose tobacco which was made possible by inter sectoral coordination, local bodies, village council meetings, media workshops, and parent-teachers associations. Lastly, the speakers were felicitated by PGIMER Team and delegates from Nepal.







#### **Cultural Nights**

The eventful day was followed by a highly entertaining and relaxing cultural event in which the participants had prepared their native cultural performances. The cultural event was organized in Snow valley Resorts from 7:00 PM onwards. The hosts for the Program were Dr. Smriti and Dr. Anil Karki. Dr. Smriti started the program by welcoming the participants and faculty who had wore the dresses native to their country. First performance was by Dr. SP Rimal who played a mangal dhun. Second performance was from executives from Nepal Medical Association, who did a ramp walk. This was proceeded by local songs which were sung by Dr. Indu K C. Then picking up the pace a dance performance by Dr. Anupama, Dr. Gambhir, Dr. Rekha and Dr. Suzit took the participants to a 'high'. Mr. Raj Kumar and Dr. Bipin Kumar Shrestha later mesmerized everyone with their sweet voice. Dr. Lochan Karki cracked a joke which energized the aura of the venue. A ramp walk was performed by remaining participants showcasing their cultural dresses and tradition. Another Nepali song was sung by Dr. Pawan Hamal which danced and involved everyone. Cultural night concluded with the dance on Indian songs. The hidden talent of the participants was unraveled. The event ended with gala dinner around 10:30 PM. The participants thanked Dr. Sonu and his team for organizing the program along with such a wonderful evening.

























#### STUDY TOUR TO SHIMLA

Next day started will full energy and enthusiasm. The tour was planned to Indira Gandhi Medical College.





The event started with the Lamp Lightening & Sarasvati vandana which was followed by the playing of National Anthem of Nepal and showcasing a documentary on the history of IGMC.



The event was planned in the lecture theater of the college. Honourable Guests on the dice were Prof Surender Kashyap, Vice Chancellor, Atal Medical and research University, Dr. Surinder singh, Principal, IGMC, Shimla, and Dr. Anmol Gupta, Professor and Head, Department of Community medicine, IGMC. The Guest of Honour welcomed the partcipants to "Dev Bhumi" and told that they shall act as the ambassadors to replicate similar public health management program in their country.









### **Program Proceedings**

Welcoming of the Chief Guest of the event, was done by the IPHMDP and IGMC team with a memento. Dr. Sonu Goel, Program Director briefed the Chief Guest and audience about the program being hosted from 2016 and had trained more than 700 participants from 70+ countries. Later Dr. Goel thanked his Alma mater for providing opportunity to international delegates to observe best





practices in health care of Himachal Pradesh. He thanked ITEC, Ministry of External Affairs for sponsoring this important program for building capacity of middle and senior manager from different countries and hoped that such programs shall be conducted in future to accommodate the long list of participants who had applied for the program.



Students also performed an activity on world menstrual hygiene day.



The event proceeded with the address of Chief guest and presentation of best practices by Prof Dr Brij Sharma, Department of Gasteronology, Prof. Dr Balbir Singh Verma, head of Department of Internal Medicine, Prof Dara Singh from Department of Anaesthesia and Dr. Gopal from Department of Community Medicine.







Two (Dr. Lesion Maharjan and Dr. Raj Kumar Dangal) of the participants also presented the best practices from their country on the topic transforming rural healthcare and Public Health Management in COVID.





The program ended with the vote of thanks by Dr. Anmol Gupta, Professor and Head Community Medicine.



Lastly, all the dignitaries were felicitated by IPHMDP team.









The IPHMDP team headed to Chandigarh from Shimla at 2:00 PM. The journey continued with discussions and chit chats reaching Chandigarh around 6:30 PM. At the end the participants thanked Dr. Sonu for such a knowledgeable trip. Thereafter, participants took time off to roam around the Chandigarh.







### Day 6 (25th June, 2022 Satuday)

Dr. Kritika Upadhyay, Course Coordinator, welcomed all the delegates on the last day of 13th International Public Health Management and Development Program.

#### **Poster presentation**

During initial days of the program, the participants were grouped into teams and were asked to design a logo and tagline befitting the current program. During valedictory session, all the groups presented their logos and taglines. The group leader was to elaborate the key features of his team's logo and tagline along with their reason to frame it as justification for current program. This activity elicited group awareness about the current program along with their justification for current program and fostered creativity.









#### Let's describe

After the poster presentation, an exciting game was planned. A white sheet was pasted on the back of each participant; all were asked to write one quality of the other. All enjoyed the session and carried the actual feedback sheet with them.











#### **Valedictory Ceremony**

#### Address by Guest of Honor

Dr. Ashok Bhardwaj expressed his gratitude to Dr. Sonu Goel for giving him this opportunity to join this international program and interact with high level officials of Nepal. He expressed his support to expand the TB elimination in Nepal through state health departments and other important agencies. He praised the conduction of the current program and said that Post Graduate Institute of Medical Education and Research is the first institute in India which started courses in medical field under the mentorship of Dr. Goel. He praised





that Dr. Goel with his team has successfully sensitized over 900 officials through these international programs over these years. Even in the era of covid pandemic, he successfully organized these programs through online mode in different parts of the world. He highly appreciated the glimpse of Indian culture shown during the program through Yoga and meditation sessions and also a cultural night where the participants got a chance for informal networking and showcasing their cultural heritage.

#### **Action plan presentation**

All the participants were provided with the opportunity to prepare an action plan which they intend to complete in a period of a month. Few of the participants presented their action plan during the valedictory ceremony which were highly appreciated by Hon. Guest of Honor, Dr. Ashok Bhardwaj. Dr. Lochan Karki, President NMA









presenting his action plan in which he enumerated many things including for publishing an editorial regarding IPHMDP training, initiating the collaborations with MOHFW, WHO, PGIMER IPHMDP, and other developmental partners to strengthen health system of Nepal, publishing a special issue in Nepal focusing on diverse aspects of teaching induction in program. Then Dr Sharad Chandra Baral promised to initiate telemedicine services in 11 satellite hospitals of Gandaki Province. After this, Dr. Bina Shrestha put the concept of introducing fully functional clinic for trans genders in Nepal.

#### Felicitation of the Participants & Organizers

The Felicitation ceremony was organized to felicitate the participants and the winners of various contests. The Hon'able Guest of Honor & Program Director were invited by the host to confer the certificates to the participants & organizing team members. Along with the certificate the participants were presented with a 'Glimpse' of the program.

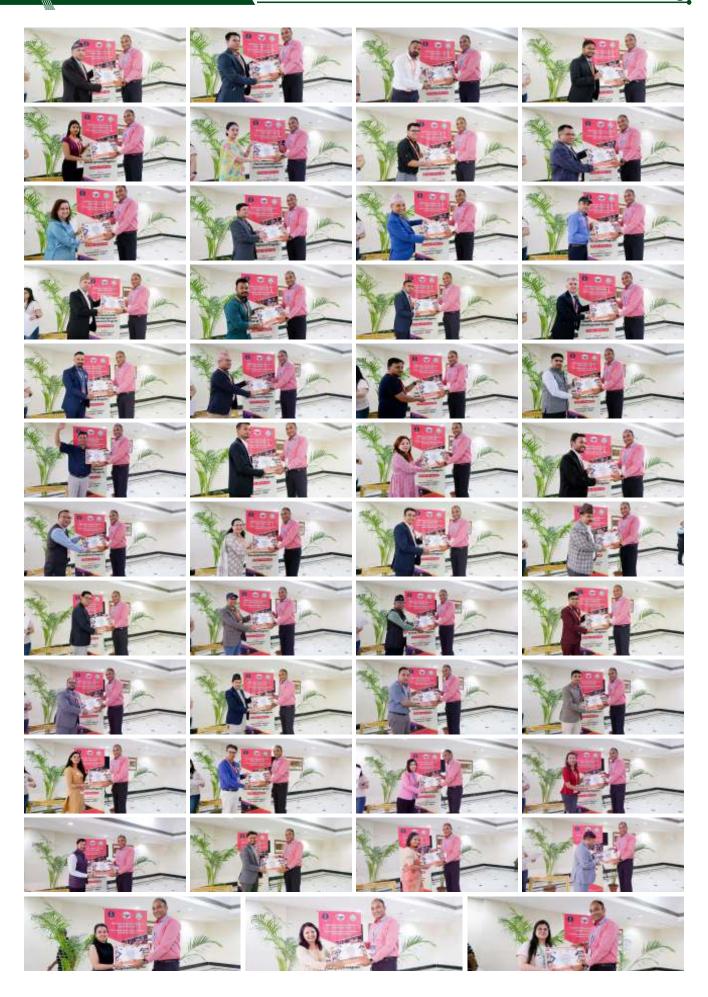


The certificate distribution for various contests was also held, where the winners of: e-IPHMDP was Best participatory- Dr. Bina Shrestha; Best Dressed (Male)- Dr. Rupesh Kumar Yadav; Best Dressed (female)- Dr. Aishana Joshi; Cultural Performer (Male)- Dr. Surya Prasad Rimal; Cultural Performer (Female)- Dr. Indu K.C; Leadership





### **Certificate Distribution Ceremony**



Award- Dr. Lochan Karki; Best Team player- Dr. Anil Bikram Karki; Voracious Reader- Dr. Leison Maharjan; Most active participant on Facebook- Dr. Shanta Chauhan; most active participant on Twitter- Dr. Parth Guragain, and Humility award- Dr. Sharad Chandra Baral.

#### **Program Feedback**

The Participants were asked to describe the program and their feelings about it in one single word. Some of the words used by the participants to describe the program were, "Very useful, sharing, enlightening, inspiring, motivating, amazing, wonderful, facilitating, stimulating, excellent, unique, innovative, empowering, The best, and 'Kamal' (i.e Fantabulous)". The participants highly appreciated the program organizers for conducting a very useful, innovative, informative, knowledgeable and interesting program which they shall certainly replicate in their settings.







#### Vote of thanks

Dr. Goel, Program Director, presented the vote of thanks. He extended his sincere thanks to the Guest of Honor, Dr. Ashok Bhardwaj, Chairman of the National Task Force, National Tuberculosis elimination program and all the facilitators of the program who have spared time for disseminating learning's from their immense experience viz. Maj. Gen. Prof Atul Kotwal, Executive Director, National Health System Resource Centre (NHSRC) New Delhi Dr. Sanjiv Kumar, Former Executive Director, IIHMR, and NHSRC, New Delhi; Dr. Rajni Bagga and Dr. Ajay Sood from National Institute of Health and Family Welfare, New Delhi and Dr. SN Panda, Dr. SN Panda, Professor and Director Research, Chitkara University research and innovation network, Chitkara University.

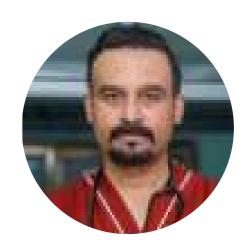
He appreciated the e orts of participants of the program for their intensive hard work and keenness to learn during this program. He also thanked ITEC, Ministry of External A airs, Government of India for the kind support during the endeavor and hope that such programs shall be conducted in future too, to accommodate the long list of participants who had applied for the program.

Lastly, he thanked the entire team of the program for their hard work and enthusiasm, which had led to the grand success of program. He truly hoped that participants shall be the ambassadors of the program and shall conduct similar programs in their settings.





**DR. BINA SHRESTHA**Best Participatory Participant



DR. RUPESH KUMAR YADAV
Best Dressed (Male)



DR. AISHANA JOSHI
Best Dressed (Female)



DR. SURYA PRASAD RIMAL
Cultural Performer (Male)



**DR. INDU K.C**Cultural Performer (Female)



DR. LOCHAN KARKI Leadership Award



DR. ANIL BIKRAM KARKI Best Team Player



DR. LEISON MAHARJAN Voracious Reader



**DR. SHANTA CHAUHAN**Most active participant on Facebook



**DR. PARTH GURAGAIN**Most active participant on Twitter



DR. SHARAD CHANDRA BARAL Humility Award

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Associate Professor Dr. Indu K.C.

**Country: NEPAL** 

Name of the Institute/ organization: NAIHS

**Designation: HEAD OF ACADEMICS** 

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to achieve the goals)	(By when you need to complete the tasks)	(What or who can help you complete tasks)	(How will you identify your success)
1.History of Nepali Army Medical Corps from Past to present.	Write a historic Book on Medical corps of NA	SEPTEMBER 1 <sup>ST</sup> WEEK 2022	Team of Doctor National archives, Interviews, Historic Books	Publication of first historic book on the 97th anniversary of NAMC.

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr. Hemanta Bikram Dahal

Country: Nepal

Name of the Institute/ organization: Nims National Hospital Pvt. Ltd. Damak-05, Jhapa, Nepal

**Designation:** Medical Officer

Objective (List of goals)	Tasks (What you need to achieve the goals)	Time frame (By when you need to complete the tasks)	Resources (What or who can help you complete tasks)	Success criteria  (How will you identify your success)
Personal goal:  30 mins morning exercise (jogging) along with another 30 mins of Yoga and meditation along with family members.	Convincing my parents and younger brother to help me achieve this goal.	3 Months	Comfortable Outfits for exercise and lightweight jogging shoes. My brother can help me complete the task.	<ol> <li>Healthy reduction in body weight (4- 5 kg).</li> <li>Improvement in blood sugar level and blood pressure in father.</li> <li>Improvement in Thyroid function and lipid profile in mother.</li> <li>Reduction in anxiety level and stress in me and my brother.</li> </ol>

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Raj Kumar Dangal

Country: Nepal

Name of the Institute/ organization: Dhulikhel Hospital, Dhulikhel, Nepal

**Designation:** MDGP/Lecturer/Clinical chief of an outreach hospital

(Dolakha Hospital)

Objective (List of goals)	Tasks (What you need to	Time frame (By when you	Resources (What or who can	Success criteria (How will you
(List of godis)	achieve the goals)	need to complete the tasks)	help you complete tasks)	identify your success)
1. Implementatio n of infection prevention and control (IPC) plan	a. Capacity building of staffs by training and workshops b. Developing protocols	c. 3 months d. 2 months	c. Trained staffs d. Protocols to each department e. Logistics	c. Successful training for at least 2 staffs and one workshop d. Protocol followed more than 90% of time by staffs
Implementation     of     Telemedicine     service	<ul> <li>a. Installation of telemedicine device and gadgets</li> <li>b. Training doctors on telemedicine services</li> </ul>	a. 3 months b. 3 months	a. Telemedicine gadgets b. Training manuals and protocols	a. Initiation of telemedicine service

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr Rekha Poudel

**Country: Nepal** 

Name of the Institute/ organization: GP Koirala National Center for Respiratory Diseases, Tanahun

**Designation: Gynaecologist** 

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to achieve the goals)	(By when you need to complete the tasks)	(What or who can help you complete tasks)	(How will you identify your success)
<ol> <li>To start OPD (out patient department) clinic for cosmetic gynaecology in private set up (Mediplus Hospital and Trauma Center, Pokhara)</li> <li>To initiate cosmetic gynaecology related surgeries</li> </ol>	1. Expansion of OPD services  2. Marketing about cosmetic gynaecology, which is an emerging speciality in gynaecology  3. Purchase specialized surgical instruments for cosmetic gynecology related surgeries	Within three months (End of September)	1. Human Resource Department to expand OPD services and procure necessary surgical instruments  2. Social media and network for marketing about cosmetic gynaecology	1. Beginning of OPD services and initiation of surgeries related to cosmetic gynaecology

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr. Aishana Joshi

**Country: Nepal** 

Name of the Institute/ organization: Bajrabarahi Chapagaun Hospital, Lalitpur, Nepal

**Designation: Consultant General Practioner** 

the goals)  In med to complete the tasks)  To develop and implement institutional hand hygiene guidelines at Bajrabarahi Chapagaun Hospital, Lalitpur, Nepal  A. Training of staffs with standard hand hygiene procedures  5. Conduct CME (Continuing Medical Education) regarding standard hand hygiene methods  4. Assessment of individual score.  To develop and implement institutional hand hygiene at the point of care  1. Map the resources for hand hygiene at the point of care  3. July – September 2022  2. Doctors  3. Nursing staffs  3. Nursing staffs  4. Paramedics  4. Paramedics  5. Medical store  5. Medical store  5. Medical store  5. Administration  4. Assessment of hand hygiene practices from a representative of eagroup of staffs.  6. Develop institutional hand hygiene station for availability of hand hygie	Objective	Tasks	Time frame	Resources	Success criteria
implement institutional hand hygiene guidelines at Bajrabarahi Chapagaun Hospital, Lalitpur, Nepal  3. Discuss and ascertain hand hygiene resources during staff meetings  4. Training of staffs with standard hand hygiene procedures  5. Conduct CME (Continuing Medical Education) regarding standard hand hygiene methods  6. Develop institutional hand hygiene station for availabilitiese	(List of goals)		need to complete the	help you complete	(How will you identify your success)
7. Preparation of posters as reminders at hand washing stations  8. Select role models among the health care workers to	implement institutional hand hygiene guidelines at Bajrabarahi Chapagaun Hospital, Lalitpur,	hand hygiene at the point of care  2. Assess what additional products are required  3. Discuss and ascertain hand hygiene resources during staff meetings  4. Training of staffs with standard hand hygiene procedures  5. Conduct CME (Continuing Medical Education) regarding standard hand hygiene methods  6. Develop institutional hand hygiene guidelines  7. Preparation of posters as reminders at hand washing stations  8. Select role models among the health care workers to demonstrate hand hygiene	July –	superintendent  2.Doctors  3.Nursing staffs  4.Paramedics  5. Medical store  6. Administration	using WHO (World Health Organization) self assessment framework. And assessment of individual score.  3. Demonstration of hand hygiene practices from a representative of each group of staffs.  4. Assessment of hand hygiene stations for availability of hand hygiene products.  5. Pre and post-test based on the institutional guideline prepared will be taken

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr. Amar Shrestha

Country: Nepal

Name of the institute/ organization: B.P.K. Memorial Cancer Hospital, Bharatpur, Chitwan

Designation: Jr. Consultant in ENT- HNS

Objective (List of goals)	Tasks (what you need to achieve the goals)	Time Frame (By when you need to complete the tasks)	Resources (what or who can help you complete tasks)	Success criteria ( how will you identify your success)
1. Establish	1. Forming the	1 year	1. Budget	Proper
ment of	team		2. Manpowe	functioning of
LASER	2. Keep		r	LASER surgery
Surgery	meeting with		<ol><li>Training</li></ol>	in the Institute
in	team			
BPKMCH	members			
	3. Getting			
	approval			
	from the			
	Health of			
	Ministry			

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr ASHISH SHAH

**Country: NEPAL** 

Name of the Institute/ organization: PIPRA PHC, MAHOTTARI

**Designation: MEDICAL OFFICER** 

On the basis of knowledge gained from the program write 1-2 goals and complete the action plan below

as to successfully implementation your learning's in 3 MONTHS DURATION

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to achieve the goals)	(By when you need to complete the tasks)	(What or who can help you complete tasks)	(How will you identify your success)
To begin 24 hrs Emergency Service in Pipra PHC.	A. To increase man power in order to run 24 hrs emergency.      B. To buy all logistics needed to run 24 hrs emergency services to public.	By 17 <sup>th</sup> of August 2022 (40 days target from 6 <sup>th</sup> July 2022)	A. Health Division, Pipra Gaupalika B. Ministry of Social Development, Madhesh Pradesh	A. All emergency cases seeking services at Pipra PHC along with feedback given by them.

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr. Bipin Kumar Shrestha

**Country: Nepal** 

Name of the Institute/ organization: Nepalese Army Institute of Health Sciences

**Designation: Asst. Professor** 

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to achieve the goals)	(By when you need to complete the tasks)	(What or who can help you complete tasks)	(How will you identify your success)
1. Enhance communicat ion skills among Medical officers of my Institution	1. Firstly, Conduct Communicat ion Skills trainings for faculties to generate team of trainers 2. This team of trainers will conduct trainings to the Medical officers	1. August 16- 19, 2022 2. Septem ber 15- 25, 2022	1. Executive director and Principal of NAIHS- COM 2. Logistics support from my institute 3. Senior level faculty Trainers for Communicat ion skills	1. Feedback from participa nts 2. Pre and post tests results 3. Participa nts activities during the training

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Gambhir Shrestha

Country: Nepal

Name of the Institute/ organization: Maharajgunj Medical Campus, Institute of Medicine

**Designation:** Assistant **Professor** 

On the basis of knowledge gained from the program write 1-2 goals and complete the action plan

below as to successfully implementation your learning's in 3 MONTHS DURATION

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to achieve the goals)	(By when you need to complete the tasks)	(What or who can help you complete tasks)	(How will you identify your success)
To submit the manuscript in the PUBMED journal	Analyse the data     on Head and     neck cancer     project	1July-15 July	SPSS Statistician	Result of the study
	2. Write manuscript	15 July-15 August	Author/Co- author	Draft Manuscript
	Circulate the manuscript to all authors	15-30 August	Author/co-author	All authors agree on the manuscript and revise the manuscript
	4. Select pubmed journal for submission and format the manuscript	1-7 September	Author/co- author	Final Manuscript for submission
	5. Submit the manuscript to the journal	7-10 September	Corresponding author	Manuscript submitted to the journa

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the participant: Dr. Jagat Prasad Deep

**Country:** Nepal

Name of the Institute /Organization: National Medical College and Teaching Hospital Birgunj, Nepal

**Designation:** Associate Professor & HOD

Objective (List of goals)	Task (what you need to achieve the goals)	Time Frame ( by when you need to complete the task)	Resources (What or who can help you complete tasks)	Success criteria (How will you identify your success)
To start the telemedicine services in Nepal specific for OB- GYN patients	<ol> <li>Meet the higher authority and discuss about telemedicine.</li> <li>Discussion with finance department for budget</li> <li>Recruit new staffs</li> <li>Manage digital and manual record</li> <li>To arrange a telemedicine room</li> <li>To arrange all Audio / Visual instruments</li> </ol>	<ol> <li>2 weeks</li> <li>3 weeks</li> <li>3 months</li> <li>3 months</li> <li>3months</li> <li>3months</li> </ol>	<ol> <li>Hospital         Director</li> <li>Hospital staffs</li> <li>Staffs from         management.</li> <li>Axillary health         worker</li> <li>Social media         and news         paper</li> </ol>	1. To establish a well- organized scientific Telemedicine center in Nepal 2. To provide the expert telemedicine opinion in OB- GYN pts.

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Leison Maharjan

**Country: Nepal** 

Name of the Institute/ organization: Patan Academy of Health Sciences (PAHS)

Designation: ENT, Head & Neck Surgeon/ Lecturer

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to achieve the goals)	(By when you need to complete the tasks)	(What or who can help you complete tasks)	(How will you identify your success)
A. (At personal level)  Increase publications in pubmed indexed journal as a first author	Prepare at least 3 manuscripts- i) 1 original article i.e from my thesis which has been pending since 3 years	By 3 <sup>rd</sup> month (Sept)  By 3 <sup>rd</sup> month (Sept)  By 2 <sup>nd</sup> month (Aug)	Thesis  Search reportable unique cases  Unique cases/ explore new ideas or viewpoint	Submission (even better if accepted) of the manuscript in pubmed indexed journal as a first author
B. (At institutional level)  Develop subspecialty focused faculties to improve service delivery & personal growth in Department of ENT- HNS (PAHS)	ii) 1 case report  iii) 1 case report or short communication/ view point  i) Discuss and convince all the colleagues of the Dept about the importance of subspeciality focused practise	August	Acceptance of this new idea by all the colleagues of our department and head of the dept.	All the faculties of our dept prioritizing the surgical procedures according to their areas of interest (subspecialty)  Implementation of the commitment as announced during IPHMDP
C. (At NMA level) Completing NMA's IPHMDP commitment	ii) Recognise subspeciality interest of each individual faculties and classify/ prioritize surgeries according their individual's sub- speciality interest.  Continuously remind fellow executives about the commitment/ mobilize NMA's staffs/ JNMA editorial board	September	Increase in number of surgery days/ fixing the surgery days according to the subspeciality.  NMA executive board members/ JNMA editorial board members	

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: DR LOCHAN KARKI

**Country: NEPAL** 

Name of the Institute/ organization: NEPAL MEDICAL ASSOCIATION

**Designation: PRESIDENT** 

Objective (List of goals)	Tasks (What you need to achieve the goals)	Time frame (By when you need to complete the tasks)	Resources (What or who can help you complete tasks)	Success criteria (How will you identify your success)
Editorial regarding     IPHMDP training to be     published	i) Decision to be made by NMA executive board meeting	25 <sup>th</sup> June, 2022	JNMA editorial board, IPHMDP experts	Publication in JNMA
	ii) Publication of the editorial	July Issue	JNMA editorial board, IPHMDP experts	Publication in JNMA
2. Publication of Special Edition	i) Decision to be made by NMA executive board meeting	25 <sup>th</sup> June, 2022	JNMA editorial board, IPHMDP experts JNMA editorial	JNMA special edition publication
	ii) Formation of the editorial board from India and Nepal	2 weeks	board, IPHMDP experts, Resource persons for editorial board	JNMA special edition publication
	iii) Manuscript preparation (Peer review, Pre- press work)	2 months	a) JNMA editorial board, b) IPHMDP experts and, c) IPHMDP participants	
	iv) Publication of special edition	3 months	JNMA editorial board, IPHMDP experts, potential authors	JNMA special edition publication

2	Collaboration with	i) Formation of	25 <sup>th</sup> June,	Members of	Visit of senior
3.	MOHFW, WHO, PGIMER IPHMDP, and other developmental partners to strengthen health system of Nepal	the expert team by NMA executive	25" June, 2022	Members of MOHFW, WHO, PGIMER IPHMDP, and other development partners, funder organization	policy makers, representatives of NMA, potential funders in Nepal at NHSRC.  (To strengthen the
		ii) Discussion with decision & policy makers from MoHP Nepal, funders in Nepal & India	2 Months		health system in Nepal focusing in issues like drugs availability, HR issues, etc.)
4.	Organizing leadership programs at various forums under banner of NMA in Nepal with the	i) Decision to form expert committee by NMA executive	25 <sup>th</sup> June, 2022	(Collaboration with) Experts, Donors, sponsors, resource persons from Nepal and	Organizing National Health Summit and capacity building of healthcare workers
	technical support of ITEC	ii) Formation of expert committee to organize leadership lectures for NMA National Health Summit	2 weeks September	India	
		iii) Conducting National Health Summit & TOT	2022		

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr. Rajya Khadka

Country: Nepal

Name of the Institute/ organization: Nepal Armed Police Force (APF) Hospital

Designation: Inspector doctor (Currently 1st year resident in MD Clinical Pathology)

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH, PGIMER CHANDIGARH $20^{\text{th}}$ -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr Rupesh Kumar Yadav.

**Country: NEPAL** 

Name of the Institute/ organization: National Trauma Center, (NAMS). Designation: Chief Consultant Anaesthesiologist, Department Head.

Objective	Tasks (What you need to achieve	Time frame (By when you	Resources (What or who can	Success criteria (How will you identify
(List of goals)	the goals)	need to complete the tasks)	help you complete tasks)	your success)
1) To strictly implement WHO SURGICAL SAFETY checklist for every patients who undergo any type of surgical procedures under Anaesthesia at Operation Theatre.	1) Training and development of WHO SURGICAL SAFETY checklist according to our feasibility.	1) In 1st 15 days - To present a powerpoint among all anaesthesia Residents regarding SURGICAL SAFETY CHECKLIS T. 2) In next 15 days- To present among OPD Staffs. 3) Convince hospital management and surgical colleagues in next 30 days. 4) In next 15 days do a pilot study and to address the huddles and identify the mistakes and correct those accordingly. 5) After 75 days to implement the SURGICAL SAFETY CHECKLIS T. 6) After 90 days to make it mandatory.	1) Anaesthesia Nurse. 2) Anaesthesia Medical Officer 3) Anaesthesia Residents 4) OPD Staffs. 5) Management 6) Presentations 7) Training Hall. 8) Budget.	1) To develop and fill a google form.



## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Leison Maharjan

**Country: Nepal** 

Name of the Institute/ organization: Patan Academy of Health Sciences (PAHS)

**Designation: ENT, Head & Neck Surgeon/Lecturer** 

Objective (List of goals)	Tasks (What you need to achieve the goals)	Time frame (By when you need	Resources (What or who can help you complete tasks)	Success criteria (How will you identify your success)
		to complete the tasks)	,	
<ol> <li>To decrease the mortality due to Rabies.</li> <li>To increase the coverage of post exposure prohylaxis (Anti-Rabies Vaccine) after animal bite.</li> <li>To enhance the knowledge and importance of Anti Rabies vaccine among general population</li> </ol>	1. Orientation about postexposure prophylaxis to general public, medical students who comes for their clinical posting and local pharmacies.  2. Increment in the number of Anti Rabies Vaccine service center.	It's ongoing process	1. Related stake holders 2. Hospital administrati on staffs 3. Government body (epidemiolo gy and disease control division).	1. Decrease in number of Rabies death. 2. Increase in number of person who get orientation about postexposu re prohylaxis

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

#### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr. Smrity Maskey

**Country: Nepal** 

Name of the Institute/ organization: KIST Medical College and Teaching Hospital

**Designation: Associate Professor in OBGYNAE** 

Objective (List of goals)	Tasks (What you need to achieve the goals)	Time frame (By when you need to complete the tasks)	Resources (What or who can help you complete tasks)	Success criteria (How will you identify your success)
1.Publish article (as criteria to become Professor)	<ol> <li>Select topic for research</li> <li>Proposal writing</li> <li>Apply for IRC from hospital</li> <li>Start research and collect data</li> <li>Enter data and data analysis</li> <li>Analysis final and article writing</li> <li>Applying to various journal after fulfilling their criteria</li> </ol>	1.1 month (July 2022) 2.1 month (august 2022) 3.3month (nov.2022) 4.1year (nov. 2023) 5.1month (dec. 2023) 6.I month (jan 2024) 7.6- 8month(july - sep 2024)	1. Budget	For 3month its receiving IRC letter from hospital Research board.

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

#### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr. Smrity Maskey

**Country: Nepal** 

Name of the Institute/ organization: KIST Medical College and Teaching Hospital

**Designation: Associate Professor in OBGYNAE** 

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to	(By when you	(What or who can	(How will you identify
	achieve the goals)	need to	help you complete	your success)
		complete the	tasks)	
		tasks)		
	<ol> <li>Select topic for</li> </ol>	1.1 month	<ol> <li>Budget</li> </ol>	
	research	(July 2022)	(printing of	For 3month its
1.Publish article	<ol><li>Proposal writing</li></ol>	2.1 month	performa-Rs.	receiving IRC letter
(as criteria to	<ol><li>Apply for IRC</li></ol>	(august	1000-2000)	from hospital
become	from hospital	2022)	2. Human	Research board.
Professor)	<ol><li>Start research</li></ol>	3.3month	resource	
	and collect data	(nov.2022)	(Residents,	
	<ol><li>Enter data and</li></ol>	4.1year (nov.	interns from	
	data analysis	2023)	the	
	<ol><li>6. Analysis final and</li></ol>	5.1month	department)	
	article writing	(dec. 2023)		
	<ol><li>Applying to</li></ol>	6.I month (jan		
	various journal	2024)		
	after fulfilling	7.6-		
	their criteria	8month(july		
		-sep 2024)		

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

#### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr. Smrity Maskey

**Country: Nepal** 

Name of the Institute/ organization: KIST Medical College and Teaching Hospital

**Designation: Associate Professor in OBGYNAE** 

Objective (List of goals)	Tasks (What you need to achieve the goals)	Time frame (By when you need to complete the tasks)	Resources (What or who can help you complete tasks)	Success criteria (How will you identify your success)
Medical Collage and Teaching Hospital establishment.	Full fledged 300 bed hospital set up followed by medical students enrollment.	3 years	University Board, Nepal Health Ministry, Nepal Education Ministry, Medical Education Commission Nepal, Nepal Medical council, Local Municipality Office	Issue of consent Letter from the authority.
100 bed hospital	Staff recruitment- Medical and para- medical	1 year	University Board - Hospital committee followed by university act.	Patients satisfaction.
300 bed hospital	Staff recruitment including administration, finance, Medical and paramedical staffs. Doctors-medical officer, specialized and super specialized. Nurse, Technician, driver, helper	2 year	University Board, Nepal Health Ministry, Nepal Education Ministry, Medical Education Commission Nepal, Nepal Medical council, Local Municipality Office.	Medical students end result and patient satisfaction.

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

#### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr Dipendra Pandey

**Country: Nepal** 

Name of the Institute/ organization: Trishuli Hospital, Nuwakot, Nepal

**Designation: Medical Superintendent** 

S.N.	Objective (List of goals)	Tasks (What you need to achieve the goals)	Time frame (By when you need to complete the tasks)	Resources (What or who can help you complete tasks)	Success criteria (How will you identify your success)
1.	To utilize biodegradable waste for energy generation	<ul> <li>Establish biogas plant</li> <li>Budget</li> <li>Trainings</li> <li>Dedicated staff</li> <li>Motivation to staffs</li> </ul>	3 months	<ul> <li>Hospital management committee</li> <li>Health Ministry (Province)</li> <li>Alternative Energy Promotion center Nepal</li> <li>Local municipality</li> </ul>	Using biogas generated from hospital waste to cook food in doctors' mess
2	To run Osteoporosis Prevention and Treatment Program	- DEXA scan machine - Trained manpower - Logistics and medicines - Trainings and motivation to staffs - Budget - Guidelines - Space	3 months	<ul> <li>Health ministry         (Province)</li> <li>Provincial Health         training centre</li> <li>Nepal Osteoporosis         society</li> <li>Local media</li> </ul>	- Establishing dedicated osteoporosis clinic from where patients can get free DEXA services and free antiosteoporotic medicines
	Teleconsultaion program	- Budget - Conceptual framework - Software/ mobile app - Hardwares - Separate space - Dedicated doctors - Trainings and motivation - Recruit IT officer	3 months	- Hospital management committee - Health ministry - Software company - Local hospitals (PHC, Health Posts) - Local government - Tertiary hospital - Medical colleges	Using software for medical consultation from health post and PHC to Trishuli Hospital.  Using software for medical consultation from Trishuli hospital to other tertiarty hospital

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

#### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr Pawan Kumar Hamal

**Country: Nepal** 

Name of the Institute/ organization: Trishuli Hospital, Nuwakot

**Designation: Senior Consulant Anaesthesiologist** 

On the basis of knowledge gained from the program write 1-2 goals and complete the action plan

below as to successfully implementation your learning's in 3 MONTHS DURATION

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to achieve the goals)	(By when you need to complete the tasks)	(What or who can help you complete tasks)	(How will you identify your success)
1. Develop a functioning critical care unit	1. Training and development of selected nursing staffs and medical officer.  2. Develop protocols for daily management of critically ill patients.  3. Orientation to consultants of specific department.	3-6 months	<ol> <li>Nursing staffs</li> <li>Medical officer</li> <li>Nursing in charge</li> <li>Consultants of specific departments</li> <li>Administration</li> <li>Finance department</li> <li>Strong commitments from medical superintendent.</li> </ol>	<ol> <li>Improvement in daily nursing care of patient</li> <li>Regular rounds and adherence to protocol.</li> <li>Training and development of new coming staff by trained staffs.</li> <li>Improved patient outcomes in terms of reduction in mortality and recovery status.</li> </ol>



## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

#### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr Sharad Chandra Baral

**Country: Nepal** 

Name of the Institute/ organization: Pokhara Academy of Health Sciences, Western Regional

Hospital, Pokhara, Nepal

**Designation: Physician / Focal Point for Telemedicine** 

Objective (List of goals)	Tasks (What you need to achieve the goals)	Time frame (By when you need to complete the tasks)	Resources (What or who can help you complete tasks)	Success criteria (How will you identify your success)
1. To Provide telemedicine services to the 11 satellite hospitals of Gandaki	Telemedicine committee, comprising the Head of each speciality, in the hospital will be formed.	1.2 <sup>nd</sup> week of July, 2022	1.Meeting, HOD of each specialty, Hospital Director, Telemedicine focal point	1.Telemedicine committee
Province.	2.Training of the consultants and third year resident of each department of the hospital, along with the telemedicine focal point of each of the satellite hospital	2.4 <sup>th</sup> week of July, 2022	2.Telemedcine expert form the central level, along with the Software designer, along with the proposed trainee, Budget for travel allowance, PPT	2.Competent HW in using the telemedicine software
	3.Rehearsal of the delivery of the telemedicine services between the hub and earlies to the satellite	3. 2 <sup>nd</sup> week of Aug, 2022	3.Telemedcine software, AV aids, Dedicated internet	4.Field visit report, with analysis and solutions to the challenges if any in service delivery
	hospitals  4.One day field visit of the Hub IT officer, along with the focal point of hub, along with that of provincial health directorate to each of the satellite hospital	4. 1 <sup>st</sup> week of Sept, 2022	4. Vehicle from provincial health directorate, along with the involved staff	5.Duty roster of each dept in the notice board of telemedicine unit
	5.Confirm the duty doctor of each specialty for providing the service	5.3 <sup>rd</sup> week of Sept, 2022	5.Duty roster of each dept, along with final meeting of the committee for service delivery	6.Number of patient taking the services per week -Number of specialty services consulted per week
	6.Initiation of telemedicine services to the satellite hospital on regular basis form 9 AM- 4 PM	6.4 <sup>th</sup> week of Sept, 2022	6.Internet, AV aids, On duty doctor of each specialty	-Number of Satellite hospitals taking the service per week

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

#### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr Surya Prasad Rimal

**Country: Nepal** 

Name of the Institute/ organization: BP Koirala Institute of Health Sciences, Dharan, Nepal

**Designation: Assistant Professor** 

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to achieve the goals)	(By when you need to complete the tasks)	(What or who can help you complete tasks)	(How will you identify your success)
1. Personal Achievement: Fellowship in Gynecological Oncology	<ol> <li>Study: 1 hour everyday, 5 days a week.</li> <li>Search and apply in different renowned institute</li> </ol>	December 2022	Professors working on or related with the university	Selection for the program.
2. Happy Family	Time to be spent with spouse  Story telling and time to be spent with kids  Time to be given to parents	Immediately	Wife, kids, parents	
3. Happy Profession	Planned SIS and other classes for students	Immediately	Softwares (classtime), books	Pre test and post test
4. Successful leader	Leadership training to other faculties at my institute	3 months	E learning platform of eITEC	Completion of training by faculties

## DEPARTMENT OF COMMUNITY MEDICINE & SCHOOL OF PUBLIC HEALTH PGIMER CHANDIGARH

#### 20th -25th June 2022

#### Your Commitment to taking the Idea to Implementation

Name of the Participant: Dr Shiva Ram Srimal

**Country: Nepal** 

Name of the Institute/ organization: Sahodar community Hospital

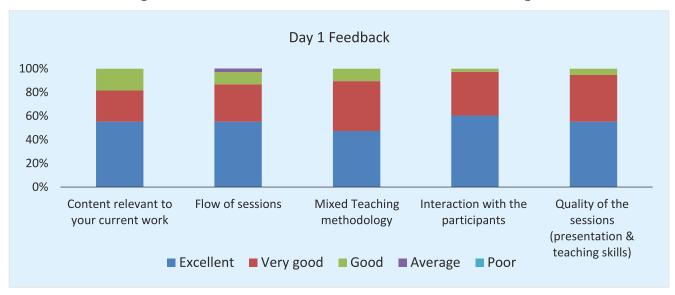
**Designation: Health Services Director** 

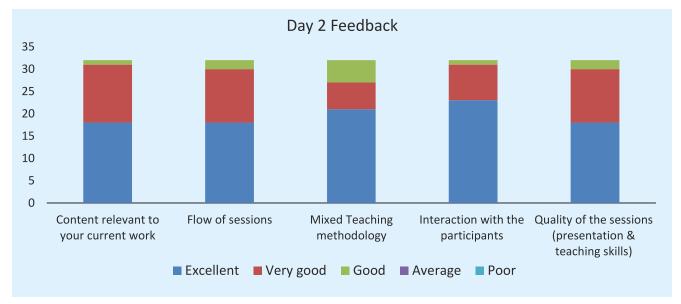
On the basis of knowledge gained from the program write 1-2 goals and complete the action plan

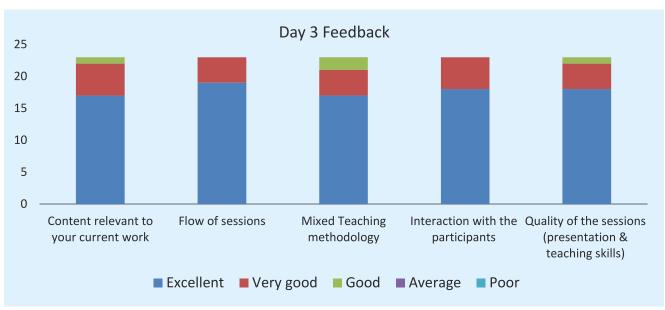
below as to successfully implementation your learning's in 3 MONTHS DURATION

Objective	Tasks	Time frame	Resources	Success criteria
(List of goals)	(What you need to achieve the goals)	(By when you need to complete the tasks)	(What or who can help you complete tasks)	(How will you identify your success)
Conducting Leadership and management Training in Sahodar Hospital	Planning, Budgeting, fixing Venue and Date, Designing and developing training materials, find out resource persons, Publicity,  Preparing resource materials, find out participants.	6mts	Colleagues, Organization, Doctors, Hospital Manager, Accountant, Budgets, Experts in leadership and management	Could conduct the event  Organizational improvement  Change of behavior in participants

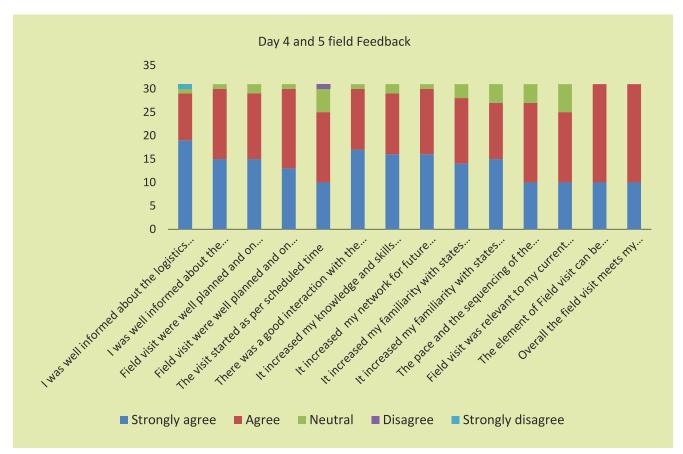
### **Day wise Quantitative Feedback Analysis**





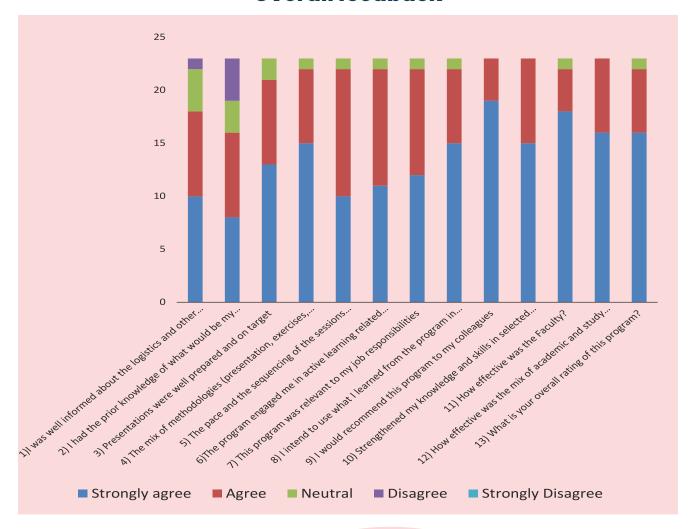


### **Quantitative & Qualitative Field Feedback**



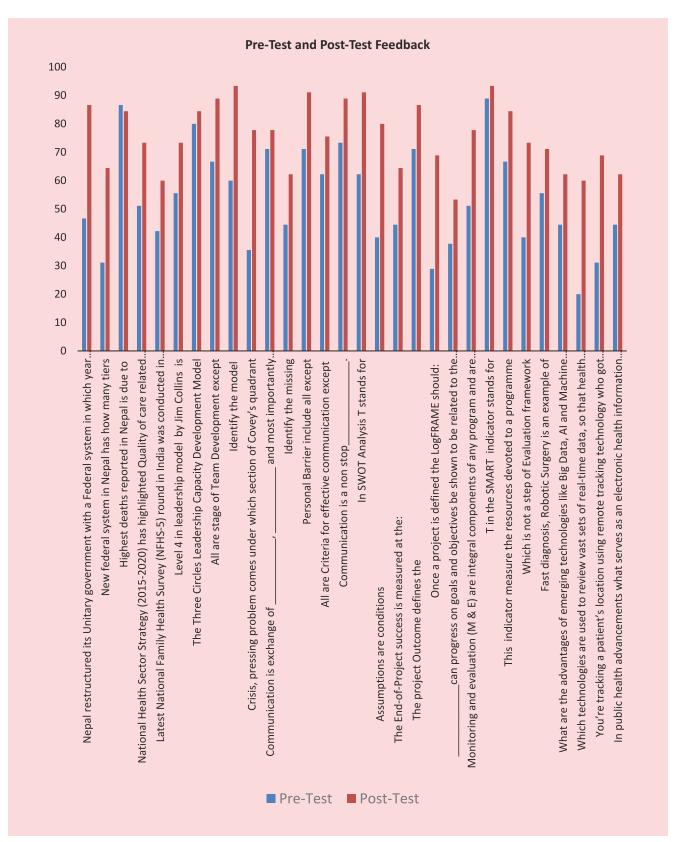
- 1. Dr Omesh and Dr Gopal sir, presentation MADE ME MOTIVATED to do something similar in Nepal too.
- 2. Coordination and Management part was excellent by the organizer
- 3. High output with limited human resources, proper use of technology
- 4. Well planned and executed, looking for future collaboration
- 5. A bunch of things can be replicated in our health system
- 6. Inspiring lectures and in-depth understanding through examples were best
- 7. The cultural night was the cherry on the cake. Choice of place 'Shimla', was the best. Awesome weather
- 8. Visit to Indira Gandhi Medical College, Shimla, and the highly enlightening presentations on good practices in the Indian Health System.
- 9. Experiences of professionals who succeeded against all odds motivated the participants
- 10. Visit to the different level of centres were useful in understanding the lower-level healthcare system

#### **Overall feedback**



- 1. Lectures were well prepared, and interactive. Relevant topics by the pioneers in the respective field
- 2. Highly engaging, interacting, multidimensional, and eye-opening
- 3. Mentors and methodology brought out the best in us.
- 4. Hospitality by the organizers was excellent
- 5. Group work was exciting and led to brainstorming on the topic
- 6. Leadership & Management aspects were well understood in the course. Interaction with different facilitators led the leadership skill bring out
- 7. The logical framework was beautifully taught and will use in my practice too.
- 8. Active participation by all participants made the interesting discussions ad fruitful
- 9. Practical lessons and games were the key highlights of the program
- 10. Perfect blend and practical approach to problem-based learning. Two-way involvement led to extraordinary learning and interactions
- 11. Ownership to the participants and despite problems, the facilitators never showed their panic self to us, which was a lesson to learn for all life situations

### **Program Evaluation**



Despite the widespread recognition of importance of leadership and management skills for improved quality of services in health care organisations, there are certain barriers in this context. These include role conflict, poor level of communication, leadership preparation and interdisciplinary relationships. This program emphasized upon the nurturing leadership and management skills in order to address public health challenges and strengthen the existing health system.

The major recommendations for the program was to give due consideration towards strengthening of current public health management program for graduate and post graduate education; its integration in general health services for attainment of senior management positions; scaling up of the program at national and international level; need-based changes in the current program for addressing local challenges; increasing reach of program by providing online platform; and collaboration with various stakeholders-nationally and internationally for increasing visibility and strengthening health systems across the globe.

- 1. Strengthening of public health management program at graduate and post graduate public health education: Public health education of a country must amalgamate adequate content and approaches of public health management (PHM) at graduate and post-graduate level in context of their country settings. The curriculum of PHM should be designed in consultation with various stakeholders and approved by medical council and other statutory bodies. The facilitators should be trained in PHM on teaching methods, which should include lecture accompanied with role plays, video lessons, management games, quiz etc.
- 2. Integration of PHM in general health services for attainment of senior management positions: Training of senior medical officers of different states on PHM should be mandatory for attaining post of civil surgeons and other senior positions. The trainings should be conducted at few designated institutes of a country, preferably Institutes of National Excellence, for a fixed period (15 days to one month) using a standard methodology.
- 3. Scaling up of the program at state, national and international level: Considering the usefulness and need of PHM programs in current scenario, along with growing interest among health professionals (as shown by increasing nominations of participants from different states and country in last 13 International Public Health Management Development Programs-IPHMDP conducted by PGIMER, Chandigarh in last sevens years), there is a need to scale up such programs. At state level, National Health Missions (NHM) or Public Health Service Commissions can fund the program for senior program managers of their states / countries for a period ranging from 3-5 years. At national level, NHMs can

sponsor the senior administrators and program managers (Director and Deputy Directors) from the states or direct NHMs of different states to send the nominations for IPHMDP at PGIMER, Chandigarh. At international level, organisations which wish to pursue north-south and south-south partnerships can collaborate with PGIMER, Chandigarh for scaling up PHM program globally.

- 4. Need-based changes in the current program for addressing local challenges: The content of current IPHMDP program should be tailored based upon the context and need of participants, organisation and country's public health situations. The approaches should not only be didactic lectures but should be supplemented with discussions, role plays, group work, case studies, demonstrations etc. The case studies and examples should focus on current public health challenges of the participating countries.
- 5. **Increasing reach of program by promoting online platform:** The promotion of online program (e-IPHMDP) can facilitate participation of more candidates who are unable to attend because of time and resource constraints.
- 6. **Collaboration with various stakeholders nationally and internationally:** There is a need for increasing participation of various stakeholders (Ministries of Health Ministry of External Affairs, WHO, developmental partners, management and research institutes etc.) in IPHMDP for increasing visibility and robustness to the program.

The partners may provide financial or/and technical support to IPHMDP for its sustenance and strengthening health systems across the globe. Further, exchange programs between various participatory countries and PGIMER can also be facilitated by Ministry of External Affairs, Govt. of India.

- 1. There has been a growing interest in the program which is being depicted by ever increasing nominations of participants from different states and countries since initiation of IPHMDP in May 2016.
- The content and approaches used during the program has received appreciation from facilitators and participants. Moreover, the program has been cited as very well managed and organized. The time management and team work has been exemplary.
- 3. The resource persons for the program are leading personalities in the respective areas of public health management. As per the feedback of participants, they were very interactive, effective in engaging all the participants in group discussions and used innovative teaching methodologies.
- 4. The hospitality displayed by the program organizers was beyond appreciation. The accommodation, local travel and food were above par as per participants.
- 5. The sessions planned during the program were so nicely arranged and contextually placed that they can be replicated in other settings as well.
- 6. Diversity of participants in program from different countries and profession ensured peer learning. Many good practices were shared amongst participants which is expected that the delegates will replicate in their settings.
- 7. The program acted as platform to forge new connections and extend network across the globe. It gave participants the drive to ensure a good health management system in their work setups.
- 8. The action plan submitted by participants at the end of program based upon their local work-place settings guaranteed that the program will bring a significant change in the public health management practices across the world.













































**♦**The Indian **EXPRESS** 

अमर उजाला

healthcare healthcarry programme to improve facilities in Nepal, India

EXPRESS NEWS SER

6-day International Public Health Manageme Development Programme by PGI concludes

PUNJAB EXPRESS BUREAU

Chairman, National Tuberculosis Programme, Gel has congratulated

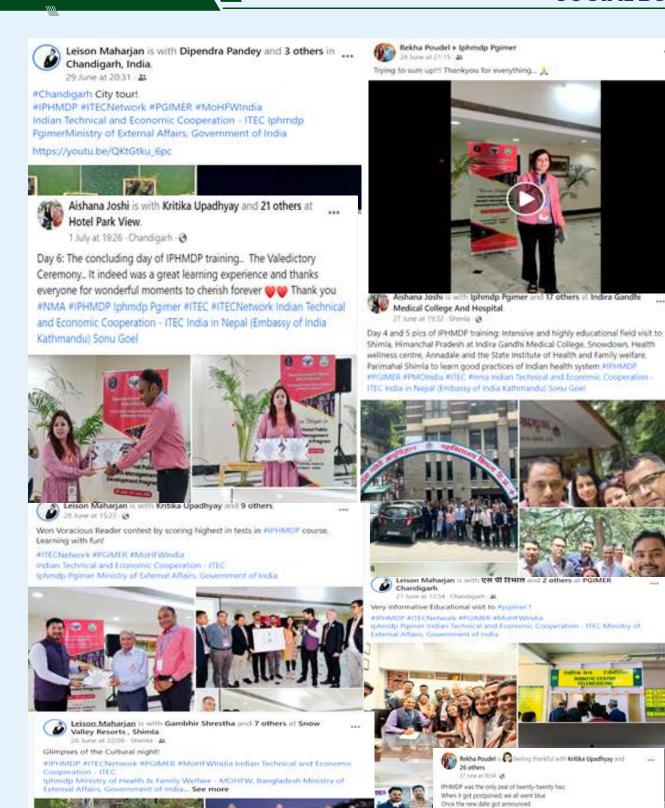


Gol has congratelated PGMKE on the successful completion of the 6-Day International Public Health Management Development Programme in Losis Programs Gol, guest Mesisty officenses Mesisty officenses Missing programme in India Public Health Management a diversity of cultures, Development Programs United Republic Peaklin management as diversity of cultures, Development Programs day sking mith the learnings of public Peaklin management as the Complete Programs of Computing Public Peaklin Management Public Peaklin Management Public Peaklin Management Public Peakl









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We all jumped & our heart bounced... See more

OO Kirthia Upadhyay, Krati Sharma and 76 others

View 10 previous comments.

Like Reply 1-

Comment

Sentwana Parajuli. Wonderful depiction, says it all about your experien you always have been good at words, I know that:

Retha Poude!
Santasiana Parajulii thanisyou 
Like Besty !=

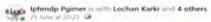
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With a comment.



Senta Chauban uclded 2th runw photos. 26 Juliu al 2010 : 35

Meanierizing collections from Nepal to Chandrigrah during program IPHMDP. Thank you intends in jime for organizing this program beautifully and successfully. With a heavy heart I am sniding my journey Today after 6 days of journey in India with warm welcome, unforgettable meanories with these beautiful people and place. Special thanks to Soou Goel Kirika Upadhysy for this opportunity for giving chance to explore India and network building to beatiful people.



Nepal Medical Association felicitated the organizers for their effortiess work during program on the final day of 6 days of elitable program organized by emilitable in support of Instan Bestinial and Economic Cooperation - ITEC Ministry of External Affairs, Geomment of India Dr. Sens Geofficials Upsiditying Detantia Menta India in







lphmdp Pgimer is with Aishana Joshi and 3 others.
25 have at 2015. @

Delegates from #Neps! awarded with course completion certificate in the valedictory ceremony on the final day of 6 days of #IPHMOP program organized by #PGIMER in support of @ITECnetwork Ministry of External Affairs, Government of India India in Nepal (Embassy of India Kathimandu) Iphindp Pgimer Ministry of Health & Family Welfare - MCHEFW, India PMO India



Womens of various competitions held during the co-varied ctory ceremony on the time day of 8 days of P buspert of children features and Science 1, Cooperati

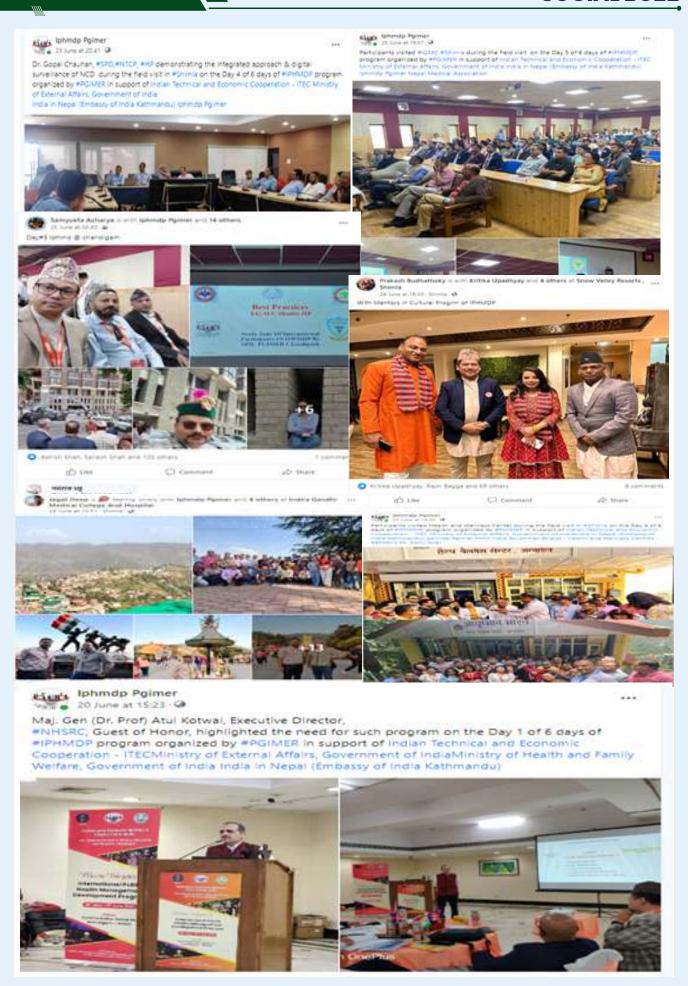


Alapin I











PREMOR Syphistic Fun 21

Dr. Poonem and Dr. Bina gave a quick recap of Day 1 on the Day 2 of 6 days of smithton program organized by information support of drift Chatavara



IPHMDP griphmdp - Jun 22

Dr. Sonu Goel briefed the concept of Monitoring & Evaluation in Healti on the Day 3 of 6 days of #IPHMDP program organized by #PGIMER is support of @TECnetwork @MEAIndia @PhoTSonuGoel @IS\_ITEC @Coa\_mas @IndiaInNepal @iphmdp @PMOIndia @anibikramkark2 @centhsuration



IPHMOP grammits: Jun 21
Participants visited telemeticine and tele evidence centers in IPPOMER
during the field visit on the Day 2 of 6 days of survivible program organized
by IPPOMER in support of OTECONTON-N BUILDINGS BEPUTERWIGGE
WIS TEC Indian real discontinger gramming.



EPHMOP depends - Jun 21

Participants engaged in communication and team building exercises on the Day 2 of 6 days of 8001MDP program organized by AHOMER in support of SITECONFINES EMFANCES REPORTS AND ASSESSED ASSESSED



#### **Program Committee**



Dr. PVM Lakshmi

Professor of Epidemiology and Biostatistics
Department of Community Medicine & School of
Public Health

PGIMER, Chandigarh

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- Medical doctor with MD in Community Medicine with 15 years of experience
- Member of Professional Bodies: IEA, IPHA, IAPSM, Indian Society for Malaria and Other Communicable Diseases
- Areas of Specialization: Epidemiology, Communicable Diseases and Public Health
- Nodal Person for Regional Institute for HIV Sentinel Surveillance in North India



Dr. Sonu Goel

Professor of Health Management
Department of Community Medicine & School of
Public Health, PGIMER, Chandigarh

**Mobile:** +91 9914208027

Email Id: sonugoel007@yahoo.co.in

- Medical doctor with MD in Community Medicine with 20 years of experience
- Adjunct Associate Clinical Professor in the School of Medicine, Faculty of Education & Health Sciences, University of Limerick
- Honorary Professor, Faculty of Human and Health Sciences, Swansea University, United Kingdom
- Fellowships of IPHA, IAPSM, IMSA and MNAMS
- Alumnus of John Hopkins School of Public Health, Baltimore, US and Maastricht University, The Netherlands
- Awarded public health excellence of India by Hon'ble Union Minister of Health & Family Welfare -2014

#### **Program Committee**



**Dr. Ravindra Khaiwal**Professor of Environment Health
Department of Community Medicine & School of Public Health
PGIMER, Chandigarh

Mobile: +91 9876346309 Email Id: khaiwal@yahoo.com

- M. Tech, Doctor of Science & specialization in Analytical Chemistry from of Antwerp, Belgium
- Awarded Environmentalist of the year 2007: Around the Globe and finalist for NASI- Scopus Young Scientists Award
- He is awarded top Environmental Sciences Scientist in India in 2001
- Areas of Specialization: Environmental Pollution and Health, Air and Water quality monitoring.
- Contributed in various International Projects like InterREG, ENVIRISK, and MEGAPOLI



**Dr. Shankar Prinja**Professor of Health Economics
Department of Community Medicine & School of Public Health
PGIMER, Chandigarh

Mobile: +91 9872871978
Email Id: shankarprinja@gmail.com

- Medical Doctor with M.D in Community Medicine, DNB, MSc (Health economics)
- Executive Director (HP&QA), National Health Authority, Ayushman Bharat PM-JAY, Government of India, New Delhi
- Temporary Advisor to the WHO SEARO (HTA) and member of the Government of India's Task Force on Costing of Health Care Services
- Developed India's first online training program in Basic Health Economics



**Dr. Tarundeep Singh**Associate Professor of Community Medicine
Department of Community Medicine School of Public Health
PGIMER, Chandigarh

**Mobile:** +91 9646321316

Email Id: tarundeep.singh@gmail.com

- Medical Doctor with M.D in Community Medicine
- Immense teaching experience of twelve years in PGIMER, Chandigarh
- Area of Interest Geriatrics Hospital Administration Health System Management and Family Medicine

#### **Program Director**



**Dr. Sonu Goel**Professor of Health Management
Department of Community Medicine & School of
Public Health, PGIMER, Chandigarh

Mobile: +91 9914208027

Email Id: sonugoel007@yahoo.co.in

- Medical doctor with MD in Community Medicine with 20 years of experience
- Adjunct Associate Clinical Professor in the School of Medicine, Faculty of Education & Health Sciences, University of Limerick
- Honorary Professor, Faculty of Human and Health Sciences, Swansea University, United Kingdom
- Fellowships of IPHA, IAPSM, IMSA and MNAMS
- Alumnus of John Hopkins School of Public Health, Baltimore, US and Maastricht University, The Netherlands
- Awarded public health excellence of India by Hon'ble Union Minister of Health & Family Welfare -2014

#### **Program Coordinator**



Dr. Kritika Upadhyay

Department of Community Medicine & School of

Public Health

PGIMER, Chandigarh

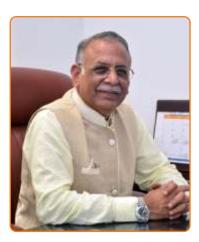
**Mobile:** +919914514584

Email Id: kritikau0@gmail.com

- Dental doctor with Master degree in Public Health
- 5+ years of experience in Public Health
- Program Coordinator for courses running under the banner of International Public health management development program
- Experience of implementation various national health programs, and managing various research projects and conducting teaching and training.

#### **Program Facilitators**





#### Dr. Sanjiv Kumar

Former Director, International Institute of Health Management and Research in New Delhi. He was an Adjunct Professor (Leadership, Global Health & Strategic Management) at INCLEN Institute of Global Health & Executive Director at National Health Systems Resource Centre, Delhi. He did his MBBS and MD from AIIMS, New Delhi, DNB in MCH and MBA in Strategic Management. He has 41 years of experience in public health across 29 countries. He led a team of 120 staff to provide technical support to Ministry of Health and Family Welfare and 36 state and UTs governments in India. He has published more than 100 papers in scientific and popular magazines and chapters in books. He has received many international and national awards in recognition of his contribution to public health in India and abroad.

#### Prof. Rajni Bagga

Former Professor and Head at Department of Management Sciences at NIHFW. Did her Doctorate in Psychology from Punjab University Chandigarh and started her career in Dept. of Psychiatry PGIMER, Chandigarh. She has the additional qualification of Post Graduate Degree in Human Resource Management and Public Relations. Professional carrier spanning over 30 years mainly devoted to developing and carrying out in-depth research studies in the health sector, particularly in Human Resources in Health, gained experience conducting collaborative research studies with other leading Institutions and the International Development partners. In the last decade, has carried out research studies at the national level on "Assessment of Nursing Management Capacity and Critical review of Nursing and Midwifery in India" with the support of WHO and SIDA and ICMR. These research studies have won been widely acclaimed both in India and Internationally.







#### Major General (Prof.) Dr. Atul Kotwal

Executive Director NHSRC India. He is an Indian epidemiologist with a Postdoctoral fellow in the epidemiology Clinical Epidemiology Unit, All India Institute of Medical Sciences, New Delhi. His achievements include research in injection practices; Community oncology, substance abuse; tobacco use; blood coagulation disorders at high altitudes; Human Immunodeficiency Virus/HBV/HCV behavioural surveillance, health program evaluation, psychiatry. Decorated Sena Medal (Gallantry) President of India, Commendation Indian Army; recipient Best Paper award, Armed Forces Medical Services, 2004. He had worked on the position Deputy assistant director health Indian Army, Allahabad, India, 1992—1995, senior special public health Ramgarh Cantt, India, 1995—1997. Consultant public health Botswana Defence Force, Gaborone, Botswana, 1997—2000. Senior special public health Indian Army, Udhampur, India, 2000—2001.



#### **Program Facilitators**





#### Prof. Sonu Goel

Professor of Health Management, Department of Community Medicine & School of Public Health PGIMER, Chandigarh. He is a Medical doctor with MD in Community Medicine with 18 years of experience. He has Fellowships of IPHA, IAPSM, IMSA, and MNAMS and is an Alumnus of John Hopkins School of Public Health, Baltimore, US, and Maastricht University, The Netherlands. He was Awarded public health excellence of India by Hon'ble Union Minister of Health & Family Welfare in 2014. He holds the position of Adjunct Clinical Associate Professor, University of Limerick, Honorary Professor, Swensea University, United Kingdom. He is Director of e-Resource Centre for Tobacco Control, e-Learning for Public Health, International Public Health Management Development Program (by Ministry of External Affairs, Govt. of India), and Vice-Chair- at Tobacco Control Section, The Union.





#### Prof. Surya Narayan Panda

Professor and Director Research, Chitkara University, Punjab. He is Principal Investigator /Co-Principal Investigator of Six major projects funded by Ministry of Science and Technology Govt of India worth Rupees 3.5 Crore Plus. He has more then 29 years of Teaching/ Administration and Research experience. 13 Ph.D. (Computer Science) scholars, 20 M.Phil and M.Tech Scholars awarded under his guidance. He traveled USA, Australia, New Zealand, Malaysia, Thailand with high-level delegation and Visiting Professor in many foreign Universities. He is now working towards developing innovative technologies and products based on the Internet of things, Cloud Computing Technology, and Artificial Intelligence. He is the founder Director of Centre of Excellence "IOT and Cloud Computing Lab" in Chitkara University, Punjab. He is expertized in Cyber security, AdvancedComputer Network, Algorithm Design, and Operating systems. He has filed 76 patents, 26 patents published/granted, 150+ plus International publications, and edited 5 books in the relevant area like Healthcare, Agriculture and Rural Develoment etc. He got Millennium Alliance Award from FICCI and the Ministry of Science and Technology, Govt. of India in 2017.



#### **Organizing Committee**



**Dr. Kritika Upadhyay**Program Coordinator & Scientific Manager



**Dr. Nidhi Jaswal** Scientific Manager



Mr. Rajeev Choudhary
Travel and Accommodation
Manager



**Dr. Kanika Mehta**Registration, Social Media and feedback

#### **Program Participants**



Aishana Joshi Consultant General Practitioner Department of Emergency Nepal



Anupama Suwal Dangol Gynaecologist Venus Hospital Nepal



Amar Shrestha
Junior Consultant
Department of ENT-HNS
Nepal



Bipin Kumar Shrestha Medical Officer Nepalese Army Institute of Health Sciences Nepal



Anil Bikram Karki Senior Consultant Department of Surgical Oncology, Head and Neck Surgery Nepal



Ashish Shah Medical Officer PHC, Out Patient Department Nepal



Atit Poudel
Senior Consultant
Department of Obstetrics and
Gynecology, Nepal



**Badri Rijal**Chief Consultant
Department of Orthopedic and
Trauma Surgery, Nepal







#### **Program Participants**



**Bina Shrestha**Consultant Obstetrician-Gynecologist
Department of Obstetrics and Gynecology
Nepal



Bipesh Acharya Hospital Director Hospital Administration Nepal



36

**Biswa Dawadi**Consultant Family Physician
Department of Emergency
Nepal



**Dipendra Pandey**Medical Superintendent/Director
Department of Orthopedics
Nepal



Hemanta Bikram Dahal Medical Officer Department of Emergency Nepal





Indu K.C. Academic Chief Department of Internal Medicine Nepal



Jagat P Deep Associate Professor Department of Obstetrics and Gynecology Nepal



Juli Roy Medical Officer Department of Emergency Nepal



### **Program Participants**



**Kabir Thakali** Associate Professor Department of Emergency Nepal



**Kirtipal Subedi**Senior Consultant
Department of Obstetrics and Gyanecology
Nepal



**Kumar Roka** Associate Professor Department of Medicine Nepal



**Lochan Karki** Associate Professor Department of Medicine Nepal



Milan Chandra Khanal NMA, Chief administrative Officer Administration and Management Nepal





**Dilip Kumar Devankar** Medical Officer Nepalese Medical association Nepal



Parth Guragain Academic Incharge Department of Community Medicine Nepal



Pawan Kumar Hamal Assistant Professor Department of Anaesthesia Nepal



# **Program Participants**



Gambhir Shrestha Assistant professor Maharajgunj Medical Campus Nepal



Poonam Sharma Registrar Departmement of Pediatrics Cardiology, Nepal



(a)

**Prakash Budhathoky**Chief Consultant, Dental Surgeon
Department of Oral Health
Nepal



Pramod Joshi Medical Superintendent Department of Orthopedic Surgery Nepal



**Leison Maharjan**ENT Specialist
Patan Academy of Health Sciences
Nepal





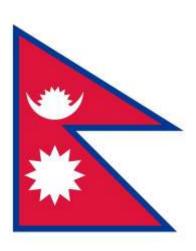
Rupesh Kumar Yadav Chief Consultant National Trauma center Nepal



Rajesh Yadav Associate Professor Department of Anesthesia Nepal



Rajkumar Dangal Hospital Clinical Chief Consultant Department of Emergency Nepal



# **Program Participants**



Rajya Khadka Inspector Doctor (Medical Officer) COVID ward Nepal



Rakesh Sah Junior Consultant Department of Surgery Nepal



Rekha Poudel
Consultant gynaecologist
Department of Obstetrics and
Gyanecology, Nepal



Sailesh Shah House Officer Department of Emergency Nepal



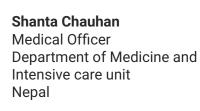




**Samyukta Acharya** Head of the Department Department of Anesthesia Nepal



Sanjeeb Tiwari Assistant Professor Department of Emergency Nepal







**Sharad Baral**Physician, COVID 19 focal person
Department of Medicine
Nepal

# **Program Participants**



Shiva Ram Srimal Health Service Director Department of Emergency Nepal



Shrawan Kumar Mandal Medical Officer Department of Emergency Nepal



Smrity Maskey Associate Professor Department of Obstetrics and Gyanecology Nepal



Surya Prasad Rimal Assistant Professor Department of Obstetrics and Gyanecology Nepal



**Suzit Bhusal**Clinical Research Officer
Research & Publication
Nepal



Yoveen Yadav Field Medical Officer Health Emergency Nepal





# **Feedback Form**

# **Module wise Feedback Form**

This feedback is to assess whether the learning objectives of the module were achieved. Kindly reflect carefully. Tick  $(\checkmark)$  mark on the scale of 1 (poor) to 5 (excellent)

Particulars	18	2	3	4	5©
Content relevant to your current work					
Flow of the module					
Mixed teaching methodology					
Interaction with the participants					
Quality of session (presentation & teaching skills)					
Write two points you really liked about today's sessi	on?	1	l	L	L
1.	2.				

# Field visit Feedback Form

This feedback is to assess whether the learning objectives of the field visit was achieved. Kindly reflect carefully. Tick( $\checkmark$ ) mark on the scale of 1 (poor) to 5 (excellent)

S.No	Particulars	18	2	3	4	5©
	Prior to the visit					
1	I was well informed about the logistics and related information about the					
	field visit					
2	I was well informed about the objective of the field visit					
3	Field visit were well planned and on target					
	During the visit				I	
4	The visit started as per scheduled time					
5	There was a good interaction with the resource person during the field visit					
6	It increased my knowledge and skills in selected related to the program					
7	It increased my network for future collaboration					
8	It increased my familiarity with states best practices in selected areas of					
	Public health Management					
	Post field visit	1		1	I.	
9	The pace and the sequencing of the sessions facilitated easy transfer of					
	learning inputs to me					
10	Field visit was relevant to my current work					
11	The element of Field visit can be utilized in my setting					
12	Overall the field visit meets my expectations?					

- 13. What are the two things you really like about this visit?
- 14. Any suggestions you would like to offer for future visits

# **Feedback Form**

# **Overall Feedback Form**

This feedback is to assess whether the learning objectives of the program were achieved. Kindly reflect carefully. Tick ( $\checkmark$ ) mark on the scale of 1 (poor) to 5 (excellent)

S.No	Particulars	18	2	3	4	5©
1	I was well informed about the logistics and other information about the program before I came					
2	I had the prior knowledge of what would be my "take -away" from the course					
3	The venue of the course had all the requisite facilities and necessary comforts					
4	Presentations were well prepared and on target					
5	The mix of methodologies (presentation, exercisesase studies) used in this course was effective					
6	The program overcome language & other barrier & facilitator understanding					
7	The pace and the sequencing of the sessions facilitated easy transfer of learning inputs to me					
8	The workshop program engaged me in active learning related to its goal					
9	The course met its stated objectives					
10	This course was relevant to my job responsibilities					
11	I intend to use what I learned from the course in my work					
12	The resources/material/approaches provided will be helpful in my program settings					
13	I would recommend this course to my colleagues					
14	The course help me in developing networks & relation with other participants					
15	The number of participants in the course was appropriate					
16	Increased my familiarity with state of the art/best practices selected areas of Public Health Management					
17	Strengthened my knowledge and skills in selected area of Public Health Management					
18	Increased my knowledge and skills to develop strategies to develop to counter the Public Health problems in my country					
19	How effective was the Faculty?					
20	How effective was the Support Team?					
21	What is your overall rating of this course?					

- 22. What are the three things you really like about this program?
- 23. Any suggestions you would like to offer for future programs

#### Unit 1: Strengthening the health care system of Nepal?-Learnings from India

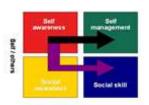
- Nepal restructured its Unitary government with a Federal system in which year which was followed by adoption of its constitution in 2015
- a) 2010
- b) 2011
- c) 2008
- d) 2007
- 2. New federal system in Nepal has how many tiers
- a) Three
- b) Four
- c) Five
- d) No tier system
- 3. Highest deaths reported in Nepal is due to
- a) Communicable diseases
- b) Non Communicable diseases
- c) Maternal and Child Health
- d) Injuries

- National Health Sector Strategy (2015-2020) has highlighted Quality of care related challenges except
- a) HRH shortfall
- b) stock-out of drugs and commodities
- c) Less incentive to staff
- d) poor physical and utility infrastructure
- 5. Latest National Family Health Survey (NFHS-5) round in India was conducted in which year
- a) 2019-20
- b) 2020-21
- c) 2017-18
- d) 2016-15

#### Unit 2: Management and leadership approaches in health care settings

- 1. Level 4 in leadership model by Jim Collins is
- a) Executive
- b) Competent manager
- c) Contributing team member
- d) Effective Leader
- 2. The Three Circles Leadership Capacity Development Model
- a) Individual Domain, team and Organisation domain, Environmental Domain
- b) Self-Domain, team and Organisation domain, External Environmental Domain
- c) Self-Domain, team and Organisation domain, Internal Environmental Domain
- d) Individual Domain, team and Organisation domain, Internal Environmental Domain
- 3. All are stage of Team Development except
- a) Forming
- b) Storming
- c) Performing
- d) Understanding

4. Identify the model



- a) Leadership Model
- b) Emotional Intelligence model
- c) Team building model
- d) Managerial skill model
- 5. Crisis, pressing problem comes under which section of Covey's quadrant
- a) I
- b) II
- c) III
- d) IV

#### **Unit 3: Communication and Advocacy**

- Communication is exchange of \_\_\_\_\_\_ and most importantly feelings.
- a) Issues, talk
- b) Ideas, thoughts
- c) Information, Ideas
- d) Discussion, issues
- 2. Identify the missing



- a) Feedback
- b) Transmitter
- c) Message
- d) Filter

- 3. Personal Barrier include all except
- a) Beliefs, Perceptions
- b) Language
- c) Inferences
- d) Emotions
- 4. All are Criteria for effective communication except
- a) Message received close to message sent.
- b) Should involve minimum encoding
- Non-verbal messages should not congruent with verbal messages
- d) Should elicit desired response
- 5. Communication is a non stop\_\_\_\_\_
- a) Paper
- b) Process
- c) Plan
- d) Programme

### Unit 4: Making strategic and operational plans- applications and tools

- 1. In SWOT Analysis T stands for
- a) Time
- b) Threat
- c) Trust
- d) Task
- 2. Assumptions are conditions
- a) That are outside the real concerns of the project management and can be ignored until final evaluation
- b) That are essential to the causal logic of the project but outside the project control
- c) That are best analyzed in isolation of the project design to assure transparency
- d) That used to be considered important but can be handled outside the project design discussions
- 3. The End-of-Project success is measured at the:
- a) Output level
- b) Activity level
- c) Outcome level
- d) Goal level

- 4. The project Outcome defines the
- a) Change in behavior of the client
- b) Change in institutional performance
- c) Change in a client's system performance
- d) Any of the above
- 5. Once a project is defined the LogFRAME should:
- a) Not be altered
- b) Be refined during implementation as a result of team learning
- c) Be discarded and implementation plans used it is place
- d) Published immediately as a good practice example

#### **Unit 5: Monitoring and Evaluation of programs**

1.	can progress on goals and	3.	Tin the SMART indicator stands for
	objectives be shown to be related to the	a)	Tangible
	program, as opposed to other things that are	b)	Time bound
	going on at the same time?	c)	Torrent
a)	Effectiveness	d)	Trustworthy
b)	Implementation		
c)	Efficiency	4.	This indicator measure the resources devoted
d)	Attribution		to a programme
		a)	Output
2.	Monitoring and evaluation (M & E) are integral	b)	Process
	components of any program and are critical to	c)	Input
	soundplanning.	d)	Outcome
a)	Strategic		
b)	Operational	5.	Which is not a step of Evaluation framework
c)	Tactical	a)	Describe the program
d)	Contingency	b)	Justify conclusion
		c)	Engage stakeholder
		d)	Ensure sharing feedback

#### Unit 6: AI and its application in healthcare

- 1. Fast diagnosis, Robotic Surgery is an example of
- a) Al in healthcare
- b) Al in finance
- c) Alin computer vision
- d) Alin security
- 2. What are the advantages of emerging technologies like Big Data, Al and Machine learning in public health sector?
- a) Increased community reach
- b) Unbiased data collection
- c) Timely care to remote areas
- d) All of the above
- 3. Which technologies are used to review vast sets of real-time data, so that health experts can identify at-risk populations for any number of diseases, from diabetes to heart disease.
- a) AI & Machine Learning
- b) Big Data & cloud
- c) Blockchain & Al
- d) None of the above

- 4. You're tracking a patient's location using remote tracking technology who got admitted to your healthcare facility for alcohol abuse, and was discharged few days back. Now whenever he is near to a bar then he automatically gets an alert for "of he really wants to go there?" Which right of the patient is being compromised in the case?
- a) Right to Information
- b) Right to Safety
- c) Right to Confidentiality / Privacy
- d) Right to Transparency
- 5. In public health advancements what serves as an electronic health information exchange that hold the metadata and access information for patient electronic health records (EHRs)?
- a) Artificial Intelligence
- b) Blockchain
- c) Google satellite
- d) Mobile Apps

#### **Unit 5: Monitoring and Evaluation of programs**

can progress on goals and objectives be shown to be related to the	3. a)	Tin the SMART indicator stands for Tangible
program, as opposed to other things that are	b)	Time bound
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Effectiveness	d)	Trustworthy
Implementation		
Efficiency	4.	This indicator measure the resources devoted
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Strategic		
Operational	5.	Which is not a step of Evaluation framework
Tactical	a)	Describe the program
Contingency	b)	Justify conclusion
	c)	Engage stakeholder
	d)	Ensure sharing feedback
	objectives be shown to be related to the program, as opposed to other things that are going on at the same time? Effectiveness Implementation Efficiency Attribution  Monitoring and evaluation (M & E) are integral components of any program and are critical to sound planning. Strategic Operational Tactical	objectives be shown to be related to the program, as opposed to other things that are going on at the same time?  Effectiveness d) Implementation Efficiency 4.  Attribution a) Monitoring and evaluation (M & E) are integral components of any program and are critical to sound planning.  Strategic Operational 5. Tactical a) Contingency b)

#### Unit 6: Al and its application in healthcare

- Fast diagnosis, Robotic Surgery is an example of
- a) AI in healthcare
- Al in finance b)
- Al in computer vision c)
- d) Al in security
- 2. What are the advantages of emerging technologies like Big Data, AI and Machine learning in public health sector?
- a) Increased community reach
- Unbiased data collection b)
- Timely care to remote areas c)
- All of the above d)
- 3. Which technologies are used to review vast sets of real-time data, so that health experts can identify at-risk populations for any number of diseases, from diabetes to heart disease.
- a) AI & Machine Learning
- Big Data & cloud b)
- Blockchain & Al c)
- None of the above d)

- 4. You're tracking a patient's location using remote tracking technology who got admitted to your healthcare facility for alcohol abuse, and was discharged few days back. Now whenever he is near to a bar then he automatically gets an alert for "of he really wants to go there?" Which right of the patient is being compromised in the case?
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- a) Artificial Intelligence
- b) **Blockchain**
- c) Google satellite
- Mobile Apps d)

### **Best Case Presentation**



Dr.Raj Kumar Dangal, MD (GP & EM)
Fellowship in Global Health, University of California, San Francisco (UCSF)
Lecturer/Clinical chief
Dolakha Hospital, Dhulikhel Hospital

Dr. Raj Kumar spoke on best practices in rural healthcare: transforming rural health care. He shared his experience from Dolakha, Nepal. He started the session by introducing the Dolakha hospital's infrastructure, facilities, and offered services. He gave an example of teamwork by showcasing a case of emergency pericardiocentesis. He later highlights the community health support program and its success. Dr. Kumar also shared the hospital's mental health services and covid trial.

Dr. Leison Maharjan, MBBS, MS ENT-HNS Lecturer, Department of ENT, Head & Neck Surgery Patan Academy of Health Sciences (PAHS)

Dr. Leison spoke on Public Health Management at the Patan Academy of Health Sciences (PAHS), Nepal. He started with a brief introduction to Patan Academy and shared the organogram of the hospital. He shared his journey hoe COVID 19 Management system was set up when COVID was full-blown. He shared the figure of infected staff and departments during the period. He highlighted various measures such as PPE, Antigen testing, waste management, COVID vaccination, and AEFI.

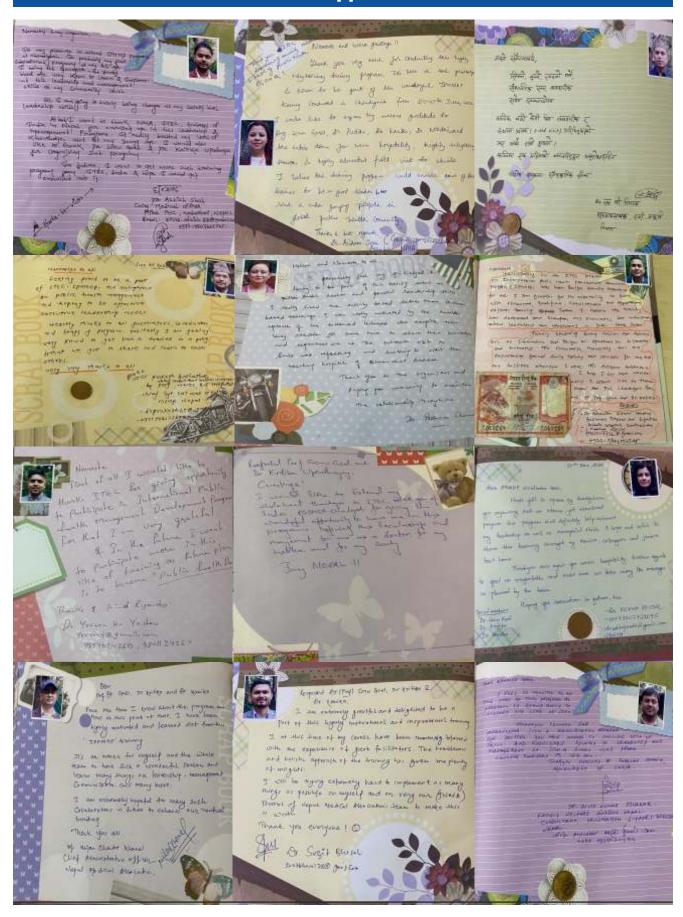
Dolakha, Nepal





Dr. Jagat P. Deep Professor, OB-GYN, NMCTH Birgani, Nepal

Dr. Deep introduced the audience to Single Port Surgery in Gynecology. He gave an overview of his presentation and stated by sharing his experience how he thought of this idea. He told single port is safe and appropriate adoption into gynecology practice can be done. He further shared the study on 105 patients from May 2015 to March 2021. The procedures carried out were ovarian cystectomy, diagnostic laparoscopy with chromotubation for infertile couple and Laparoscopic-assisted vaginal hysterectomy. He added that in all cases, the operation was successfully performed without additional ports. Lastly, he shared the various surgical techniques and ended his talk by sharing strengths and limitations.

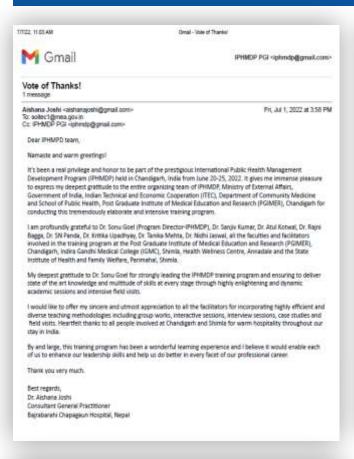








# Feedback from Participants





Name: Dr. Hemasta Bilcram Dahal

Designation: Medical Officer

Organization Nima National Hospital Pvt Ltd. Damak Jiapa Nepal

Email: dahal hemanta 1991@gmail.com

ITEC Application ID No. : 2022NPL000145

Name of the Course Attended: International Public Health Management Development Program

Period/Duration of the Course: 25"-25" June 2022

I am extremely grateful to ITEC, Ministry of External Affairs India, Embassy of India in Nepal and Nepal Medical Association for providing this wonderful opportunity.

My words will be incomplete without appreciating the efforts and dedications of Prof Dr. Sons Goel, Dr. Kritika Upadhara and Dr. Kanika Mehra and PGI Chandigarh Department of Community Medicine and School of Public Health.

The lectures and orientations from exteemed program facilitators starting from Dr. Sanjin, Kumor, Major General (Prof.) Dr. Atal Kotseal, Prof. Raini Banga, Prof. Dr. Sona Goel and Prof. Surya Narayan Panda were really majoring and suntvaring and very much valuable for our professional career and personal life

The laughter Yoga session by Dr. Nidhi Jaswal on the occasion of World Yoga Day was so energetic and measurerizing that it still resonates within me.

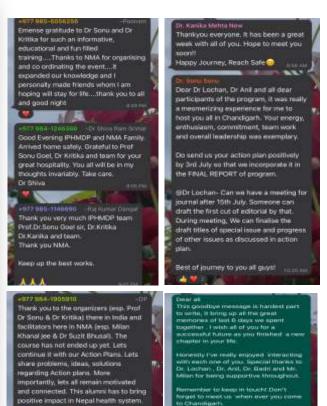
Moving forward, the field trip to Shimla was cherry on the cake. The presentations by Dr. Quasah Kumar Bhanti, Dr. Gopal Chauhan and words of Dr. Sonam Negi filled us with real to work more and contribute on our side to the society.

Finally, I would like to appreciate the cuisine served to us throughout the week and the effort to make our stay to make our stay as pleasant as possible.

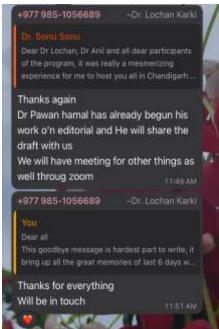
I am looking forward for more such programs ahead in future for new participants and continuous interaction and follow up with further workshops for past participants.

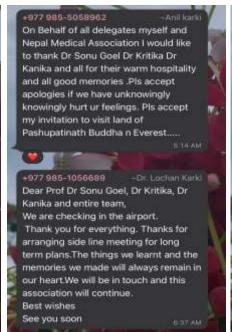
#### My Suggestion and Areas of Improvement

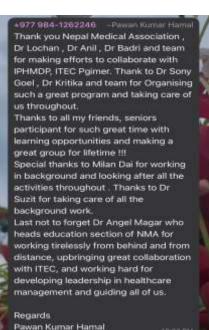
- 1. More field tours and exposure to good practices along with interactive more sessions.
- Guided tour to the city along with the team exploring the historical, social and cultural
  amoets.
- Improvement in the subsistence allowance provided to the participants during the time of stay.

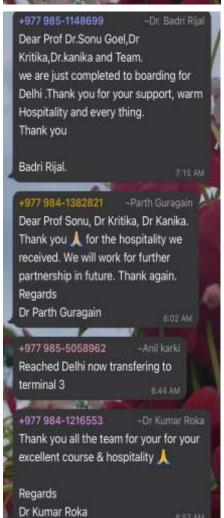


### Feedback from Participants

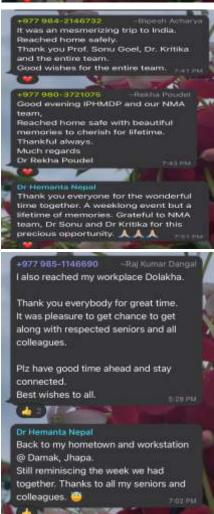












# **Materials Develop During the Program**



**Bottle Sticker** 



**Badge of the Program** 



WELCOME

100 June - 157 June - 1602

100 June -

**Envelope for Welcome Letter** 



Standee & Banner



**Photo Collage** 





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# **Materials Develop During the Program**





**Program Certificate** 



**Educational Posters** 

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Feedback & Challenges Chart



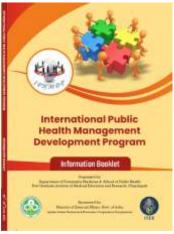
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**Program Brochure** 



I-CARD



Training & Information Booklet



Notepad



Country Flags



#### Post Graduate Institute of Medical Education & Research, Chandigarh

#### Who We Are

The Postgraduate Institute of Medical Education and Research (PGIMER) is based in Chandigarh (city beautiful in North India) and was established in 1962 by then Prime Minister of India, Pt. Jawaharlal 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 specialties and super-specialties departments. 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 Depaitment of Community Medicine was upgraded to School of Public Health (SPH) in the Tenth Five Year Plan of India (200206).

Department of Community Medicine and School of Public Health conduct post-graduate teaching programmes and short-term training courses on various public health issues. Besides, we are also involved in several research projects in collaboration with national and international organizations (like DBT, ICMR, WHO, UNICEF, UNFPA, DFID, MOH & FW, and MOE&F etc.) and state governments. We also provide consultancy services to state and central health services on public health matters and national programs/projects. Each year nearly 45 training programs are conducted with an average attendance of 30 participants per course. We also deliver population based health services to approximately 80,000 population in rural, urban and slum communities of Haryana, Punjab and Chandigarh. SPH has developed various public health models which have been successfully scaled and replicated across country.

We offer regular Doctor of Philosophy (PhD), Doctor in Medicine (MD), Post Graduate Diploma in Public Health Management (PGDPHM), and Masters of Public Health (MPH), Bachelors in Public Health (BPH) along with various short-term courses in areas of epidemiology, health management, health promotion, communicable and non-communicable diseases.



### ANNOUNCING NEXT PROGRAMS

Public Health Policy & Management - (19th September - 2rd September, 2022) International Public Health Management Development Program (For Myanmar) - (28th Nov. - 7th Dec., 2022) International Public Health Management Development Program - (21st February - 2nd March, 2023)



Department of Community Medicine and School of Public Health, Post Graduate Institute of Medical Education and Research, Chandigarh (India)





