Internship
at
Collectives of Integrated Livelihood Initiatives (CInI)
(An initiative of Tata Trusts)
1st February 2022 – 30th April 2022
&
Khushi Baby
13th May 2022 – 30th June 2022

By
Dr Pooja
MBA
(Health stream)

Guided by:
Dr Goutam Sadhu
Mr. Mohammed Shahnawaz

MBA Hospital and Health Management

IIHMR University, Jaipur
2020-2022

CInI
An Initiative of TATA TRUSTS

Ref No. : CInI/ADMIN/2022-23/142

June 14, 2022

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Dr. Pooja, a student of IIHMR University, Jaipur has successfully completed her internship assignment "Baseline Assessment for select HWCs" with Collectives for Integrated Livelihood Initiatives (CInI) at Panna, Madhya Pradesh from February 1, 2022 to April 30, 2022.

We wish her all the best for her future endeavors!

With Regards,

Mala Roy
Program Leader

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1st February 2022 – 30th April 2022

ACKNOWLEDGEMENT

I would like to express my deepest appreciation and gratitude to my mentor Dr Goutam Sadhu for his support and guidance, I truly thank him for his stimulating guidance, instructions, and continuous encouragement for the completion of this report.
Also, I would like to thank my college placement team for providing me this opportunity to work under this organisation.

I would like to extend my deep gratitude to my guide Dr Abhijit Chowdhury and Dr Rehan for their constant support and guidance.

I would like to extend my sincere and heartfelt thanks to all the district consultants for accepting me as an intern and providing me with a great deal of opportunity to learn.

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Introduction

Tata Trusts has been working with Government of Madhya Pradesh, since 2016, to strengthen RMNCH+A services. In appreciation of the support extended by the Trusts, in February 2022, a fresh MOU was executed to implement Madhya Pradesh Health Systems Strengthening Program (MPHSSP).

The MPHSS program envisages to improve quality of Comprehensive Primary Healthcare Services in 23 High Priority Districts including 8 Aspirational Districts. Under this project, the CPHC consultants of Tata Trusts will provide techno-managerial support and facilitate deployment of appropriate technology platforms, to develop select HWCs and UPHCs as Model Health Facilities. The consultant will work in close coordination with the District Health Society and be engaged with the District Administration for support, periodic monitoring and reviews.

Under the MPHSS project, key focus area is to strengthen CPHC services at HWCs and UPHCs, supporting the provision of 12 basic services in phased manner through intradepartmental convergence.

Through college placement of IIHMR University, I was given this opportunity to work as a district consultant in Panna district of Madhya Pradesh. There, my work is to mentor healthcare workers at designated Health and Wellness Centres (HWCs), conduct supportive supervisory visits to facilitate NHM guidelines compliance, coordinate with stakeholders and required agencies to close assessed gaps, attend and conduct trainings for capacity building wherever needed, in accordance with the latest programmatic developments and Government guidelines.

Objective of the Internship

- To work on health system strengthening in Panna district of Madhya Pradesh
- To identify and select the health care facilities based on the selection criteria
- To do the baseline assessment in the selected Health and Wellness Centres and then handhold identified health care facilities to establish them as model centres as per the Comprehensive Primary Health Care (CPHC) guidelines.

Organization Profile

Collectives of Integrated Livelihood Initiatives (CInI)

(An initiative of Tata trusts)

Over the years, the Trusts have endeavoured to be instruments of change – changing lives of disadvantaged communities across the country. But then, a once-in-a-lifetime globally prevailing event constrains efforts and threatens to change the very existence and the way people live. The continuing prevalence of the Covid-19 pandemic, for the second year running, is severely testing the world; more so developing countries such as India.

The year under review witnessed the Trusts working with various government bodies and like-minded partner institutions to help alleviate the sufferings brought about by a relentless Covid. Even as the pandemic first broke out in March 2020, the Trusts' teams worked at speed, amidst stringent lockdowns, distributing supplies of Personnel Protection Equipment to equip frontline workers across the country. Immediately thereafter, the Trusts began an India-wide community outreach programme to encourage adoption of good practices in rural areas to check the spread of Covid. Over 12 million people across 21 states were covered through videos and audio messages, produced in-house in various languages and even remote dialects. Notably, the Trusts partnered with several state governments in augmenting healthcare infrastructure and set up Covid care facilities with a combined capacity of over 950 beds at 7 brownfield facilities across Uttar Pradesh, Maharashtra, Rajasthan and Gujarat. Through a focused programme implemented across 6 states, the Trusts helped thousands of migrant workers who were suddenly left jobless, along with their families. In order to augment the availability of trained medical resources, 9,800 medical professionals comprising 3,700 doctors, 5,000 nurses and 1,100 paramedics were trained on Covid protocols.

While the pandemic understandably dented efforts and stretched resources of the teams, programmes in other priority areas continued, albeit at a slower pace. Mobile Medical Units were launched to offer free check-ups for various cancers and other non-communicable diseases. Partnerships were forged to advance the status of women and children impacted by the pandemic. The Trusts' programmes in Education, Menstrual Hygiene Management, Nutrition and Health were re-imagined to overcome constraints posed by the pandemic. These are just some of the punctuation marks in a year-long

statement of efforts that focused on enhancing livelihoods of marginalized farmers, ensuring education of rural children, development of water resources and sanitation facilities in villages, and provisions of fortified nutrition in various needy blocks, besides others.

Collective for Integrated Livelihood Initiatives – CInI, is an initiative of Tata trusts. CInI in Jamshedpur, established on May 17, 2007, is a resource organization working for food and livelihood security of tribal communities living in the Central Indian tribal belt. This region cuts across states of West Bengal, Orissa, Jharkhand, Chattisgarh, Madhya Pradesh, Gujarat, Maharashtra and South Rajasthan. CInI aims to transform the lives of tribal households in the Central India tribal belt, through building knowledge and scaling up programmes in thematic areas of agricultural productivity stabilization, forest based livelihoods, water resource development, drinking water and sanitation, microfinance and strengthening community based organisations. The key thematic intervention areas of CInI include 'Food Security, Water resource Development, H Micro-Finance, Community Based Institutions, and Forest Based Livelihoods. CInI works in partnership with 25 civil society organizations to reach over 450,000 households across the region. CInI is the nodal agency for the Central India Initiative of the Tata Trusts. It works to develop the project clusters as strong demonstration sites for comprehensive tribal development. CInI provides technical backstopping, programme development and management support, knowledge management and coordination support. Set up in 2007, CInI has a team of 250+ professionals.

Services provided by the organisation/ Project

Collectives for Integrated Livelihood Initiatives (CInI), Jamshedpur, established on May 17, 2007 is a nodal agency of the Trusts, anchoring the Central India Initiative. CInI aims to transform the lives of tribal households in the Central India tribal belt, through building knowledge and scaling up programmes in thematic areas of agricultural productivity stabilization, forest based livelihoods, water resource development, drinking water and sanitation, microfinance and strengthening community based organisations.

In the past few years, CInI has successfully collaborated with various civil society organisations, agriculture and other knowledge institutions, and state and central government agencies. By availing advanced technologies in agriculture, water resources, energy, drinking water and sanitation it has focused on developing models that can significantly impact livelihoods in the region.

Livelihood

The "Mission 2020- Lakhpati Kisan: Smart Villages" programme aims at making one lakh tribal families 'lakhpati' in an irreversible and sustainable manner with improved quality of life and life choices. At the end of the five-year period, all one lakh households under the programme will see a sharp increase in their annual income to Rs. 1,20,000 or more compared with their baseline earnings of around Rs. 35,000. Under its focused livelihood interventions, CInI is working on enhancing income at the household-level through interventions in agricultural production, livelihood development, promoting non-timber forest products (NTFP) and water resources development.

Education

CInI's education programme is being directly implemented in two locations- Khunti in Jharkhand and Dhadgaon in Maharashtra- covering more than 160 schools with about 73,500 students. The focus is on enhancing the learning- levels of students through improved and innovative teaching methods and tools by co- implementing in the classroom along with training of government teachers. Within the classroom, emphasis is laid on ensuring a print- rich environment for students, access to resources for trigering imagination and quick grasp of concepts, introduction of use of IT in education, promotion of traditional arts and crafts through local resource persons along with development of library corners for inculcating a reading habit from an early age.

Water and Sanitation (WATSAN)

The Water and Sanitation (WATSAN) initiative aims to establish community- managed systems to secure access to safe and sufficient drinking water as well as to achieve open defecation free (ODF) status with improved hygiene behaviour in 56 villages in Jharkhand and Gujarat. This will be rapidly scaled up in next two years to nearly 150 villages.

Sports initiative

The rural- tribal parts of India have given field hockey some of its biggest stars. From Balbir Singh to Nikki Pradhan, the list goes on. Starting in 2016, Tata Trusts and CInI has been laying down the foundation for empowering hockey players in tribal- rural India through Sports programme.

Mission: to impart crucial life skills including teamwork and leadership along with technical instructions on hockey.

The trainings for students are structured at 2 levels:

- Grassroots level training
- Regional development centre (RDC) training

Madhya Pradesh Health System Strengthening Program (MPHSSP)

Project brief:

- Upgradation of all existing PHCs, Urban PHCs and SHCs to HWCs to provide CPHC
- 'Time to care' – to be no more than 30 minutes
- Provision of Essential Package of 12 Services
- Better infrastructure, branding, and patient friendly facilities
- Promotion of Health Promotion and Wellness activities
- Population Based Screening
- Continuum of care through IT application
- Promote Tele-Medicine

The expected outcome of the project is get the Health and Wellness Centres certified with KAYAKALP and NQAS certification.

Key activities/ Projects undertaken

Madhya Pradesh Health Systems Strengthening Program (MPHSSP)

The project on which I had worked during my internship is "Madhya Pradesh Health Systems Strengthening Program (MPHSSP)". In which I worked as District consultant in Panna district of Madhya Pradesh. The MPHSS program envisages to improve quality of Comprehensive Primary Healthcare Services in 23 High Priority Districts including 8 Aspirational Districts of Madhya Pradesh. Under this project, my work was to provide techno-managerial support and facilitate deployment of appropriate technology platforms, to develop selected HWCs and UPHCs as Model Health Facilities of Panna district in Madhya Pradesh. For which I worked in close coordination with the District Health Society and engaged with the District Administration for support, periodic monitoring and reviews. Under the MPHSS project, key focus area was to strengthen CPHC services at HWCs and UPHCs, supporting the provision of 12 basic services in phased manner through intradepartmental convergence.

Key activities under this project:

- Had Induction training by state team for better understanding of project and Comprehensive Primary Health Care
- Meeting with the CMHO, DPM and M & E officer of Panna district of Madhya Pradesh.
- Attended the trainings of CHOs at IPDP, Panna and facilitate all the CHOs
- Visited 24 Sub Health Centre at Panna district of MP
- Selected the 10 HWCs for the project based on the selection criteria after visiting the 24 Sub Health Centre of Panna district of MP
- Attended monthly meetings with state team for the project progress and weekly redmine meetings for NCD support
- Attended training program by IIHMR, Jaipur on Comprehensive Primary Healthcare for Madhya Pradesh Health. System Strengthening Program
- Did microplanning for the year to achieve project targets in team workshop
- Attended Block level Health Mela at 5 Blocks of Panna district organised by MP NHM and had meeting with BMO and BPM of each block for the project brief
- Did monitoring in block level health Mela and filled monitoring checklist given by MP NHM and prepared reports for that

- Did baseline assessment in 10 selected Sub Health Centre using Delta application in Panna district of MP
- Prepared the selected Sub Health Centre for the supportive handholding visits Panna district, MP
- Promoted the Comprehensive Primary Healthcare (CPHC) service delivery in the Panna district, MP
- Mentored the healthcare workers at designated Health and Wellness Centres (HWCs)
- Coordinated with the stakeholders and required agencies to close assessed gaps
- Attended the training for capacity building in accordance with the latest programmatic developments and Government guidelines
- Reported and ensured collation of completed reports from the HWCs in areas of responsibility, analyse them and forward the same to the Project Management Unit
- Prepared MOM of meetings and monthly reports for the submission to the state team for the project

Visit of SHC Hirapur for selection based on selection criteria

Visit of SHC Badagaon for Baseline assessment

Visit of SHC Luhargaon for selection based on selection criteria

Key learnings from the Internship

- Had a better understanding of Public Health and health care delivery system of India
- Learned about in depth concept of comprehensive primary health care
- Observed the health system building blocks at the facility level and got the thorough understanding of service delivery, management of health workforce, health management information system and medical products
- Learned about how to strengthen the health care delivery system by mentoring the health care workers and gap analysis and finally closing the analysed gaps
- Learned about how to do prepare a micro plan for the year and different reporting formats
- Enhanced my communication skills by interacting with health care workers at ground level and various officials
- Developed the better understanding of different health programs
- Learned about Ayushman Bharat Scheme by Government of India for comprehensive primary health care through Health and Wellness Centres
- Learned about KAYAKALP and NQAS quality assessments
- Learned about various application like NCD application and DELTA application
- Got to know about the challenges in strengthening the healthcare delivery system at sub-health centre facility level

Internship
At
Khushi Baby

13th May 2022 – 30th June 2022

KhushiBaby

INTERNSHIP CERTIFICATE

Letter No:Admin/ 2022-23/22 Date : June 30, 2022

This is to certify that **Dr. Pooja** a student of MBA, HHM, IIHMR University, Jaipur, India (batch 2020-2022), has completed an internship at **Khushi Baby** from May 13 to June 30, 2022.

During her internship, Pooja worked under a digital intervention project titled "Intrapartum/labor Room digital Monitoring and Decision Support Tool", (a.k.a. Prasav Watch), being implemented by DMHFW, GoR in technical support of Khushi Baby. Under this project, Pooja conducted a study titled "User Experience on Prasav Watch Application in the Rajasthan State" wherein she tried to understand experiences and challenges towards adaptability of Prasav Watch platform by Health Workers.

During this internship, we have found Pooja hardworking, timbound and sincere. We wish her success in her future endeavours.

DocuSigned by:
Mohammed Shahnawaz
CED640A9D414...

Mohammed Shahnawaz

COO, Khushi Baby

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ACKNOWLEDGEMENT

I would like to express my deepest appreciation and gratitude to Mr. Mohammed Shahnawaz and Mr. Ajay Sharma for giving me this opportunity in Khushi Baby. I truly thank him for their constant support and guidance.

I would like to extend my sincere and heartfelt thanks to Dr Rajeev Singh Dhakad and Dr Kartik Sharma for helping me and guiding me in this report.

I would like to extend my deep gratitude to my guide Dr Goutam Sadhu, Professor, IIHMR University for her stimulating guidance, instructions, and continuous encouragement for the completion of this internship.

I am extremely thankful to all my seniors in Khushi Baby for accepting me as an intern and providing me with a great deal of opportunity to learn.

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Introduction

In 2014, Khushi Baby was born out of a classroom project at Yale University. Over 8 years, Khushi Baby have grown into a 45+ member team based in Rajasthan. In the present scenario, Khushi Baby is the Nodal Technical Support Partner to Department of Health in Rajasthan. Their vision involves scaling across India and building a digital integrated community health platform which covers all national programs. This platform will provide a unified interface for key pillars of public health delivery in India (ASHAs, ANMs and MOICs), across primary health care verticals, to conduct a digital health census, perform longitudinal follow-up, and detect new outbreaks. This platform will adhere to principles outlined in the National Digital Health Mission, but also extend its reach through offline-first capabilities.

My internship in Khushi Baby is to learn about Public Health care delivery system and its integration with digitalization to improve health care delivery system. Even, the MoHFW is also focused in digital Health. They are taking important step away from paper-based tracking methods to National Digital Health Mission. Through, this effort, health delivery can be tracked in a manner more accountable, efficient and impactful. One of the example of this digitalisation of health delivery system by Government of Rajasthan is Prasav Watch application. This is a tablet based "Intrapartum and immediate postpartum Monitoring and Decision support Tool" which is intended for informed decision making by the labour room service provider. This application captures the details of women admitted for delivery in the facility at various stages since admission till discharge. The objective is to provide decision support to healthcare providers and to monitor the performance of facility by using technology and the ultimate goal is to reduce neonatal and maternal mortality through innovative facility-based interventions that enable provision of quality care during and immediate after childbirth.

Objectives of the internship

- To understand the Public Health Care delivery system
- To learn about integration of digital technology with Public Health to improve health care delivery system at the last mile
- To develop a basic understanding of various digital platform and application used by Department of Health, Rajasthan to track record and cases at the facility level
- To learn about various tools and technology used in Digital Health for monitoring and visualisation

Organization Profile

In 2014, Khushi Baby was born out of a classroom project at Yale University. Over 8 years, it has grown into a 45+ member team based in Rajasthan. Together, they tie tradition with technology to uplift community healthcare, especially reproductive and child health (RCH), for underserved populations in rural India. There is interdisciplinary team in Khushi Baby includes physicians, public health professionals, technology developers, designers, data analysts and field experts. There are 17 million+ beneficiaries, 60K+ health workers and 35k+villages in which Khushi Baby is working right now.

Today, Khushi baby is the Nodal Technical Support Partner to Department of Health in Rajasthan.

Vision

Their vision is to scale across India and building a digital integrated community health platform which covers all national programs.

Mission

Their mission is to monitor and motivate community health, especially maternal and child health, at the last mile.

History and Timeline

- **2014-** Born at the Yale Centre for Engineering Innovation and Design
- **2015-** Field-Scoping and 1st Randomized Control Trial
- **2016-** Connection with the District government of Udaipur and funding for a 2-year, 3200-mother randomized controlled trial by the International Initiative for Impact Evaluation.
- **2017-** In 2017, after a year of co-designing the platform with health workers, Khushi Baby launched the intervention with the government - a tablet application for health workers, the Khushi Baby necklace for beneficiaries, a dashboard for health workers, and a dedicated field team for hands-on support - in the form of the region's largest randomized controlled trial.
- **2018-** Khushi Baby delved into design thinking during 2018, which was filled with empathy maps and facilitated discussions with mothers and nurses and there is promising RCT results

- **2019**- Partnership with the Rajasthan Department of Health
- **2020**- Mission LISA for COVID-19 screening adapted from CHIP platform. Also the initiation of COVID-19 Response which include a state-wide WhatsApp chatbot, social media and policy support for the Department of Health, and PPE donations for health workers and policemen.
- **2021-22 -** In the first quarter of 2022, Khushi Baby's flagship solution, the Community Health Integrated Platform (aka CHIP), saw promising developments. Over 5741715 beneficiaries across the state of Rajasthan had a health screening performed by an ASHA (village-level community health worker) using the Digital Health Survey module.

Looking ahead, Khushi Baby is excited to help build integrated digital health systems with the Department of Health, implementing AI models to track health worker diligence and predict maternal and child health risks, and automating mechanisms to encourage and document follow-up with those in most need - to monitor and motivate community health, to the last mile.

Services provided by the organization and Projects

Provide digital solutions to ensure accountability awareness and access to public health care services and digitizing beneficiaries' information and tracking them for due services. One of the solution is Interlinked mobile application (ASHA, ANM and MOICs). The platform has been developed as per National guidelines (e.g. RCH Register, CBAC form, NCD portal, Nikshay follow-up and registration, ASHA register and Delivery register)

Key Projects:

CHIP (Community Health Integrated Platform)

The Community Health Integrated Platform is an effort to address the primary health gaps beyond reproductive and child health by including and integrating NCD management and infectious disease surveillance. The platform has been developed as per national guidelines (e.g. RCH Register, CBAC form, NCD Portal, Nikshay follow-up and registration, ASHA register, Delivery Register), so that each health worker in the referral loop has a single unified interface for tracking patients and reporting community health outcomes across verticals. The platform serves as a foundational part of a larger ecosystem of digital health tools for community health workers and can be extended further by integrating IOT devices, AI algorithms, payment systems, gamification modules, continuing medical education modules, community discussion groups, telemedicine providers and more.
The DMHFW is rolling out the CHIP platform at the state level, focusing on the digital health census and disease surveillance modules.

Longitudinal Reproductive, Maternal, Neonatal and Child Health (RMNCH) Platform

Over 5 years, they have created a user-friendly and culturally sensitive digital platform to track reproductive, maternal, neonatal and child health care. Their platform is tailored for last-mile settings with poor connectivity and covers an integrated digital health census, family planning, antenatal care, labour monitoring, immunization and child health.

Mission LISA

Mission LISA is used for Contact-tracking and referrals and for NCD screening camps. Their COVID-19 tracking platform has been rolled out across Rajasthan for active surveillance and vaccine pre-registration. Khushi Baby continues to support the Department with GIS-based analyses to characterize disease and resource burden for data driven engagements.

Janta Clinics

In 2019, Khushi Baby partnered with the Rajasthan Department of Health to build 12 IT-enabled clinics in urban slum areas of Jaipur.

Mewat Child Malnutrition Tracking Project

A community- based nutrition education intervention to improve the nutritional status of children (0-8 years) of a marginalized community of Nuh block in Mewat district, Haryana

Rajasthan Labour and Delivery Tracking- The Prasav Watch

A tablet based "Intrapartum and immediate postpartum Monitoring and Decision support Tool" which is intended for informed decision making by the labour room service provider.

Maternal and Child Health at Wadia Hospital

Khushi Baby has collaborated with DL Shah trust to support the maternal and child health care services provided at well-baby and well-mother clinics of the Bai Jerbai Wadia Hospitals for Children (BJWHC), through interventions of KB digital solutions in order to establish an evidence-based digital health platform.

Key Activities/ Project undertaken

PRASAV WATCH

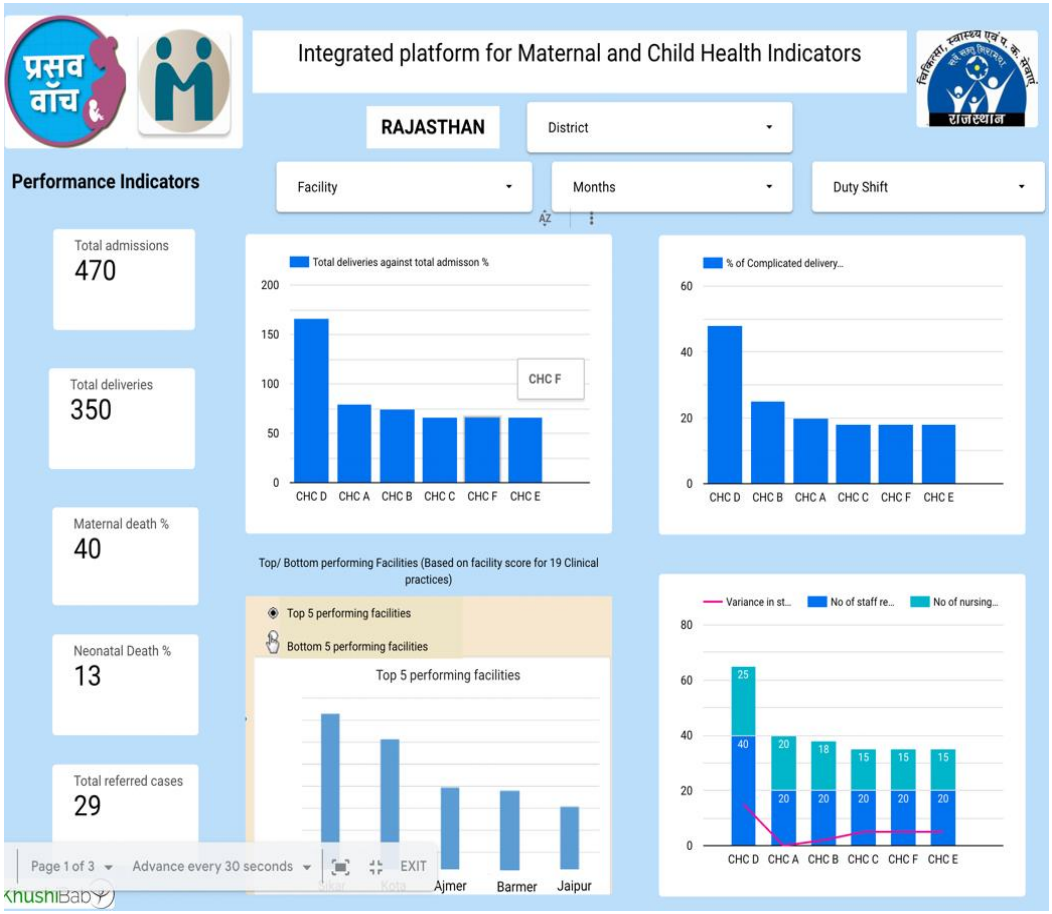
The project on which I had worked during my internship is "Rajasthan Labour and Delivery Tracking- **The Prasav Watch**"

The Prasav Watch application is a tablet based intrapartum and postpartum monitoring and decision support tool which is intended for informed decision making by the labor room service provider. It was launched in April 2021 after rebranding and white labelling of the ASMAN App. The DMHFW, Government of Rajasthan envisions to scale up the Prasav watch platform at 360 delivery centers throughout the state. This application captures the details of women admitted till discharge that supports the labor room service providers to identify the High risks and probable intrapartum complication and to take decisions. Some of the key features of the application include case management, data collection, monitoring, and analysis along with reports and dashboard and e-partograph generation. Other than that, the demographic profile, primary assessment, and history details are captured, followed by progress monitoring and delivery notes. Post-delivery and PNC monitoring is also done. The key collaborators on this project are DoMHFW, JHPIEGO, UNFPA and WISH foundation.

In this project key activities are:

- Developed the thorough understanding of the application like Prasav Watch and Dakshta Mentor Application.
- Mapped the indicators of Prasav Watch application and Dakshta mentor application along with Laqshya indicators
- Visualised the actionable dashboard in which facility wise indicators and performance ranking are shown
- Visited the health care facility of CHC Gogunda and PHC Watika and interacted with the staff of Labour room to know about their user experience of Prasav Watch application
- Meeting with JHPIEGO and UNFPA in regards of Prasav Watch and Dakshta Mentor application to visualise the Laqshya indicators, so as to create an actionable dashboard
- Meeting with Project Director- Maternal Health, Department of Health, Rajasthan for Prasav Watch actionable dashboard and discussion about the indicators

- Developed a dummy dashboard on Google Data studio for the Indicators of Prasav Watch



Other key activities:

- Attended the MCHN (Maternal, Child Health and Nutrition) session at Bhadvi ka guda Anganwadi in Udaipur district
- Communicated with health care workers who are using ASHA and ANM digital health application to know about their trainings and their attitude regarding the door to door survey
- Learned about the CHIP (Community Health Integrated Platform) and flow of ASHA, ANM and MOIC digital health application.
- Performed the data analysis on Digital Health survey of Udaipur, Sirohi and Alwar
- Learned about various software like Google Data studio, Lucid charts and Sketch
- Mapped the indicators of Prasav Watch for maternal and neonatal deaths and create dummy cases on the application for integration with CHIP
- Attended the live training sessions given to ASHAs, ANMs, BHSs and PHSs for ASHA and ANM digital health application.

Key learnings from Internship

- Better understanding of healthcare delivery system
- Observed the health system building blocks at the facility level and got the thorough understanding of service delivery, management of health workforce, health management information system.
- Had the great opportunity to increase my skills by understanding different tools of digital health
- Learned about how to strengthen the health care delivery system by integrating technology with health
- Enhanced my communication skills by interacting with health care workers at ground level and various officials
- Learned about data analysis and data management
- Developed the better understanding of different health programs
- Learned how to conduct trainings of ASHAs, ANMs, BHSs and PHSs for ASHA and ANM Digital Health application
- Worked on data visualisation part using different tools like Google data studio and used sketch for designing part

MCHN session at Bhadvi ka guda Anganwadi in Udaipur district

Interacting with the labor room staff of CHC Gogunda, Udaipur about Prasav Watch application