

# AROGYAM

## Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in the Indian Health System



Trivandrum, India

4–7 November 2014



Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



# Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



Indian Council of  
Social Science Research



## 1. Background

One contributor to poor health outcomes in developing countries is weak health systems; key to strengthening health systems are interventions to improve the quality of health services. This point has been emphasized in research within the Indian health sector over the previous decade, including the need for improved training in QM mechanisms for health actors at all levels in both private and public arenas. Mechanisms for managing the quality of health services are rarely taught in medical, health management or health policy courses in most countries; this is also true in India. Thus, there is a need for training in QM and, because of the range of course participants, also a need to develop various modes of training, such as face- to- face and distance learning courses. New technologies permit the development of innovative means to strengthen learning among selected target groups.

### Objectives of the workshop:

The main purpose of the AROGYAM workshop held in Trivandrum from November 3-7, 2014 was to bring together key actors to understand the needs and to develop quality management course curricula in the local context. Dr. K Srinivasan and Professor. Dr. K R Thankappan from the Achutha Menon Centre for Health Science Studies (AMCHSS), Trivandrum hosted the four day workshop at the AMCHSS, Trivandrum. During the four days the aim was to develop courses catered to the Indian context on quality management. Two curricula with for select target groups were developed.

## 2. Workshop Participants

Achutha Menon Center

Kannan Srinivasan [ksriniamc@gmail.com](mailto:ksriniamc@gmail.com)

Ravi Varma [rpvarma@sctimst.ac.in](mailto:rpvarma@sctimst.ac.in)

Sanjay Kadam [drsrkadam@gmail.com](mailto:drsrkadam@gmail.com)

VeenaSaroji [veenasrjih@gmail.com](mailto:veenasrjih@gmail.com)

Saritha LT [sarithalt@yahoo.com](mailto:sarithalt@yahoo.com)

Manju Nair [manjun@sctimst.ac.in](mailto:manjun@sctimst.ac.in)

Sindhu V

Institute of Public Health, University of Heidelberg

Sylvia Sax [Sylvia.sax@urz.uni-heidelberg.de](mailto:Sylvia.sax@urz.uni-heidelberg.de)

SvetlaLoukanova [svetla.loukanova@urz.uni-heidelberg.de](mailto:svetla.loukanova@urz.uni-heidelberg.de)

RevatiPhalkey [rphakey@gmail.com](mailto:rphakey@gmail.com)

Invited Experts

LathaVentakesan [Latha6901@yahoo.com](mailto:Latha6901@yahoo.com)

Amit Paliwal [amit\\_paliwal@abtassoc.com](mailto:amit_paliwal@abtassoc.com)

Parag Mankeekar [parag@neetisolutions.com](mailto:parag@neetisolutions.com)

## 3. Methods (See Section 10 for detailed reference documents)

The workshop and curricula development approach was based on a workshop recently held in Heidelberg to develop curricula on Global Mental health and a curriculum development framework, which has been successfully used in several countries (attached). To assist in conceptualizing the curricula specific for India we will use the quality management curricula from courses, such as the one from University of Heidelberg, Quality Management in International Health course (in its fourteenth year) and several QM

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



courses organized by the National Institute of Family Health and Welfare for senior and mid-level managers on Improving Quality of Care in the Health Sector (i.e. Srinagar, 2009) supported by GIZ.

#### 4. Workshop Outcome

Two courses were developed during the workshop- one with a focus on managers at higher levels within organizations and the other with a focus on facility managers. It was agreed that both the courses would recruit participants from both the public and private sectors. Both the courses would have a compulsory component and optional modules. Curriculum 1 will target CD based offline self directed trainings with minimal face to face sessions. Curriculum 2 will incorporate face to face contact sessions as a major component with practical hands on training assignments to the participants own settings and will include certain offline modules on needs based agreement.

*Curriculum 1: Blended Learning course on Quality Management in the Indian Health System (Detailed outline in Section 8)*

The overall goal of this blended learning course is to upgrade and update knowledge and skills of health care providers and managers or those with associated degrees and working at a health related private or public organization or facility to implement quality management systems and practices in their health facilities, at all levels within the health system. The eight learning objectives of the course cover development of knowledge, skills and attitude competencies in:

1. International and Indian health
2. System quality and regulatory frameworks
3. Systems thinking
4. Stakeholder management and perceptions
5. Patient focus
6. Quality improvement tools
7. Human resource management with a focus on teams and relationship management
8. Quality measurement concepts and tools including change management

The target audiences are nurses, doctors, health managers or those with associated degrees and working at a health related private or public organization or facility – at primary health care, hospitals or home care level. This course blends new media tools and face-to-face sessions. New media tools allow participants to actively engage in the subject through such means as videos including expert presentations and interviews, interactive video case studies and problem-based learning exercises. Face-to-face also involves case studies and field-visits with on-going problem-based learning and exercises at the participants work place.

*Curriculum 2: Focusing on Facility Managers (Detailed outline in Section 9A and 9B)*

The course will be organised jointly by the Institute of Public Health, University of Heidelberg and the Shri Achyuta Menon College of Medicine. The course will accord credit points as per the systems in place at the AMCHSS. The main objective will be to strengthen the capacity of individual personnel responsible for quality management within a health care facility. At the end of the course the students are able to:

- Define and describe concepts in Quality Management

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



- Recognize hazards and risks of facilities within a healthcare setting
- Risk Assessment and Analysis and initiate safety
- Identify legal frameworks and describe statutory requirements for healthcare settings
- Monitor preventive maintenance activities
- Establish quality indicators and measure them periodically
- Competency for performing facility audits

The course is intended for health professionals: Medical Doctors, Nursing, Biomedical Engineering, MBA in Hospital Management, MHA Masters in Hospital Administration, Dieticians, Microbiologists, Safety Officers, Pharmacists, Quality Managers. Applicants will be selected on the basis of their professional qualifications such as with practical experience and future career plans. Candidates with 1-2 years experience in respective positions as facility quality managers will be preferred. The course will run parallel to term times of the AMCHSS over 7 months. The 6-month course work will include 3 full day contact lessons in month 1, two-day weekend contact courses for months 2-6 and a three-day final contact session's in month 7 including final assignment submissions and a oral presentation exam. Final course assessment will include overall attendance, performance of each assignment and the overall final written project. Assessment will cover 60% written exam and 40% other assignments over 6 months.

#### 5. Next steps and TO Do's as agreed

- Svetla: looks at GIZ, DFG, DAAD from German end, AROGYAM (ask Michael)
- Amit: GIZ, USAID, ABT
- Michael: AQUA,
- Revati: Welcome Trust, Create Drop box
- Sylvia: Ford Foundation, Gates International, Helen Keller  
Set up a Doodle
- Kanan: ICMR, ICSSR, DST, Indian Govt. agencies

#### Next Steps

- First steps
  - Tidy Curriculum
  - Share with each other
  - Skype call
  - One page write up (Sylvia, Svetla and Revati and send to others, comments and then circulate to potential sponsors)
  - Identify potential sponsors
  - Draft short proposals to sponsor full development of the courses
- The most important outcomes of the workshop were two clear strategies and two rather specific course curricula.
- In order that these curricula are indeed developed into courses ready for administration the group unanimously agreed to have another workshop (early 2015) to finalize the course materials and write up grant proposals.

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



- These proposals will be targeted at specific funders to cover the costs of developing the online modules and drafting materials for the face-to-face modules.

The structure of this report includes- detailed day wise minutes in section 6 followed by the workshop agenda in section 7. The sections 8, 9A and 9B contain the draft curricula as developed during the workshop. The report ends with the

## 6. Detailed minutes

### *Day 1*

Welcome session: Prof K R Thankappan

- Introduction to Sree Chitra Tirunal Institute for Medical Sciences and Technology (SCTIMST) and the Achutha Menon Centre for Health Science Studies (AMCHSS)
- Introduction to the courses offered at AMCHSS – MPH, DPH, PhD and short courses; scope for a new programme to be introduced in the last category – i.e. short courses
- Introduction to the Arogyam project
- Introduction to the Indian Health System – low priority to the public system in terms of proportion of public funds allocated; predominant role of the private sector in health care; called for a stress on the public sector in the deliberations of the workshop

Dr Sylvia Sax:

- PowerPoint presentation on behalf of Prof Michael Marx - Introduction to the Institute of Public Health, University of Heidelberg
- Introduction to the thematic areas and courses offered including the short course on Quality Management
- Introduction to the South Asia Institute

Dr Kannan Srinivasan

- Introduction to the proposed joint programme between University of Heidelberg and SCTIMST
- Overview of the schedule over the 4 days

Interactive introductions

- The group was split into pairs. The pairs interacted for a few minutes and each member introduced the other member in her/ his pair.

**Technical session 1:** Why should we be concerned with **Quality Management (QM) training** in the Indian health system?

Speakers:

- Dr Sylvia Sax: Why quality? Need to identify the gaps
- Dr Veena S: Standard precautions in the Indian health systems
- Dr Sarita: Experience of the Women and Children (W&C) Hospital, Thycaud, Thiruvananthapuram regarding the National Accreditation Board for Hospitals & Healthcare Providers (NABH) accreditation; need for “learning by doing”

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



- Dr Sanjay: Patient satisfaction and provider job satisfaction at primary care level in the Indian health system

Gist of discussions: need for a “culture of quality”; need for studies among health professionals for explaining existing “models of quality”; need to think out of the box – orienting general population/ school children

**Technical session 2:** What kinds of **QM training courses** currently exist within the Indian health system?

Speakers

- Dr Amit Paliwal: Overview of courses on Quality management existing in the country
- Dr Latha: Gaps in training – perspective from an NABH assessor while inspecting health facilities
- Dr Sindhu: Introduction to the Kerala Accreditation Standards for Hospitals

Gist of discussions: need to identify potential career paths first; linkage between financing of health care and quality management; need for developing/ identifying new indicators such as Infection control (IC) nurse: hospital bed ratio; mechanisms to document trained personnel and trainers, keep in touch with alumni.

**Technical session 3:** Overview of **possible types of courses** (including their strengths and weaknesses)

Speakers

- Dr Sylvia Sax: Face-to-face learning
- Dr Svetla Loukanova – E-learning
- Dr Srinivasan – Blended learning

Gist of discussions: Discussion on limitations on internet based courses and on new e-learning technologies that do not need continuous internet connection

Group discussions (Post-lunch)

Briefing by Dr Sax – discussion in two groups

Identifying priority gaps

- Target audiences
- Type of course
- Regional priorities
- Sectoral priorities – Physicians, Nursing sector etc. Any other categories / criteria to be identified prior to curriculum development

*Day 2: Working on the Curricula*

Morning half: Dr. Sax provided with an overview of how to use the tool for developing a curricula followed by formation of two groups which would then use the guide to develop courses.

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



Initially it was agreed that we will brainstorm for all types of courses and then develop only one depending on mutual majority agreement.

Over the discussions it was clear that both the groups had identified two rather non-inclusive target groups and therefore two courses with two different target audiences and using specific teaching approaches were developed.

At the end of the day both groups reached a consensus that the formats should be kept standard.

*Day 3:*

Morning half: The two groups continued working in individual groups

Early Afternoon: Peer review and feedback

Late Afternoon: Trip to the Women's and Children Hospital of the State Government, Trivandrum where Ms Rashmi presented a detailed overview of the key performance indicators, quality improvement processes and outcomes in their public funded hospital.

This was followed by detailed discussions with the team with their experience with accreditation and their views on gaps in current quality in healthcare related courses available in the country.

*Day 4:*

Presentations of two draft curricula followed by facilitated panel discussion on potential partnerships, others who might be interested and next steps (details of next steps and To do's see above)



Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



## 7. Workshop Agenda

**Date:** 4– 7 November 2014

**Venue:** Achutha Menon Centre for Health Science Studies (AMCHSS), Trivandrum

**Attendees:** K. Sandeep, K. Srinivasan, Prof Thankappan, R.P.Verma, M. Nair, S. Sax, S. Loukanova, M. Marx, R. Phalkey, P. Mankeekar, J. Littleflower, A. Paliwal, P. Mankeekar, K. Sanjay, Dr. Veena, Dr. Saritha, Dr. Ravi

**Overall facilitation:** Sylvia Sax & Kannan Srinivasan

**Note taking/documentation and final curricula drafts:** Dr. Veena, R. Phalkey

| Tuesday, November 4 <sup>th</sup> | Topic  | Lead  | Inputs and process description   |
|-----------------------------------|--|---|--|
| 09:00 - 09:15                     | Welcome  | Formal welcome by Prof Thankappan, Head of AMCHSS, K. Srinivasan, M. Marx | Short input on Arogyam network, Achutha Menon Centre for Health Science Studies and Heidelberg University  |
| 09:15– 09:30                      | Schedule review and workshop methods   | S. Sax & K. Srinivasan  | Draft Schedule printed for all   |
| 09:30 – 10:30                     | Interactive introductions  | S. Sax & K. Srinivasan  | Pairs interview each other and then present their new colleague to all others (2 minutes each)   |
| 10:30 – 11:00                     | Tea/Coffee break   |   |  |
| 11:00 – 11:30                     | Why should we be concerned with <b>Quality Management (QM) training</b> in the Indian health system? | S. Sax, Dr. Veena, Dr. Saritha  | 3 x 10 minute presentations  |
| 11:30 – 12:15                     | What kinds of <b>QM training courses</b> currently exist within the Indian health system             | A. Paliwal, J. Littleflower, Dr. Sandeep                                  | 3 x 10 minute presentations with 15 minute discussion at end of session<br>A. Paliwal –overview; J. Littleflower – health professional QM training; Dr. Sandeep on training courses for Kerala Accreditation Standards |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



| Tuesday, November 4 <sup>th</sup> | Topic   | Lead   | Inputs and process description   |
|-----------------------------------|---|--|--|
| 12:15 – 13:00                     | Overview of <b>possible types of courses</b> (including their strengths and weaknesses)   | P. Mankeekar, S. Loukanova S. Sax, M. Marx, K. Srinivasan, R. PhalkeyJ. Littleflower | 4 x 10 minute presentations (based on completed handouts, see page 5 below), questions of clarification and 15 minute discussion at end of overall session<br><br><u>E-learning</u> : P. Mankeekar /S. Loukanova<br><u>On-site face-to-face</u> : S. Sax/M. Marx<br><u>Blended learning</u> : K. Srinivasan/R. Phalkey<br>Training sessions focusing on <u>one profession</u> : J. Littleflower/S. Sax |
| 13:00 – 13:45                     | Lunch   |  |  |
| 13:45 – 15:30                     | Instructions on group process (10 minutes)<br>Identification of priority gaps: target audiences, types of courses, regional priorities, sectorial priorities, etc.  | Working groups (each group 4-5 persons)  | We can continue with the previous session if we run out of time before lunch.<br><br>Each group identifies from their perspectives the priority gaps according to each criterion and present their results to the overall group, with the rationale.<br><br>Each person then gets three coloured dots to vote for their priority in each criteria  |
| 15:30 – 16:00                     | Tea/coffee  |  |  |
| 16:00 – 17:00                     | Course parameters – based on the priorities from the previous work, working groups of up to five persons work together to match target audience and type of course. | Working groups   | Results are presented back and decision on three or four curricula to work on in the following days  |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



| <b>Wednesday, November 5th</b> | <b>Topic</b>   | <b>Lead</b>                                   | <b>Preparation requirements</b>   |
|--------------------------------|--|---|---|
| 09:30 - 09:40                  | Welcome, recap of yesterday and overview of the day        | K. Srinivasan                                 |   |
| 09:40 -10:00                   | Forming working groups for curricula development           | S. Sax  | Choice or fate.<br>Each group facilitated by one person with expertise in the type of training course                         |
| 10:00– 11:00                   | Overview of curricula development tool                     | S. Sax, K. Srinivasan, S. Loukanova, Dr. Ravi | Overview of tool with short exercises in competency framework, writing objectives and matching learning methods to objectives |
| 11:00 – 11:30                  | Tea/Coffee break   |   |   |
| 11:30 – 13:00                  | ‘Coursework’ –develop course curricula agreed on in Day 1  | Agreed groups                                 | Part 1 of tool  |
| 13:00 – 13:45                  | Lunch  |   |   |
| 13:45 – 15:45                  | Further work on draft curricula<br>With working Tea/coffee |   |   |
| 15:45– 16:30                   | Peer review of Part 1 developed                            | Agreed groups                                 | Groups ‘peer review’ each -others work and provide feedback   |
| 16:30                          | Wrap-up for the day  | K. Srinivasan                                 | Also time for questions and clarifications  |
|                                | <i>Group activity in evening</i>                           |   |   |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



| <b>Thursday, November 6th</b> | <b>Topic</b>   | <b>Lead</b>           | <b>Preparation requirements</b>   |
|-------------------------------|--|-----------------------|---|
| 09:30 - 09:40                 | Welcome, recap of yesterday and overview of the day  | K. Srinivasan         |   |
| 09:40 -13:00                  | Groups work on Curricula Part 2 (draft outline of course schedule, management of course process), with working tea | Agreed groups         | Using developed template  |
| 11:30 – 12:30                 | Peer review and feedback   | World cafe            | 2 x 20 minute rotation with participants review, provide feedback and discuss key questions with curricula ‘owner(s)’ |
| 12:30-13:00                   | Orientation and preparation for hospital field-trip  | K. Srinivasan, S. Sax |   |
| 13:00 – 14:00                 | Lunch  |                       |   |
| 14:00 – 17:00                 | Field trip to Women and Child Hospital, Trivandrum   | K. Srinivasan         |   |

| <b>Friday, November 7th</b> | <b>Topic</b>   | <b>Lead</b>  | <b>Preparation requirements</b>  |
|-----------------------------|--|--|--|
| 09:00 - 09:30               | Welcome, recap of yesterday and overview of the day  | K. Srinivasan  | Feedback from participants on what they learned from the field trip visit                      |
| 09:30 -11:00                | Presentations of draft curricula with working tea/coffee break   | World café (S. Sax)  | 15 minute rotations providing all participants opportunity to hear about each final curriculum |
| 11:00 – 12:30               | Facilitated panel discussion on potential partnerships, others who might be interested and next steps. | K. Srinivasan, M. Marx, A. Paliwal, J. Littleflower, P. Mankeekar, Dr. Sandeep | Start with 30-45 minute Panel discussion and then open up to full discussion                   |
| 12:30 – 13:00               | Thanks and closing   | K. Srinivasan, M. Marx   |  |
| 13:00 – 14:00               | Lunch  |  |  |
| 14:00 –                     | Individual or small group meetings on next steps   |  |  |



## 8. Draft Curriculum 1

### Curriculum essentials

|  |   |   |
|--|---|---|
| <p><b>Target Audience(s)</b><br/><br/><b>Maximum</b></p> | <p><b>Overall Selection criteria for participants:</b> nurses, doctors, health managers or those with associated degrees and working at a health related private or public organisation or facility – at either primary health care, hospitals or home care level.</p>  | <p><b>Prerequisites to attend course (individuals):</b><br/>Working knowledge of internet, MS Word, powerpoint.<br/>Experience in a healthcare facility or health related organisation for 3 years<br/>Simple English language, reading and writing<br/>Access to a computer with xxx configuration (add later)<br/>Access to internet<br/>Email identification<br/>Proof of degree<br/>If on-job training then requires approval from the employer</p> |
| <p><b>Overall course framework and strategy</b></p>      | <p>Mode of course –blended learning using new media tools, maximum 18 months to complete, credits as part of postgraduate course</p>  |   |
| <p><b>Key competencies</b></p>                           | <p>Development of knowledge, skills and attitude competencies in international and Indian health system quality and regulatory frameworks, systems thinking, stakeholder management and perceptions, patient focus, quality improvement tools, human resource management with a focus on teams, relationship management, quality measurement concepts and tools, change management,</p> |   |
| <p><b>Overall Course Aim</b></p>                         | <p>Upgrade and update knowledge and skills of health care providers and managers or those with associated degrees and working at a health related private or public organisation or facility to implement quality management systems and</p>  |   |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|                           |   |  |   |                                     |
|---------------------------|---|--|---|-------------------------------------|
|                           |   | practices in their health facilities, at all levels within the health system.  |   |                                     |
| <b>Course objective 1</b> | 1. Define quality and quality frameworks within the international context   |  |   |                                     |
| <b>Course contents</b>    |   | <b>Learning methods using new media tools</b>  | <b>Learning methods for blended (either access to internet or face-to-face)</b>                                   |                                     |
|                           | Quality concepts including evolution of quality concepts and definitions of quality   | Power-point (PPT)<br>Article (A)<br>Short case introducing the topic (SC)<br>Video expert (VE)<br>Problem-based learning (PBL) | PPT<br>A<br>Group activity on short case introducing the topic (GW)<br>VE<br>PBL                                  |                                     |
|                           | Quality frameworks including their use in the health sector   | Script (S)<br>VE<br>PBL  | S<br>VE<br>PBL  |                                     |
|                           | Stakeholder perspectives of quality in the health sector (including attitudes and patient focus)  | S<br>VI (Video interviews)<br>VCS (Video case study)<br>Case study analysis (CSA)  | S<br>VI (Video interviews)<br>VCS (Video case study)<br>Case study analysis (CSA)<br>Case study development (CSD) |                                     |
| <b>Course Objective 2</b> | 2. Analyze quality frameworks and related regulatory mechanisms that exist in the Indian health system  |  |   | <b>Learning methods for blended</b> |
| <b>Course contents</b>    | Summarize regulatory frameworks related to quality management within the Indian health system and relevant state laws.  | S<br>Glossary of laws (G)<br>Review questions (RQ)   | S<br>Glossary of laws (G)<br>Review questions (RQ)  |                                     |
|                           | Describe importance of quality management and financial mechanisms including insurance, Performance Based Financing, Health Accounts etc. impacting on management of quality in their health facility | EV<br>Animated video (AV)  | EV<br>Animated video (AV)   |                                     |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |                           |   |   |                                     |
|--|---------------------------|---|---|-------------------------------------|
|  |                           | Identify personal ,cultural and ethical issues impacting on management of quality in their health facility  | ppt<br>S<br>VCS<br>RQ   | ppt<br>S<br>VCS<br>RQ               |
|  |                           | Identify health system frameworks including policy and health reforms impacting on management of quality in their health facility                             | ppt<br>S<br>EV  | Ppt<br>S<br>EV                      |
|  | <b>Course Objective 3</b> | 3. Use systems thinking to improve quality in current practice  | Learning methods using new media tools                          | Learning methods for blended        |
|  | <b>Course contents</b>    | Describe systems approach (i.e. dependency thinking)  | AV<br>VI  | AV<br>VI                            |
|  |                           | Use a systems approach to overcome consequences of poor quality in health service delivery (i.e improving clinical processes and practices)                   | VCS (?cartoon)<br>AS<br>FF                                      | VCS (?cartoon)<br>MA                |
|  | <b>Course Objective 4</b> | 4. Incorporate patient focus and patient focused care in current service delivery practice  | <b>Learning methods using new media tools</b>                   | <b>Learning methods for blended</b> |
|  | <b>Course contents</b>    | List customer focused practices that would improve current patient satisfaction <ul style="list-style-type: none"> <li>• Smiling</li> <li>• Caring</li> </ul> | ppt<br>S<br>VCS<br>RQ   | ppt<br>S<br>VCS<br>RQ               |
|  |                           | Identify means to improve patient feedback mechanisms within current health facility  | AV<br>Assignment (AS)<br>Facility team group feedback (FF)      | AV<br>Marked Assignment (MA)        |
|  |                           | Describe tools to enable patient empowerment within a health facility (i.e. patient charter, informed consent, patient information systems)                   | VCS<br>Assignment (AS)<br><br>Facility team group feedback (FF) | VCS<br>Marked Assignment (MA)       |
|  | <b>Course Objective5</b>  | 5. Describe how financial mechanisms impact the quality of health systems and services and decision-making of   | Learning methods for offsite                                    | Learning methods for blended        |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |  |   |   |  |
|--|--|---|---|--|
|  |  | patients and providers  |   |  |
|  |  | Describe financial mechanisms impacting quality in the health system <ul style="list-style-type: none"> <li>• International perspective</li> <li>• India perspective</li> </ul>   | EV (with script/on whiteboard)<br>S<br>VCS                                  | EV (with script/on whiteboard)<br>S<br>VCS |
|  |  | List financial mechanisms impacting access to health services and the quality of provision of health care services <ul style="list-style-type: none"> <li>• International perspective</li> <li>• India perspective</li> </ul> | EV (with script/on whiteboard)<br>S<br>VCS (i.e. patient, staff interviews) | EV (with script/on whiteboard)<br>S<br>VCS |
|  |  | Describe the link between motivation and financial mechanisms in current practice   | VCS   | VCS  |



Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  | <b>Course Objective 6</b> | 6. Employ human resource management practices as a tool to improve quality  | <b>Learning methods using new media tools</b>                      | <b>Learning methods for blended</b> |
|--|---------------------------|---|--|-------------------------------------|
|  | <b>Course contents</b>    | Describe human resource management practices as a tool to improve quality through worker engagement <ul style="list-style-type: none"> <li>• Functional areas within HR</li> <li>• Differences between private and public HR challenges</li> <li>• Strategies to respond to challenges</li> </ul> | EV (with texts)<br>S<br>VCS  | EV (with texts)<br>S<br>VCS         |
|  |                           | Use change management mechanisms <ul style="list-style-type: none"> <li>• Change management frameworks</li> <li>• Change management mechanisms</li> <li>• Advocacy, behavioural recognition and change</li> </ul>   | Movie or movies (M)<br>A (questions on change management in movie) | M<br>A                              |
|  |                           | Identify the importance of relationship management in change management <ul style="list-style-type: none"> <li>• Conflict management,</li> <li>• Negotiation,</li> <li>• Employee engagement mechanisms</li> </ul>  | VCS<br>S   | VCS<br>S                            |
|  |                           | Identify the importance of self management in improving quality: <ul style="list-style-type: none"> <li>• Personality types</li> <li>• Confidence</li> <li>• Shame free processes</li> </ul>  | VCS  | VCS                                 |
|  |                           | Identify the role of teams in improving quality <ul style="list-style-type: none"> <li>• Stages of teams</li> <li>• Strengths and weaknesses of working in teams</li> <li>• Team management techniques (facilitation</li> </ul>   | VCS<br>S<br>RQ   | VCS<br>S<br>RQ                      |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |                           |   |  |  |
|--|---------------------------|---|--|--|
|  |                           | skills, group dynamics)   |  |  |
|  | <b>Course Objective 7</b> | 7. Compare, develop, analyze and use monitoring and evaluation systems for quality improvement in current practice  | <b>Learning methods for offsite</b>  | <b>Learning methods for blended</b>  |
|  | <b>Course contents</b>    | Recognize basic concepts of monitoring and evaluation   | AV   | AV   |
|  |                           | Identify and compare existing monitoring and evaluation systems for quality management <ul style="list-style-type: none"> <li>• International perspective (i.e. error reporting)</li> <li>• List Indian health system M&amp; E systems</li> <li>• Characteristics of good monitoring and evaluation systems</li> <li>• Strengths and weaknesses of different systems</li> </ul> | EV (with texts, international perspective)<br>S<br>EV (with texts for Indian system)<br>S<br>VCS | EV (with texts, international perspective)<br>S<br>EV (with texts for Indian system)<br>S<br>VCS |
|  |                           | Design a monitoring and evaluation system for a process within the current facility   | VCS<br>Assignment (AS)<br>Facility team group feedback (FF)                                      | VCS<br>MA  |
|  |                           | Identify characteristics (personal and team skills) needed for effective evaluation   | Game (G)   | Game (G)   |
|  | <b>Course Objective 8</b> | 8. Apply quality improvement tools in current management practice   | <b>Learning methods using new media tools</b>  | <b>Learning methods for blended</b>  |
|  | <b>Course contents</b>    | Describe the linkages between management, quality and clinical care   | VI   | VI   |
|  |                           | Identify the quality consequences of not solving quality problems (define responsibility, transparency, behaviour consequences, focus on  | VCS  | VCS  |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |   |  |   |                          |
|--|---|--|---|--------------------------|
|  |   | outcomes and simple solutions, accountability)   |   |                          |
|  |   | Use QI tools for problem-solving, decision making, etc.<br>Flow charts, meetings, teamwork, negotiation, responsibility, mind maps etc.  | S<br>VCS<br>V<br>A<br>Assignment (AS)<br>Facility team group feedback (FF)  | S<br>VCS<br>V<br>A<br>MA |
|  | <b>Organization of contents</b>             | Content was used as a building block for later course contents, no pre-course contents, contents in curriculum builds from general to specific   |   |                          |
|  | <b>Draft outline of the course schedule</b> | Include blocks of time for each content area? Estimated hours for each of the course contents according to delivery type (face-face, e-platform on-line, digital off line, on-site training, individual learning time, satellite conferences) (to be used to estimate credit amount).  |   |                          |
|  | <b>Management of the course process</b>     | <p><b>Course evaluation process according to KSA: weightage.</b></p> <ul style="list-style-type: none"> <li>• Need pre-course self-assessment,</li> <li>• Include personality typing assessment prior to start of relevant module</li> <li>• Final assessment at end of each module</li> <li>• Assignments according to curriculum</li> <li>• Final assessment at end of course (multiple choice and short answers?)</li> </ul> <p><b>Who will be the course coordinator?</b></p> <ul style="list-style-type: none"> <li>• One course coordinator, who would also coordinate the 100 mentors</li> <li>• Should include a mentor at the facility who can be paid and be involved in the assessment process                             <ul style="list-style-type: none"> <li>• Could have a list of mentors for the participants and they could get paid</li> <li>• Need mentors across India</li> </ul> </li> </ul> <p><b>Who teaches? What are their roles and responsibilities?</b></p> | <p><b>Maintenance/organization/ Quality Assurance</b></p> <ul style="list-style-type: none"> <li>• Selection &amp; admission of students, distribution of curriculum, monitoring of course preparation (i.e. field visits) etc. Course Title?</li> <li>• Accreditation/certification</li> </ul> <p><b>Timeframe:</b><br/>Five to eight weeks and must be completed within 18 months from start to receive certification</p> |                          |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |  |   |  |
|--|--|---|--|
|  |  | <ul style="list-style-type: none"> <li>• Team of four key content experts with 20 sub-experts</li> <li>• Team of 6 graphic experts</li> <li>• Team of 2 storyboard experts</li> <li>• Team of 6 software experts</li> <li>• Project Manager (s)</li> </ul> <p><b>Linkage with sponsors/partners? (for funding of proposal development for finalizing curriculum , for funding of proposal development for certification)</b></p> <ul style="list-style-type: none"> <li>• AQUA</li> <li>• National Skills Development Corporation (NSDC)</li> <li>• USAID</li> <li>• AUSID, KfW, GIZ through bilateral program</li> <li>• Olympus (German Camera company)</li> <li>• Apollo</li> <li>• Bill and Melinda Gates Foundation</li> <li>• Helen Keller Foundation</li> <li>• Clinton Health Access Initiative</li> <li>• TATA</li> <li>• Swiss Re</li> <li>• Ford Foundation</li> </ul> <p>Possible contacts that can suggest sponsoring:</p> <ul style="list-style-type: none"> <li>• Quality Council of India</li> </ul> <p><b>Fees, overall budget, marketing</b><br/>         Fee: 30,000 rupees (500 euros)<br/>         Marketing: ?</p> <p><b>Learning Methods glossary</b><br/>         FF can be done with facility groups monitoring each other or with a lead mentor within the facility working with/supervising the group<br/>         VCS can be hyperlinks</p> |  |
|--|--|---|--|



## 9A. Draft Curriculum 2

### Step 1: Needs assessment of knowledge, skills, and attitudes (identify needs and gaps)

Assess/determine the learning needs of those to be taught.

### Step 2: Curriculum essentials

|               |   |  |   |
|---------------|---|--|---|
| <b>PART 1</b> | <b>Target Audience(s)</b><br><br><b>Maximum</b> | Overall selection criteria for participants:<br><br>The course is intended for health professionals:<br>Medical Doctors, Nursing, Biomedical Engineering,<br>MBA in Hospital Management, MHA Masters in<br>Hospital Administration, Dieticians, Microbiologists,<br>Safety Officers, Pharmacists, Physiotherapists,<br>Quality Managers.<br><br>English Language<br><br>Public and Private sector facilities | Candidates should preferably have worked 1-2 years experience before taking the course. |
|               | <b>Overall course framework and strategy</b>    |  |   |
|               | <b>Key competencies</b>                         | Aligned with identified <u>knowledge, skills and attitude</u> learning needs, identify level for each competency?<br><br>Knowledge and Skills:<br>The participants will develop understanding of key concepts in QM in health care.<br>They will be able to critically analyse relevant literature. Analyse quality  |   |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |  |  |                         |
|--|--|--|-------------------------|
|  |  | issues, develop appropriate tools for quality assessment and develop an implementation plan. The participants will get an overview of aspects of quality with respect to all clinical and nonclinical departments within a healthcare facility.  |                         |
|  | <b>Overall Course Aim</b>                          | <ul style="list-style-type: none"> <li>To strengthen the capacity of personnel responsible for quality management in health care facilities</li> </ul>   |                         |
|  | <b>Course objectives</b>                           | <p>. At the end of the course the students are able to.</p> <ul style="list-style-type: none"> <li>Define and Describe concepts in Quality Management</li> <li>Apply the tools and techniques of quality control in healthcare setting</li> <li>Recognize hazards and risks of facilities within a healthcare setting</li> <li>Risk Assessment and Analysis and initiate safety</li> <li>Identify legal frameworks and describe statutory requirements for healthcare settings</li> <li>Monitor preventive maintenance activities</li> <li>Establish quality indicators and measure them periodically</li> <li>Competency for performing facility audits</li> <li>Inventory control practices</li> <li>Surveillance of safety aspects</li> </ul> |                         |
|  | <b>Objective</b>                                   | <b>Content</b>   | <b>Learning methods</b> |
|  | Define and Describe concepts in Quality Management | History of Quality on Healthcare<br>Types of Accreditation, Standards<br>Processes in Accreditation<br>Objective elements<br>Key performance Indicators<br>Total Quality Management<br>Safety culture and error reporting<br>Quality Assurance Models<br>Principles of Quality Management  |                         |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |   |  |  |
|--|---|--|--|
|  |   | <p>Defining Facilities</p> <p>Organizational structures of the facility</p> <p>Infrastructure requirements including remodeling, purchases etc.</p> <p>Developing Standard Operating Procedures for each Dept.</p> <p>Scope and Need for facility Management</p> <p>Spacing zoning and flow of activities</p>  |  |
|  | Identify legal frameworks and Building Norms of India | <p>Building Norms of India</p> <p>Norms of Pollution</p> <p>Atomic Energy Regulatory Board (AERB)</p> <p>Biomedical Waste Management (BMW)</p> <p>Fire Safety Norms</p> <p>Pre Natal Diagnosis Techniques (PNDT)</p> <p>Copywrite and Patent Laws</p> <p>Medical Gasses Acts</p> <p>Food Safety Sanitation Act of India (FSSAI)</p> <p>FDA</p> <p>etc.</p> |  |
|  | Hazards identification and risk analysis              | <p>Hazard identification in various departments</p> <p>HIRA</p>  |  |
|  | Initiate safety measures and ensure patient safety    | <p>Safety committees</p> <p>Electrical Safety</p> <p>Radiation Safety</p> <p>Infection Control</p>   |  |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |   |   |  |
|--|---|---|--|
|  | Able to implement Engineering control measures in various departments of the health care facility | <p>Operation Theaters<br/>                     ICU<br/>                     Radiology<br/>                     IT<br/>                     Generators<br/>                     SewegeTreatment plan<br/>                     Biomedical Waste Management (BMW)<br/>                     Elevators<br/>                     AC plant</p> |  |
|  | Monitor preventive maintenance activities to avoid downtime                                       | <p>Inventory management<br/>                     Equipment breakdown in different facilities<br/>                     Caliberation of Equipments<br/>                     Maintainence schedule for each department</p>   |  |
|  | Establish quality indicators and measure them periodically  | Quality Indicators for relevant Departments   |  |
|  | Competency for performing facility audits   | <p>Auditing 101<br/>                     Types of Audits<br/>                     Methods and Approaches<br/>                     Designing an audit tool<br/>                     Planning and Executing Audits<br/>                     Initiate Corrective Action and Preventive Action (CAPA)</p>                                   |  |
|  | Apply the tools and techniques of quality control in healthcare setting                           | <p>Lean 6 Sigma<br/>                     Pareto Analysis<br/>                     Root Cause Analysis<br/>                     Control Charts<br/>                     Calibration Charts</p>   |  |



Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|               |   |   |  |
|---------------|---|---|--|
|               |   | Error reporting culture<br>Internal Quality Assurance (IQA) and External Quality Assurance (EQA)<br>Fault Management System   |  |
|               | To organize and conduct induction training and continuing education for employees | Policies<br>SOP<br>CME sessions and training schedules<br>HR management of facility maintenance employees   |  |
|               | Internal disaster preparedness  | Rapid response systems<br>Mock drills for relevant codes  |  |
| <b>PART 2</b> | <b>Organization of contents</b>   |   |  |
|               | <b>Draft outline of the course schedule</b>                                       | Include blocks of time for each content area? Estimated hours for each of the course contents according to delivery type (face-face, e-platform on-line, digital off line, on-site training, individual learning time, satellite conferences) (to be used to estimate credit amount). |  |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |  |  |  |
|--|--|--|--|
|  | <p><b>Management of the course process</b></p> | <p>Course evaluation process according to KSA: weightage.<br/>         Who will be the course coordinator?<br/>         Who teaches? What are their roles and responsibilities?<br/>         Linkage with sponsors/partners?<br/>         Fees, overall budget, marketing?</p> | <p>Maintenance/organization/<br/>         Quality Assurance<br/>         Selection &amp; admission of students,<br/>         distribution of curriculum,<br/>         monitoring of course preparation (i.e. field visits) etc.<br/>         Course Title?<br/>         Accreditation?</p> |
|--|--|--|--|



**9B. Draft Curriculum 2: Month-by-Month detailed Description (course run over 7 months)**

| Content  | Learning Methods (hours) |            | Assessment   | Timeline |
|--|--------------------------|------------|--|----------|
|  | Face to face             | Group Work |  |          |
| History of Quality on Healthcare                                 | 12                       | 6          | Attendance and Critical Analysis Assignment Report | Month 1  |
| Types of Accreditation, Standards (Develop & critique)           |                          |            |  |          |
| Processes in Accreditation                                       |                          |            |  |          |
| Objective elements (Develop)                                     |                          |            |  |          |
| Key performance Indicators (Develop)                             |                          |            |  |          |
| Total Quality Management   |                          |            |  |          |
| Safety culture and error reporting                               |                          |            |  |          |
| Quality Assurance Models   |                          |            |  |          |
| Principles of Quality Management                                 |                          |            |  |          |
| Defining Facilities  |                          |            |  |          |
| Organizational structures of the facility                        |                          |            |  |          |
| System Designing for facilities                                  |                          |            |  |          |
| Infrastructure requirements including remodeling, purchases etc. |                          |            |  |          |
| Developing Standard Operating Procedures for each Dept.          |                          |            |  |          |
| Scope and Need for facility Management                           |                          |            |  |          |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |       |   |  |         |
|--|-------|---|--|---------|
| Spacing zoning and flow of activities        |       |   |  |         |
| Research methodology and basic statistics    |       |   | Give Legal framework documents for reading and summarizing for next contact session                    |         |
| Building Norms of India                      | 8 + 4 | 4 | Interactive Quiz, presentation of 3 main messages from the legal documents given last contact sessions | Month 2 |
| Norms of Pollution                           |       |   |  |         |
| Atomic Energy Regulatory Board (AERB)        |       |   |  |         |
| Biomedical Waste Management (BMW)            |       |   |  |         |
| Fire Safety Norms                            |       |   |  |         |
| Pre Natal Diagnosis Techniques (PNDT)        |       |   |  |         |
| Copywrite and Patent Laws                    |       |   |  |         |
| Medical Gasses Acts                          |       |   |  |         |
| Food Safety Sanitation Act of India (FSSAI)  |       |   |  |         |
| FDA  |       |   |  |         |
| etc.   |       |   |  |         |
| Hazard identification in various departments |       |   |  |         |
| HIRA   |       |   |  |         |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|   |       |       |   |         |
|---|-------|-------|---|---------|
| Safety committees                           | 3     | 3     |   | Month 3 |
| Electrical Safety                           |       |       |   |         |
| Radiation Safety                            |       |       |   |         |
| Infection Control                           |       |       |   |         |
| Operation Theaters                          | 3     | 3     | Establish a preventive maintenance plan for 50 and 100 bedded hospitals | Month 4 |
| ICU   |       |       |   |         |
| Radiology                                   |       |       |   |         |
| IT  |       |       |   |         |
| Generators                                  |       |       |   |         |
| Sewage Treatment plan                       |       |       |   |         |
| Biomedical Waste Management (BMW)           |       |       |   |         |
| Elevators                                   |       |       |   |         |
| AC plant                                    |       |       |   |         |
| Inventory management                        | 3     | 3     |   |         |
| Engineering product lifestyles              |       |       |   |         |
| Equipment breakdown in different facilities |       |       |   |         |
| Calibration of Equipments                   |       |       |   |         |
| Maintenance schedule for each department    |       |       |   |         |
| Quality Indicators for relevant Departments | 2 + 4 | 2 + 4 | Evaluate the designing of the   | Month 5 |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|   |   |   |   |         |
|---|---|---|---|---------|
| Auditing 101  |   |   | audit tool developed  |         |
| Types of Audits   |   |   |   |         |
| Methods and Approaches  |   |   |   |         |
| Designing an audit tool   |   |   |   |         |
| Planingng and Executing Audits  |   |   |   |         |
| Initiate Corrective Action and Preventive Action (CAPA)   |   |   |   |         |
| Lean 6 Sigma  | 3 | 3 | Conduct an anaylsis using any one of the tools and write up a short report<br>Critically analyse the internal disaster preparedness plan of your facility | Month 6 |
| Pareto Analysis   |   |   |   |         |
| Root Cause Analysis   |   |   |   |         |
| Control Charts  |   |   |   |         |
| Calibration Charts  |   |   |   |         |
| Error reporting culture   |   |   |   |         |
| Internal Quality Assurance (IQA) and External Quality Assurance (EQA)   |   |   |   |         |
| Fault Management System   |   |   |   |         |
| Organize and conduct induction training and continuing education for employees  |   |   |   |         |
| Human resources planning, recruitment, developing job description and job specifications, performance appraisal, competency assessment, credentialing and privileging |   |   |   |         |
| Policies  | 4 |   |   |         |
| SOP   |   |   |   |         |
| CME sessions and training schedules   |   |   |   |         |
| HR management of facility maintenance employees   |   |   |   |         |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |   |  |  |         |
|--|---|--|--|---------|
| Rapid response systems   | 2 |  |  |         |
| Mock drills for relevant codes, virtual reality session  |   |  |  |         |
| Final Assessment- overall attendance, performance of each assignment and the overall project.<br>60% written exam and 40% other assignments over 6 months. |   |  |  | Month 7 |



10: Reference documents used during the workshop

### 10A. DRAFT FORMAT FOR COURSE TYPE AND METHODS HANDOUT

Definition of the type of course: Face-to-face learning

Participants, instructors, and facilitators meet together in the same place and at the same time. Teaching occurs through live exchange of concepts, building of skills and discussions. Examples of face-to-face training are classes, seminars, workshops and conferences.

Description/list of teaching methods generally included in this type of course:

Powerpoint presentation, long modular case studies, role plays, demonstrations of skills or attitudes, story-telling, group work using short case studies or exercises, individual or group assignments, use of drawings or physical objects, panel-discussions, video-conferencing, video presentations (e.g. using skype),

Characteristics of participants for whom this type of course could be most appropriate:

Teams of health professionals with a focus on a specific area such as Infection Control, health managers from different but similar institutions, policy managers from different ministries, one group of health professionals working in the same department, and many others.

Strengths and weaknesses of this type of course:

| Strengths  | Weaknesses  |
|--|---|
| Allows real-time interaction   | Can be expensive with logistical needs (breaks, classroom equipment etc.)       |
| Breaks down barriers   | Requires participants to leave their work or homes to attend                    |
| Provides real cross-cultural experiences   | Requires initial and ongoing monitoring of participants to ensure participation |
| Provides networking opportunities and assists in sustaining relationships          | Can be tiring as sessions tend to be consecutive to save time in longer courses |
| Stimulates conversation between participants and sharing of different perspectives | Can be dominated by strong voices, requires skilful facilitation                |
| Enables lecturer to observe participant body language and other non-verbal signals | Can be a disaster if a resource person doesn't show up, difficult to reschedule |



Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|   |   |
|---|---|
| Encourages in depth sharing of knowledge and experience   | Can be an artificial environment for skills or attitude development as ‘artificial’ experiences need to be created in the classroom |
| Allows flexibility to make agreed changes in course schedule, group formations and other course aspects |   |
| Can incorporate breaks within group work  |   |
| Conducive to team-building  |   |
| Assessment can be more transparent as participants can be monitored during assessment                   |   |



**QUALITY MANAGEMENT IN HEALTH SYSTEMS:  
EXAMPLE - DRAFT COURSE LEARNING OBJECTIVES (6 day course, mid-level managers)**

|  |   |
|--|---|
| <b>Overall Learning Objective 1</b>  | <b>Specific objectives</b><br><i>By the end of the course the participant will be able to:</i>  |
| Apply quality improvement concepts and systems thinking in health care services  | <ul style="list-style-type: none"> <li>a) Identify system issues and quality gaps within the Indian health system at different levels</li> <li>b) Identify the use of the concepts in a specific health care setting</li> <li>c) Describe the links between resources, information management and quality in a specific setting</li> <li>d) identify appropriate quality improvement methods and tools for a specific setting</li> <li>e) Use quality improvement tools to solve a quality problem</li> <li>f) Diagnose the change issues within a situation and develop a management plan for improvement</li> </ul> |
| <b>Course Content</b>  | <b>Learning methods for content</b>   |
| <ul style="list-style-type: none"> <li>1. Basic concepts of health system, resource mgmt (human, financial, logistics etc.),</li> <li>2. Role of evidence in quality improvement</li> <li>3. Concepts of quality, quality management, quality improvement</li> <li>4. Tools for quality improvement</li> <li>5. Concepts of change management</li> </ul> | <ul style="list-style-type: none"> <li>1. Interactive Lecture</li> <li>2. Group exercises</li> <li>3. Exercise using different types of quality improvement tools</li> <li>4. Case Studies</li> <li>5. Field trip to facility.</li> </ul>   |
| <b>Overall Learning Objective 2</b>  | <b>Specific objectives</b><br><i>By the end of the course the participant will be able to:</i>  |
| Demonstrate the means to implement client orientation in a health delivery setting   | <ul style="list-style-type: none"> <li>a) Identify client needs and demands for quality in their health care</li> <li>b) Critique feedback mechanisms (i.e. complaints)</li> </ul>  |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



| <b>Course Content</b>  | <b>Learning methods for content</b>  |
|--|--|
| <p>1.1 Concept of client orientation, client needs/client demand, client rights, terminology of client/patient/customer</p> <p>1.2 Defining mechanisms for attaining client orientation such as client feedback, complaints systems, client surveys, client assessments (clinical, cultural, situational analysis)</p> | <p>mechanism)</p> <ol style="list-style-type: none"> <li>1. Lecture</li> <li>2. Identify client documents for complaints or feedback, client rights</li> <li>3. Case Studies</li> <li>4. Field trip to facility</li> </ol> |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |  |
|--|--|
| <b>Overall Learning Objective 3</b>  | <b>Specific objectives</b><br><i>By the end of the course the participant will be able to:</i>   |
| Demonstrate an understanding of effective leadership for the Indian health system  | <ul style="list-style-type: none"> <li>a) Differentiate between management and leadership behaviours</li> <li>b) Identify different leadership styles</li> <li>c) Analyze current leadership styles in Indian</li> <li>d) Analyze own leadership strengths and plan for improvements in leadership skills</li> <li>e) Plan for improvement in leadership in a specific health situation in Indian</li> </ul> |
| <b>Course Content</b>  | <b>Learning methods for content</b>  |
| 2.1 Concepts of leadership, management,<br>2.2 Characteristics of different leadership styles<br>2.3 Leadership skills   | <ul style="list-style-type: none"> <li>1. Lecture</li> <li>2. Case Studies</li> <li>3. Field trip to facility</li> <li>4. Group exercise to analyze leadership in Indian hospitals</li> </ul>  |
| <b>Overall Learning Objective 4</b>  | <b>Specific objectives</b><br><i>By the end of the course the participant will be able to:</i>   |
| Apply different methods of quality evaluation in health services   | <ul style="list-style-type: none"> <li>a) Differentiate between an inspection and an improvement focused evaluation</li> <li>b) Compare and contrast methods for evaluating quality</li> <li>c) Define key quality evaluation terms</li> <li>d) Identify the key steps in undertaking an evaluation</li> <li>e) Evaluate a health facility using a standards based tool</li> </ul>                           |
| <b>Course Content</b>  | <b>Learning methods for content</b>  |
| 3.1 Definition of evaluation, assessment, monitoring and research<br>3.2 Types of evaluation with a focus on quality<br>3.3 Steps of evaluation<br>3.4. Tools for evaluating quality | <ul style="list-style-type: none"> <li>1. Lecture</li> <li>2. Role play</li> <li>3. Case Studies</li> <li>4. Field trip to facility.</li> </ul>  |
| <b>Overall Learning Objective 5</b>  | <b>Specific objectives</b>   |

Arogyam Workshop to Develop Curricula to Strengthen Quality Management (QM) Mechanisms in The Indian Health System (November 4–7 2014)



|  |  |
|--|--|
|  | <i>By the end of the course the participant will be able to:</i>   |
| Recognize and apply team building and teamwork skills  | <ul style="list-style-type: none"> <li>a) Identify concepts and skills for working in and managing teams</li> <li>b) Recognize and use strategies for team building</li> <li>c) Analyze team member skills and means to maximize team outputs</li> </ul> |
| <b>Course Content</b>  | <b>Learning methods for content</b>  |
| <ul style="list-style-type: none"> <li>4.1 Concepts of teams, team building, team work</li> <li>4.2. Mechanisms for team building</li> </ul> | <ul style="list-style-type: none"> <li>1. Interactive lecture</li> <li>2. Group exercises</li> <li>3. Case Studies</li> <li>4. Field trip to facility.</li> </ul>  |