SUMMER INTERNSHIP PROGRAM

at

NATIONAL HEALTH MISSION, JAIPUR

From 6 May 2024 to 5 July 2024

A REPORT BY

Deepak Kumar

Master of Business Administration

Hospital and Health Management

2023-25

under the Mentorship of

Dr. Arindam Das, Ph.D.

Government of Rajasthan
National Health Mission, Rajasthan
Department of Medical, Health & FW, Swasthya Bhawan, Jaipur
Tel.No.0141-2229108, Email ID: spm_raj.nrhm@yahoo.com

No. F 2 (153) NHM/SPM/2024/ 847 Dated: 5/7/24

CERTIFICATE

This is to certify that **Mr Deepak Kumar**, student of MBA, Indian Institute of Health Management Research (IIHMR University, Jaipur) has successfully completed his Summer Training at National Health Mission, Rajasthan from 06/05/2024 to 05/07/2024. He has worked on the project-

POST NATAL CARE UNDER MATERNAL HEALTH

His performance was found satisfactory. We extend him good wishes for a bright and successful career ahead.

(Dr Jitendra Kumar Soni)
Mission Director, NHM
Special Secretary
Medical Health & Family Welfare

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that Mr. **DEEPAK KUMAR of** academic year 2023-25 of **INSTITUTE OF HEALTH MANAGEMENT RESEARCH** has prepared a poster with respect to his summer internship held during May-June 2024.

He has carried out work as per the guidelines. His poster is approved for presentation.

Arindam Das.

Date: 25/07/2024

(Signature of Faculty Mentor)

Dr. Arindam Das, Ph.D.

Professor

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SUMMER INTERNSHIP PROGRAM
IIHMR UNIVERSITY, JAIPUR
Evaluating Postnatal Care Practices in Rajasthan

Deepak Kumar
Roll -1700 (HM)

Organization Mentor – Dr. Abhinav Agarwal (SNO)

BRIEF HISTORY AND ABOUT ORGANISATION

The National Health Mission (NHM) in Rajasthan, launched in 2005, aims to provide accessible, affordable, and quality healthcare, focusing on rural and urban populations. It strengthens health systems, improves maternal and child health, fight diseases, and promotes health education, prioritizing marginalized groups to ensure equitable access.

MISSION

The goal is to provide high quality healthcare for all, especially the underserved, by improving services, reducing mortality, enhancing infrastructure, boosting capacity, involving communities, controlling disease, and raising health awareness.

VISION

The main aim is universal health coverage by reducing inequality, improving infrastructure, promoting healthy lifestyles, and involving communities in health initiatives for high-quality, affordable healthcare for all.

Objective

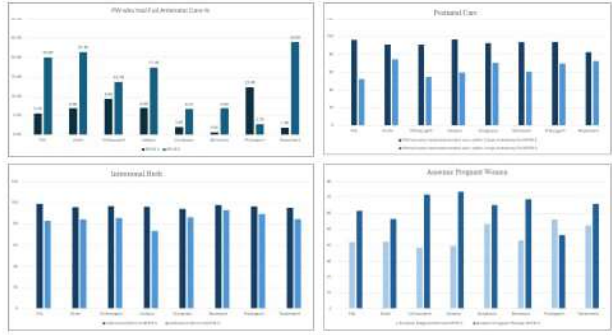
Progress and effectiveness of postnatal care services provided to mothers.
Analysis of NFHS data On ST Dominant district of Rajasthan in Maternal Health Indicators.

Methodology

Reviewed reports and studies from both government and non-government sources.
Analyzed data from the National Family Health Surveys.
Assessed the administrative support available.

Organization Structure

Analysis of ST Dominant Districts



SWOT Analysis

Learning During Internship

a) Practical understanding of departments, the regulatory framework, and the operations of NHM.

b) Introduced to how a health care system operates.

c)Learn how to analyze data and create reports.

d)Better understanding of organization on large scale.

Practical Exposure vs Theoretical Work

a)It gave me the information and resources I needed to assess and recommend solutions for challenging healthcare management issues.

b)Theoretically, I studied the healthcare system widely, but I found that it takes more resources and more difficult to implement in practice than written materials.

Findings

a)The postnatal care shows increased across all regions. Significant improvements are noted in Pali and Sirohi, with moderate gains in Chittaurgarh, Udaipur, and Dungarpur. Banswara, Pratapgarh, and Rajsamand show minimal yet positive changes.

b) Institutional births are consistently high across all regions. However, anemia among pregnant women remains prevalent, with some regions showing improvements and others remaining constant or slightly increasing.

Usefulness of Internship

a) Improved Capabilities for Communication.

b) Interaction with higher authorities.

c)It improves how to develop decision-making abilities by providing practical experiences.

d)It helps me to understand the different departments of NHM.

Challenges

a) Lack of training.

b) Resources are limited.

c) Field Work Difficult in rural region.

d)Lack of time for data collection.

Suggestions

a)Training is required prior to doing the survey.

b)It was necessary to do additional research on many aspects of postnatal care cases and to study populations across all districts.

c) A camp to raise awareness of post natal care importance in rural regions and to educate the community.

d) Data collecting needs to be more precise.

ABOUT ORGANISATION

The National Health Mission (NHM) in Rajasthan aims to provide accessible, affordable, and quality health care to the state's rural and urban populations. Launched by the Government of India in 2005, NHM Rajasthan focuses on strengthening health systems, improving maternal and child health, combating diseases, and promoting health education. Key initiatives include expanding healthcare infrastructure, enhancing human resources, and implementing various health programs. Special attention is given to marginalized and vulnerable groups to ensure equitable healthcare access. NHM Rajasthan collaborates with various stakeholders to achieve its objectives, contributing significantly to the state's public health improvements.

MISSION

The main goal is to increase everyone's access to high-quality healthcare, especially those with limited resources. To achieve this, the organization works to improve healthcare services, lower maternal and infant mortality, strengthen infrastructure, increase capacity, promote community involvement, control disease, and raise public health and education awareness.

VISSION

With a focus on lowering health disparities, improving health infrastructure, encouraging healthy lifestyles, and encouraging community involvement in health initiatives for future health improvements, the main aims to achieve universal health coverage by providing everyone with access to high-quality, affordable healthcare.

POSTER

IIHMR UNIVERSITY

Deepak Kumar
Roll -1700 (HM)

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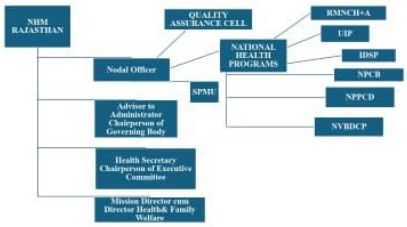
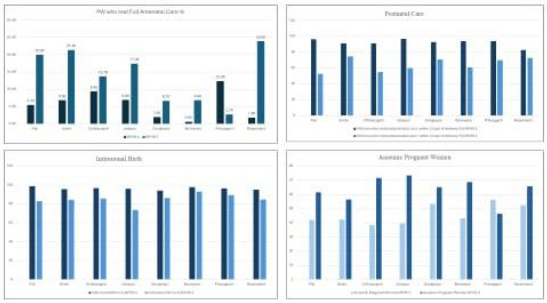


Analysis of ST Dominant Districts



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Weekly Report

Week 1

(6th May- 11th May)

Name of the Organisation: NHM, Jaipur

Area/ Department/ Project of Summer Internship Program: Not yet allotted

Name of the Student: Deepak Kumar

Roll no: 1700 **Stream: MBA Hospital & Healthcare Management**

Week no: 1 **From: 6th May, 2024 to 6th July, 2024**

Activity Done	• The week began with an orientation on various National Health Programs operational in Rajasthan, where Directors or State Program Officers introduced and instructed on each program. Here's the breakdown by day: • - Day 1: Family Welfare, Immunization & Supply Chain, Mobile Medical Units, Ayushman Arogya Manthan, Pre-Conception and Pre-Natal Diagnostic Techniques Act. • - Day 2: Quality Assurance, Community Health, Mukhyamantri Nishulk Dava Yojna, Mukhyamantri Nishulk Jaanch Yojna, Maternal Health. • - Day 3: National Programme for Prevention and Control of Non-Communicable Diseases, National Vector Borne Disease Control Programme. • - Day 4: Integrated Disease Surveillance Programme. • - Days 5 and 6 were off.
Linking theory (Classroom learning) with practice at your organisation	• Classroom study of various facets of Public Health contributed to a deeper comprehension of National Health Programs and societal challenges. • Epidemiology and Demography were extensively utilized to analyze disease prevalence across different districts of Rajasthan. Understanding the structure and operations of Public Health Systemsand other health institutions further facilitated grasping the framework.
Gaps identified on the working area.	• So far, we haven't conducted a formal gap analysis as the orientationis ongoing. However, based on the lectures we've received on varioushealth programs, we've identified several gaps hindering the successof these National Health Programs: • • a) Attitudes and perspectives of the population • b) Technical limitations leading to a lack of technology integration • c) Insufficient intersectoral coordination • d) Inadequate training and knowledge • e) Resistance to change
Suggestions for improvement	**NA**

Plan for the next week	• The orientation will extend into the first two days of the week. • Following that, I'll be prompted to select a program of interest, after which we'll commence work in our designated areas.

Weekly Report

Week 2

(13th May- 18th May)

Name of the Organisation: NHM, Jaipur

Area/ Department/ Project of Summer Internship Program: Maternal Health

Name of the Student: Deepak Kumar

Roll no: 1700 **Stream: MBA Hospital & Healthcare Management**

Week no: 2 **From: 13th May, 2024 to 18th July, 2024**

Activity Done	• The Orientation of different National Health programs that are operational in the state of Rajasthan continued. • Directors or State Program Officers generally introduce and teach about the concerned National Health Programs. **Following is the day wise list of activities:** • **13th May:** Orientation of Rashtriya Bal Swasthya Karyakram, Rashtriya Kishor Swasthya Karyakram, National Programme for Control of Blindness, National Leprosy Eradication Programme. • **14th May:** Orientation of ASHA, DEO-Family Welfare, NUMH, National Tuberculosis Eradication Programme, National Mental Health Programme. • **15th May:** Departments were allotted. I choose Maternal Health. • **16th May:** Reporting to respective departments. • **17th May:** Basic orientation of the workflow in NHM. • **18th May:** It was off.
Linking theory (Classroom learning) with practice at your organisation	• Different aspects of Public Health studied in the classroom helped develop a better understanding of the National Health Programs along with the issues prevailing in the society. • Epidemiology and Demography was widely used to discuss the disease prevalence of different districts of Rajasthan. • The knowledge of the structure and working of Public health Systems and several other Health institutions helped to better understand the framework.

Gaps identified on the working area.	• Till now we haven't actually performed any gap analysis to figure out the gaps as still the orientation is going on. • But from the lectures that we have received on different health programs we have figured out that despite efforts by the govt., are some the gaps that are hindering the success of these National HealthPrograms: a) Behavior/perspectives of population b) Lack of technology integration due to technical limitations c) Lack of interpectoral coordination d) Lack of proper training and knowledge e) Resistance to change
Suggestions for improvement	• **NA**
Plan for the next week	• On Monday my mentor would brief us more about the working ofthe Health Programme and assign some work.

Weekly Report
Week 3

(20th May- 25th May)

Name of the Organisation: NHM, Jaipur

Area/ Department/ Project of Summer Internship Program: Maternal

HealthName of the Student: Deepak Kumar

Roll no: 1700 Stream: MBA Hospital & Healthcare

ManagementWeek no: 3 From: 20th May, 2024 to 25th

July, 2024

Activity Done	• Analyzed maternal health data for the year 2023-24 across variousdistricts and their respective blocks using the PCTS portal. • Studied various Key Performance Indicators (KPIs) used to monitor and evaluate maternal health performance across these districts (Maternal Health Report). • Derived insights from the data based on the defined KPIs and created presentations to share these findings. • Studied MCH wings, Kushal Mangal Karyakram, Safe Motherhood Camps, and Prasuti Niyojan Diwas. • Introduced to various frameworks for Maternal Health Data reporting systems. Following is the day wise list of activities: • 20th May: Studied Kushal Mangal Karyakram, Safe MotherhoodCamps, and Prasuti Niyojan Diwas. Discussed the basic framework of Maternal Health Data reporting, PCTS, and MDSRportals with my mentor. Gained insights into how the data is reported and made available on the portal. • 21st May: Analyzed the Maternal Health Report (MHR) data for Dausa District and its blocks, drew insights, and created a presentation. • 22nd May: Analyzed the MHR data for Jaipur-1 and its blocks, drew insights, and created a presentation. • 23rd May: Studied various Key Performance Indicators (KPIs) used to monitor maternal health services and assessed the impact of government interventions in the state. • 24th May: Reviewed data from several districts and selected Kotadistrict for further analysis of their public maternal health services.Studied about MCH Wings. • 25th May: Day off.

Linking theory (Classroom learning) with practice at your organisation	• I used the concepts of Biostatistics to derive insights from the dataas the data provided was not evenly distributed. So the concepts of median and Quartiles was used. • Concepts of Healthcare delivery systems module helped understand the various divisions the public health services and their working.
Gaps identified on the workingarea.	• The basic template used for presenting the Yearly Maternal HealthReport is incomprehensible and filled with tables, making the presentations unclear and ineffective. The data presented in the report is only from the previous year, • lacking a reference year for comparison to assess blockperformance and improvement areas.
Suggestions for improvement	The present data should be mentioned alongside the data from theprevious year. • Instead of just entering data in tables, graphs and heat mapsshould be used to present insights from the data.
Plan for the next week	On Monday the Ppt for Kota would be submitted before theNodal officer. Through PCTS portal previous year data would be analysed to derive insights from it and evaluate the impact of theinterventions

Weekly Report
Week 4

(27th May- 1st May)

Name of the Organisation: NHM, Jaipur

Area/ Department/ Project of Summer Internship Program: Maternal

HealthName of the Student: Deepak Kumar

Roll no: 1700 Stream: MBA Hospital & Healthcare

ManagementWeek no: 4 From: 27th May, 2024 to 1st May,

2024

Activity Done	• Analysed PCTS data of Bikaner and Prepared presentations forthe same. • Analysed PCTS data of Ajmer and Jaipur Zone and their blocksagainst various KPIs and presented it. • Found the major causes of maternal deaths using the data available and presented in the annual meeting held on 31st forthe year 2023-24. Following is the day wise list of activities: • 27th May: Analyzed the PCTS data of Bikaner. • 28th May: Prepared presentation of the Bikaner analysis. • 29th May: Analyzed data of Jaipur Zone (Jaipur 1 & 2). • 30th May: Found the major causes of maternal death in the areaand compared the estimate total no. of maternal deaths with maternal deaths reported and reviewed. Analyzed data of AjmerZone performed the same analysis. • 31st May: Hosted the annual online meeting for the year 2023-24, a discussion on the targets achieved in the year 2023-24 against several KPIs and current situation of the maternity facilities and services in the state of Rajasthan. Director Maternal Health, Project Director, State Nodal officer alongwith BCMOs, RCHOs, MS, Doctors, and Nurses etc. were present in the meeting. • 1st July: Day off.
Linking theory (Classroom learning) with practice at your organisation	• I used the concepts of Biostatistics to derive insights from the data as the data provided was not evenly distributed. So the concepts of median and Quartiles was used. • Concepts of Healthcare delivery systems module helped understand the various divisions the public health services and their working.

Gaps identified on theworking area.	• The reporting of data on the PCTS portal is not done efficiently.There are gaps in the data. • The original records and PCTS data vary from each other.
Suggestions for improvement	• NA
Plan for the next week	• I will start figuring out & researching on the Project topic forthe Summer Internship.

Weekly Report

Week 5

(2nd June – 8th June)

Name of the Organisation: NHM, Jaipur

Area/ Department/ Project of Summer Internship Program: Maternal Health

Name of the Student: Deepak Kumar

Roll no: 1700 Stream: MBA Hospital & Healthcare Management

Week no: 5 From: 3rd June – 8th June

Activity Done	• Studied about Geospatial Analysis and how it is used in Public Health. • Performed Geospatial analysis of Karauli district to derive insights from the maternal health Line listing data available. • Studied protocols for treatment, screening and management of several complications and disease of Maternal Women. **Following is the day wise list of activities:** • **3rd June:** Studied and compared various differences in the Service provider's manual for the Comprehensive Abortion care of NHM Rajasthan and Central Govt. • **4th June:** Studied the treatment, screening and management of Deworming, Gestational Diabetes Mellitus, and TB & Hypothyroidism. • **5th June:** Studied the treatment, screening and management of complications related PPH, Preeclampsia, Eclampsia, HIV Hepatitis & The usage of Partograph in monitoring the health of Mother and the baby. • **6th June:** Studied Geospatial Analysis its various aspects. • **7th June:** Performed Geospatial analysis on the maternal deaths line listing data available and presented it before the SNO sir. Researched topics for the Summer Internship Project and discussed with the Mentor. • **8th June: Day off.**
Linking theory (Classroom learning) with practice at your organisation	• I used the concepts of Biostatistics to derive insights from the data as the data provided was not evenly distributed. So the concepts of median and Quartiles was used.
Gaps identified on the working area.	• The reporting of deaths is not efficient enough as accurate data is not available. • There is no professional format being used for the data entry of the maternal health data.

Suggestions for improvement	• A standard format should be used for the line listing for maternal deaths using excel. Data validations techniques, Standard data entry procedures should be used.
Plan for the next week	• The blueprint of the research topics for the summer internship project will be submitted before the SNO sir and he will the further guide as • how to proceed with it.

Weekly Report

Week 5

(2nd June – 8th June)

Name of the Organisation: NHM, Jaipur

Area/ Department/ Project of Summer Internship Program: Maternal Health

Name of the Student: Deepak Kumar

Roll no: 1700 Stream: MBA Hospital & Healthcare Management

Week no: 5 From: 3rd June – 8th June

Activity Done	• Studied about Geospatial Analysis and how it is used in Public Health. • Performed Geospatial analysis of ST Dominant district to derive insightsfrom the maternal health Line listing data available. • Studied protocols for treatment, screening and management of several complications and disease of Maternal Women. **Following is the day wise list of activities:** • **3rd June:** Studied and compared various differences in the Service provider's manual for the Comprehensive Abortion care of NHM Rajasthan and Central Govt. • **4th June:** Studied the treatment, screening and management of Deworming, Gestational Diabetes Mellitus, and TB & Hypothyroidism. • **5th June:** Studied the treatment, screening and management of complications related PPH, Preeclampsia, Eclampsia, HIV Hepatitis & The usage of Partograph in monitoring the health of Mother and the baby. • **6th June:** Studied Geospatial Analysis its various aspects. • **7th June:** Performed Geospatial analysis on the maternal deaths line listing data available and presented it before the SNO sir. Researched topics for the Summer Internship Project and discussed with the Mentor. • **8th June: Day off.**
Linking theory (Classroom learning) with practice at your organisation	• I used the concepts of Biostatistics to derive insights from the data as the data provided was not evenly distributed. So the concepts of median and Quartiles was used.
Gaps identified on the working area.	• The reporting of deaths is not efficient enough as accurate data is not available. • There is no professional format being used for the data entry of the maternal health data.

Suggestions for improvement	• A standard format should be used for the line listing for maternal deaths using excel. Data validations techniques, Standard data entry procedures should be used.
Plan for the next week	• The blueprint of the research topics for the summer internship project will be submitted before the SNO sir and he will the further guide as • to how to proceed with it.

Weekly Report

Week 6

(10th June- 15th June)

Name of the Organisation: NHM, Jaipur

Area/ Department/ Project of Summer Internship Program: Maternal Health

Name of the Student: Deepak Kumar

Roll no: 1700 Stream: MBA Hospital & Healthcare Management

Week no: 6 From: 10th June, 2024 to 15th June, 2024

Activity Done	• Studied about different interventions being carried out in the Rajasthan for improving maternal health. • Study different programs of Central and the state government forthe post natal care of India. • Did literature review of the articles and research papers availableon maternal health of India. • Went to Karauli, Rajasthan for primary data collection. Following is the day wise list of activities: • 10th June: Studied about different interventions being carried outin the tribal belts of Rajasthan for improving maternal health. • 11th June: perform the literature review of the articles and researchpaper available on the maternal health of India. • 12th June: perform literature review. • 13th June: studied about the demography of Karauli Rajasthan, it's performance with respect to maternal health against several indicators laid out by the National Health Mission Rajasthan. • 14th June: Field Visit to Karauli, Rajasthan. • 15th June: Field Visit to Karauli, Rajasthan.
Linking theory (Classroomlearning) with practice at your organisation	• Different aspects of research methodology like framing a research question, performing a literature review etc. • Different types of Data collection like questionnaires, interviews group group interviews etc. was done practically during the primary data collection.
Gaps identified on theworking area.	• Despite special interventions being laid out by the government there are areas that are hard to reach and lakh basic and essentialmaternal Health services.

	• Post natal care practices of using natural and traditional methodsof treatment is still prevalent. • Literacy and family earnings still remains the most significantcause of the resistance.
Suggestions for improvement	• For the areas that are hard to reach and are flood prone thereshould be a provision of birth waiting rooms . • Special interventions must be late down by the ministry of childand women development to improve the literacy rate in hard to reach and pocket villages of India . • There are places where mobile medical units and ambulance arenot available due to the lack of transit routes. So some interventions must be specifically designed for these areas to improve the emergency services.
Plan for the next week	• Prepare a report of the field visit and proceed with the gapfinding.

Weekly Report

Week 7

(17th June- 22nd June)

Name of the Organisation: NHM, Jaipur

Area/ Department/ Project of Summer Internship Program: Maternal

HealthName of the Student: Deepak Kumar

Roll no: 1700 **Stream: MBA Hospital & Healthcare Management**

Week no: 7 **From: 17th June, 2024 to 22nd June, 2024**

Activity Done	• Analysed the data collected on the field visit. • Prepared a presentation to discuss the Maternal Health scenarioin ST Dominant District. • Worked on the Project Report
Linking theory (Classroom learning) with practice at your organisation	• Different aspects of research methodology like framing a researchquestion, performing a literature review etc. • Different types of Data collection like questionnaires, interviewsgroup group interviews etc. was done practically dhe primary data collection.
Gaps identified on the workingarea.	• Despite special interventions being laid out by the government there are areas that are hard to reach and lakh basic and essentialmaternal Health services. • Tribal practices of using natural and traditional methods of treatment is still prevalent. • Literacy and family earnings still remains the most significant cause of the resistance of this tribal community to change.

Suggestions for improvement	• As per the central government 50% salary of Asha shouldbe fixed and50% should be incentive based. • For the areas that are hard to reach and are flood pronethere should be aprovision of birth waiting rooms . • Special interventions must be late down by the ministryof child and women development to improve the literacyrate in hard to reach andpocket villages of the tribal belts. • There are places where mobile medical units and ambulance are not available due to the lack of transit routes.So some interventions must bespecifically designed for these areas to improve the emergency services.
Plan for the next week	• Report and Poster Completion.

Week 8

(24th June- 29th June)

Name of the Organisation: NHM, Jaipur

Area/ Department/ Project of Summer Internship Program: Maternal Health Name of the Student: Deepak Kumar

Roll no: 1700 Stream: MBA Hospital & Healthcare

Management Week no: 8 From: 24th June, 2024 to 29th June, 2024

Activity Done	• Finalized the Summer Internship report. • Made Corrections
Linking theory (Classroom learning) with practice at your organisation	NA
Gaps identified on the working area.	NA
suggestions for improvement	NA
Plan for the next week	NA

Compiled Reporting Format

Name of the Organization: NHM

Area/ Department/ Project of Summer Internship

Program: Name of the Student: Deepak Kumar

Roll no: 1700 **Stream:** MBA Hospital & Healthcare Management

Activity Done	During my eight-week summer internship at NHM, Jaipur, I participated in an extensive orientation on various National Health Programs, including Maternal Health. Activities included analyzing maternal health data mainly focused in postnatal care, studying key performance indicators, performing geospatial analysis, and conducting field visits for primary data collection. Classroom concepts in biostatistics, epidemiology, and healthcare delivery were applied to real-world scenarios. Identified gaps included inadequate technology integration, insufficient intersectoral coordination, and lack of proper training. Recommendations for improvement focused on enhancing data reporting, increasing training, and improving accessibility to healthcare services in remote areas. The internship provided valuable insights into public health challenges and program implementation.
Linking theory (Classroom learning) withpractice at your organization	• National Health Programs and the problems facing society improved with the study of various public health topics in the classroom. • It was common practice to discuss the disease prevalence of Rajasthan's variousdistricts using epidemiology anddemography. • Understanding the various public health service divisions and how they operate was made easier by the Healthcare Delivery Systems Concepts module.

Gaps identified on the working area.	• Resistance to change is strongly influenced by family income and literacy. • There is frequently restricted access to healthcare facilities in rural and isolated places. This may cause postnatal care for new moms and their babies to be delayed orprevented. • In rural areas, there is frequently an absenceof qualified medical personnel, such as nurses, doctors, and health care workers. The availability and quality of postnatal care services are impacted by this. • A lot of rural healthcare institutions lack the basic infrastructure, including the suitable equipment and supplies needed for postpartum care. The importance of postnatal care is not sufficiently understood by new moms and their families. This may result in the inadequate utilisation of the services thatare offered. • It can occasionally be difficult to receivethe right postnatal care due to cultural customs and beliefs. • Data collection and monitoring gaps frequently occur, making it challenging to evaluate the success of PNC programmes and pinpoint areas in need of improvement.
Suggestions for improvement	• Space management is required for thepurpose of sampling. • Appropriate ID system is required for the handlers, involved in handling of samples. • Third party transportation should be done todeal with limited transportation facility. • Need to reduce the pendency of previous samples that were needed to received and sent to labs.