

**Internship  
At  
State Institute of Health and Family Welfare, Haryana**

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**STATE INSTITUTE OF HEALTH AND FAMILY WELFARE,  
HARYANA**

**INTRODUCTION:**

State Institute of Health and Family Welfare (SIHFW), Haryana was established in 1992. It is the apex training institute of Department of Health and Family Welfare, Haryana. Since its inception in 1992, it has progressed tremendously and on December 22<sup>nd</sup>, 2000, it established itself as NIHFW recognized Collaborating Training Institute (CTI) for Haryana, J&K and (UT) Chandigarh. After formation of NRHM by Ministry of Health & Family Welfare in 2005 the training universe has expanded exponentially thus making SIHFW, a key driver of the healthcare reforms. It is essential to update all health personnel, personnel of related sector and all stakeholders about the paradigm shift under NRHM and its implication to achieve the broader health objectives. SIHFW has now been established as a society and registered with the Registrar of Societies, Panchkula on 11-11-2010 with the name of “Swasthya Prashikshan Kendra”. SIHFW has made synergistic efforts not only to achieve the training mandate of NRHM but also in setting and ideal training infrastructure in the state by strengthening of DTCs.

**VISION:**

The vision of the Institute is to develop, update and refresh the knowledge and skills of the health care personnel in the state by providing quality trainings at state level and ensuring standardized trainings at district level following the training needs assessment with continual improvement.

**OBJECTIVES:**

- Developing health research and training institute to devise training programs based on the healthcare need assessment of the state.
- To formulate integrated trainings on GOI/NIHFW guidelines.
- To create an academic environment and promote alternative training approaches which are more effective.
- Building pool of skilled health personnel to provide specialized services.
- To update the knowledge and skills of health care personnel.

## **TRAININGS:**

At National level, Training Division in MOHFW issues broad guidelines on training and matters related to policy decisions & NIHFW being the nodal institute co-ordinated all types of training activities.

At State level, SIHFW/CTIs used to conduct TOTs for all types of training and co-ordinate trainings for districts along with State Training Coordinator/State Nodal Officer & State Programme Managers. In some of the trainings like IMNCI, clinical practice sessions are also conducted in the facility to give hands on practical experience.

### **Active role of SIHFW in developing PIP and CTP:**

SIHFW, Haryana has developed a comprehensive training plan (CTP) for the state according to previous pending load, new training load and tentative training calendar of DTC's. CTP incorporates all the training under RCH and other health programmes.

SIHFW is imparting training on various issues of health to the community bodies like VHSC cum VLC, SKS, SMS group so that NRHM mandate can be carried out in an effective manner. PRI training is the capacity building of VHSC cum VLC in respect of preparation of Village Health Charter, Village Action Plan and encouraging community monitoring and planning of untied funds available with VHSC cum VLC. Sakshar Mahila Samooch (SMS) training is an innovative idea of women and child department to rope-in educated women in the health department for mass awareness.

### **NEW INITIATIVES TAKEN BY SIHFW IN FY 2012-13: -**

#### **Linkage of ESI with SIHFW**

Initiative taken to train the Medical and Para Medical staff of ESI in different trainings like Maternal Health, Child Health & Family Planning.

#### **External monitoring of trainings by PRC, Chandigarh**

To monitor the quality of trainings thus imparted to health personnel and the effect on service delivery and consequently impact on health indicators and to ensure an authentic & fair exercise, Population Research Centre (PRC), an external agency is being hired with the above purpose in mind.

**ACLS/BLS training courses:**

Almost 80 percent of sudden cardiac arrests happen at home. Currently, less than 12 percent of victims survive sudden cardiac arrest. Effective bystander CPR provided immediately after sudden cardiac arrest can double or triple a victim's chance of survival, but only 41 percent of cardiac arrest victims get CPR from a bystander. Sudden cardiac arrest can happen to anyone at any time.

**ISO 9001:2008 Certification**

To ensure the congenial work environment and smooth functioning of all activities in SIHFW, a process to ISO certification has been started by the Institute during the year with considering the common goal of health services.

**Curing Clubfoot Pilot Project**

SIHFW has taken the initiative to run a project on pilot basis at GH, Sector-6, Panchkula for which infrastructure and human resource will be generated. In this context, a seminar was organized by SIHFW in which Orthopaedic Surgeons from Haryana and UT Chandigarh and Dy. Civil Surgeon (IBSY & School Health Programme) of State Haryana were sensitized about Clubfoot.

**Assessment of ANMTC/GNMTC of the State**

The major bottleneck in delivery of quality RMNCH services particularly at primary and secondary health facilities is adequate knowledge and skills of ANMs and staff nurses. There is a dire need of reforming Pre Service Education for nursing & midwifery. Adherence to standard protocols at health facilities, labor rooms, NICUs etc as quality of PSE is sub-optimal. To strengthen the foundation of nursing and midwifery education in Haryana and to produce ANMs and Staff Nurses who are competent, confident & committed, State has decided to take priority action for strengthening of teaching and training capacity of GNM/ANM schools.

**Training Management Information System (TMIS)**

Training Management Information System (TMIS) is a tool to collect all the data of trainings conducted at National, State and District level related to Medical Officers, Staff Nurses, MPHWS and other staff of Health Department.

## HLFPPT (Hindustan Latex Family Planning Promotion Trust)

SIHFW has signed a MoU for 2 years with HLPPT (Hindustan Latex Family Planning Promotion Trust) which has successfully carried out public health programs at the Central and State government levels with NRHM and has been an implementation partner of NRHM.

## INFRASTRUCTURE AND MANPOWER:

### Academic Block

To provide better computer facilities in the office, a separate computer cell has been established in Academic block which is equipped with computers on N-computing system. IT cell with Wi-Fi connectivity has been set up which is now being utilized in conducting HMIS training and various hands on activities required to be conducted on computers with internet connections.

### Library

SIHFW library has the collection of books more than 2500 including new and latest edition of popular authors in the medical field. Library is equipped with computerized database with the help of library software “e-Granthalaya” to maintain library books and to provide better library services..

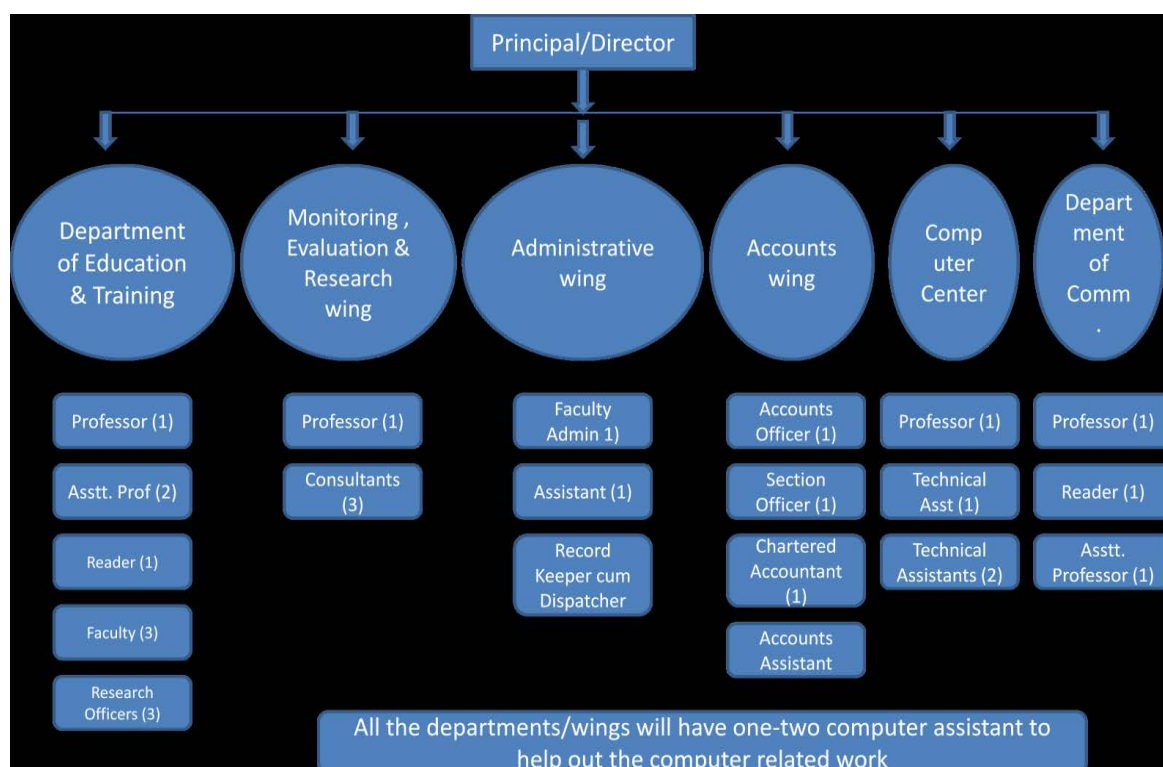


Fig 1 Organogram of SIHFW, Haryana

## **WORK EXPERIENCE AND LESSONS LEARNED:**

### **Launch of Adolescent health scheme-**

1. Rashtriya Kishore Swasthya Karyakram(RKSK)

2. Menstrual Hygiene Scheme (MHS)

Both for Adolescent Health age group 10-19 yrs - By Health Minister, Haryana Mr.Rao Narendra Singh

### **Learnt about various trainings** which were undertaken by SIHFW.Haryana

- Good amount of trainings of trainers are taking place in the institute. During my training tenure of three months, trainings on PPIUCDS, PNC, DTO meetings etc. were conducted.
- A white board on the entrance is constantly being maintained by the Librarian regarding Thoughts and Messages by great authors, which is a good initiative to motivate the employees for work-life balance and positive approach towards work.
- There is an inadequate communication and liaison between the states of Haryana and Jammu & Kashmir and UT of Chandigarh at SIHFW Panchkula.
- Some posts of Consultants like Consultant (Management) and Consultant (Finance) are missing that need to be filled up for accelerated functioning and monitoring in all the districts as monitoring visits are not conducted on a regular basis by SIHFW.
- Visited various PPIUCD delivery points in Panchkula and Ambala covering general hospitals, CHC and PHC. None of the visit was facilitated by SIHFW. All the arrangements were self efforts.