PRACTICUM REPORT

For the Partial Fulfillment of Course Requirements of the

Master of Public Health Program

Offered By

Johns Hopkins Bloomberg School of Public Health

In Cooperation with IIHMR University

By

Dr Taneya Singh
Cohort-4
2016-18

Under the Guidance of

Dr Suresh Joshi

Adjunct Professor
IIHMR University

Dr Seema Tandon

Team Leader-Clinical Programs
India Health Action Trust

TO WHOMSOEVER MAY CONCERN

This is to certify that ***Dr Taneya Singh,*** student of Master of Public Health Program offered by IIHMR University, Jaipur in cooperation with Johns Hopkins Bloomberg School of Public Health, Baltimore has undergone Practicum Training at India Health Action Trust (IHAT), Lucknow from ***Nov 22nd, 2017*** to present.

The Candidate has successfully carried out the study designated to her during practicum training and her approach to the study has been sincere, scientific and analytical.

The Practicum Training is in fulfillment of the course requirements.

I wish her success in all her future endeavors.

Sd-

Dr Suresh Joshi
Practicum Advisor

CERTIFICATE BY SCHOLAR

This is to certify that the Practicum Project titled submitted by me, *Dr Taneya Singh* with Enrollment No. IIHMR-U/07/2016-2018/0025;JH ID:11645F under the supervision of ***Dr Suresh Joshi (IIHMR) and Dr Seema Tandon (IHAT)*** for award of **Master of Public Health** carried out during the period from *November 22nd, 2017* embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other Institute or other similar institution of higher learning.

Dr Taneya Singh
MPH Candidate 2016-18

Certificate from the organization

INDIA HEALTH ACTION TRUST

Ref. No. IHAT/HR/CERT/2018-2019/09 Dated: 13 April 2018

TO WHOM IT MAY CONCERN

This is to certify that **Dr Taneya Singh** has been working since 22nd **November, 2017 till date i.e. 13 April 2018,** in **India Health Action Trust, Lucknow, Uttar Pradesh** in the capacity of **Sr. Associate – Technical** in the **MNCH Project**, under the supervision of **Dr Seema Tandon, Team Leader- FRU/RRTC.**

The certificate has been issued on the demand of the employee.

Satyendra Chauhan
Sr. H R Manager

UP-TSU : No. 404, 4th Floor, Ratan Square, 20-A, Vidhan Sabha Marg, Lucknow - 226001, Uttar Pradesh
Phone : +91 522 4931777, 4922350, Fax : +91 522 4931778

Contents

Practicum Final Report

Practicum Goal Setting and Learning Objectives

1. Learning details and internal processes of program management and implementation.
2. Learning processes of program monitoring and evaluation, and using statistical tools to analyse program data in formulating program policies.
3. Using tools of communication for identifying and communicating with key stakeholders, and employing advocacy skills to implement change and/or public policy.
4. Identifying and supporting the role of Government in promotion of health through public health advocacy. Identifying key stakeholders to liaison with, and develop channels of communication with community partners.

Organization information

The **India Health Action Trust (IHAT), funded by the Bill and Melinda Gates Foundation (BMGF) and partners with the University of Manitoba (UoM) and Karnataka Health Promotion Trust (KHPT),** is a non-government organization working in a number of states of the country like Uttar Pradesh, Karnataka, Rajasthan, Andhra Pradesh, Maharashtra, etc. The **Technical Support Unit (TSU) of IHAT** provides comprehensive technical assistance and training in program planning and management to the Government of Uttar Pradesh, namely National Health Mission-Uttar Pradesh (NHM), Directorate Health Services-Uttar Pradesh (DHS) and State Institute of Health and Family Welfare (SIHFW).

My Profile: I am employed as the Senior Technical Associate in the First Referral Unit (FRU) Strengthening Project of UP-TSU (IHAT), Lucknow.

Details of Faculty Advisor: Dr Suresh Joshi, Adjunct Professor, IIHMR University

Details of Practicum Supervisor: I am working directly under the supervision **of Dr Seema Tandon, (MBBS-DGO OBGyn)**, **Team Leader-Clinical Programs (RRTC/FRU Intervention).**
Email: seema.tandon@ihat.in

Important Dates: Initiation- Nov 22nd, 2017.
Progress Report – Submitted after 88 hours of completion of Practicum Employments-On-going
Deadline of Practicum Submission-April 22nd, 2018

Description of FRU Strengthening Project

Introduction:

In order to reduce mortality related indicators, MMR (258 per 100000 live births as per AHS 2nd update, 2012-13) in the state of Uttar Pradesh and IMR (46 per 1000 live births as per SRS Dec, 2016), UP-TSU envisaged to develop Medical Colleges as Regional Resource and Training Centers (RRTCs) to facilitate strengthening of First Referral Units (FRUs) for management of maternal and neonatal related complications. The Medical College faculty trained and mentored specialists (namely obstetrician, pediatricians, anesthetists and public health professionals) and medical officers within the District Hospitals (DH) and identified Community Health Centers

(CHC- FRUs) of 25 high priority districts, to improve quality of healthcare delivery system and better maternal and new-born health outcomes.

Strengthening of First Referral Units through Regional Resource Training Centers Project began in March 2017. It is a three-year project, which is being led by UP-TSU and King George's Medical College, Lucknow (acting as a Centre of Excellence) to enhance and update knowledge, strengthen skills and improve practices of specialist doctors and MBBS-MOs posted through Provincial Medical Services at First Referral Units. This is envisaged to ensure effective continuum of care at FRU facilities by continued medical education, onsite mentoring visit by Medical College faculty, and regular supportive supervision by UP-TSU Team.

Objectives of the RRTC Program:

The overarching goal of the RRTC program is to implement a cost-effective, participatory and sustainable model of capacity building of District Hospitals and CHC-FRUs to cover rural areas in 25 high priority districts (HPDs) in Uttar Pradesh to strengthen and provide quality maternal and neonatal services under the National Health Mission, U.P.

Geographical Coverage:

The project covers 50 FRUs (25 DHs and 25 CHC FRUs) in 25 High Priority Districts (HPDs) out of 286 FRUs in the entire state. An average of 2 FRUs were covered in each HPDs. These included District Combined Hospital/District Women's Hospital and one CHC FRU with high delivery load (>200 deliveries/month).

The four identified RRTCs are:

1. **King George's Medical College, Lucknow –** providing support to districts of Barabanki, Hardoi, Faizabad, Sitapur, Lakhimpur Kheri, Shahjahanpur and Kannauj.
2. **Aligarh Medical University, Aligarh–** providing support to districts of Bareilly, Farrukhabad, Kasganj, Etah, Pilibhit, Badaun and Rampur.
3. **Baba Raghav Das Medical College, Gorakhpur –** providing support to districts of Gonda, Baharaich, Shrawasti, Balrampur, Siddharthnagar, Sant Kabir Nagar and Maharajganj.
4. **Moti Lal Nehru Medical College, Allahabad –** providing support to districts of Allahabad, Mirzapur, Sonebhadra and Kaushambhi.

Major activities under Strengthening of FRUs:

Improvement Dimensions:

- **Strengthening**
  - Improving and strengthening complication management by improving the quality of services, knowledge and skills of service providers.
- **Activation**
  - Focused on facility activation on CEmONC (Comprehensive Emergency Obstetric and Neonatal Care) services.

Enablers:

- **System Strengthening**
  - Availability of qualified HR
  - Availability of blood transfusion services
- **Capacity Building**

- Training of specialists and MOs from 50 FRUs
- Onsite mentoring by both RRTC faculty and FRU Team

- **Advocacy and Liaison:**
  - Focused on facility activation on CEmONC services

Assessment

- Baseline—Through the Baseline assessment tool done by Program Monitoring Team
- Quarterly -- Through the Monthly Facility Report, Mentoring Tool, FRU Tool (ODK) and UP-HMIS
- Annually-- Through the Rolling Facility Survey

Activation of Signal Functions:

The project focuses on Strengthening/ Activation of 9 Signal Functions (SF) in 50 FRUs. The nine signal functions are given below:

Signal Function 1	Parenteral Administration of Antibiotics for Maternal Sepsis cases
Signal Function 2	Administration of Oxytocics for medical management of PPH
Signal Function 3	Administration of Anticonvulsants for management of severe pre-eclampsia/eclampsia
Signal Function 4	Manual Removal of Placenta
Signal Function 5	Removal of Retained Products (placental remnants)
Signal Function 6	Assisted Vaginal Delivery (Instrumental delivery and Episiotomy)
Signal Function 7	Essential New-born Care and Neonatal Resuscitation
Signal Function 8	Caesarean Sections
Signal Function 9	Blood Transfusion Services

Key Roles and Responsibilities

- Coordination with Team Leader and FRU specialist at the state level and supporting TSU staff at zonal and district levels in the implementation and management of FRU/RRTC Intervention in 25 HPDs.
- **Preparing monthly and quarterly reports** of program implementation at state and zonal levels and individual work plans by setting targets to be met at different periods.
- Developing detailed documents, refining internal processes and procedures to ensure effective and efficient service to undergo exhaustive scrutiny and **progress updates to UP-National Health Mission.**
- Supporting the FRU team in drafting **operational guidelines for FRU/RRTC intervention** and reviewing existing guidelines for providing associated technical support to UP-NHM and Directorate Health Services.
- **Management of program data**-strategizing, compilation, documentation, analysis, interpretation and presentation of program data to Project Director (MNCH) and Senior Technical Consultants from Bill and Melinda Gates Foundation (BMGF) and University of Manitoba (UoM), for effective running of FRU/RRTC Intervention.
- **Developing power point presentations, dashboards and excel sheets for, and attending monthly and quarterly review meetings** with Executive Director of UP-TSU, Project Director (MNCH) and Technical Consultants from BMGF and UoM.

- Developing and improving necessary analysis and presentation framework for all internal and external meetings.
- **Preparing concept notes** for FRU/RRTC Intervention Project. Preparation and submission of detailed project document for UP's Best Practice Award Nomination (A country-wide public health award given to best state government health practices).
- Supporting Senior Specialist in **preparing the Budget and Project Implementation Plan of FRU/RRTC Project for 2017-2018.** Also prepared the PIP for project expansion to all 75 districts of Uttar Pradesh, supported by NHM-UP.
- Developing project status notes with critical analysis and **development of action plan for Zonal Coordinators.**
- **Conducting field visits (50 facilities in 25 districts of Uttar Pradesh)** to gauge program implementation across various platforms and projects and to ensure accurate dissemination of instructions and guidelines specified at the state level.
- **Development of Strategy Document** for inclusion of Urban Health Centres in FRU/RRTC Intervention Project on behest of National Urban Health Mission (NUHM) after identification of gaps in the current implementation scheme.
- Currently working on preparing **Foundation Document of FRU/RRTC Intervention Project**, as instructed by Project Director (MNCH).

Experience Working as Senior Technical Associate

It has been a great learning experience to work as an associate in the Maternal Health component of the Strengthening of First Referral Units in 25 High Priority Districts in Uttar Pradesh.

UP is one of the most challenging states in the country owing to its geographical coverage, socio-economic indicators, gender disparity and status of women in society. It also has some of the worst health indicators, even lower than the national average, in the country. For my Capstone project, I analyzed maternal health indicators of 19 HPDs to determine the continuum of care in these districts, as an external academic auditor. Now on the other side of the system, I got to witness firsthand the gaps, challenges, strengths and weaknesses of the system we are so quick to judge.

Field visits to some of the most diffident areas of the state were eye opening in many respects. Workplace challenges have a different connotation altogether when perceived in such backward areas where the program is focused. With limited supply of even essential, lifesaving drugs (such as Magnesium sulphate) at some facilities, to the presence of state of the art equipment at some, the management of maternal and newborn complications is varied even within the high priority districts. However, after advocacy, hand holding, and regular supportive supervision, conditions in these facilities have improved manifold.

The most challenging aspect of adequate and timely management of complications in these facilities is absence of specialists or lady medical officers for round the clock services. In the labour rooms, deliveries are mostly conducted by staff nurses, and when complications arise, women are most often referred to either district hospitals or private practitioners, and ultimately to medical colleges, where they arrive in the worst conditions resulting in high fatality. Owing to the near constant absence of medical doctors at peripheral facilities, and them solely providing OPD services, these doctors are in dire need of refresher courses in newer techniques of complication

management. Through UP-TSU, I was able to be a part of the effort to the update skills and knowledge of these doctors by one-on-one on-site mentoring activities, facility rounds and emergency management drills (maternal complications and Basic Life Support training).

Due to the continued effort of the FRU Strengthening Team and RRTC Faculty, there has been a definite reduction in out referrals, and better documentation practices adopted in these facilities, as evident by the program data. RRTC Trainings on treatment of maternal complications and on-site demonstrations has resulted in better practices adopted by doctors at the facilities (such as increase in Caesarean section rates, initiation of blood transfusion services and increase in administration of iron sucrose infusion as both OPD and IPD practices for management of moderate and severe anemia at facilities where initially inadequate doses of iron and folic acid tablets were being given).

Documentation of all these activities, streamlining documents received from FRU Zonal Coordinators and development of concept notes and data dashboards has instilled in me the importance of reporting and the significance of documentation practices. After analysis and interpretation of program data, I have inculcated the confidence, candor and art of giving presentations to the senior leadership of the organization.

The Program Management, Implementation and Evaluation (PIME) Module during MPH was rigorous and exhaustive. However, putting theories into practical situations on a daily basis is the best educator there can be. Brain storming activities with the Team Leader and Senior Specialist in developing foundation documents, program implementation plans, action plans and budgets for the program in real time is inspiring and stimulating.

In conclusion, every role and responsibility expected out of my profile is bringing me one step closer to the challenge of leading and managing health programs in the near future and learning

the discipline of working as a team of highly skilled individuals, which will eventually be setting me up for success in the long run.

Key Achievements and Success

FRU/RRTC Intervention is an on-going project where achievements and rewards are dynamic. Key accomplishments so far have been the following:

1. **After witnessing the chaotic flow of patients in peripheral public health facilities, a patient flow protocol was developed by me. The Mission Director (MD) of UP-NHM pronounced a government order to scale-up the same protocol to be displayed in all FRUs in 75 districts of Uttar Pradesh (as opposed to the original number of 25 districts).**

2. A proposal and strategy document has been successfully written and submitted to provide technical assistance to the National Urban Health Mission (NUHM) for the Bill and Melinda Gates Foundation Headquarters at Seattle.

3. Preparation and submission of detailed project document for UP's Best Practice Award Nomination (A country-wide public health award given to best state government health practices). The RRTC Best Practice is the liaison of UP-TSU with Government Medical Colleges to train, coach and mentor doctors posted at peripheral health facilities through provincial medical services, to update their knowledge and improve skills and practices for maternal and newborn complication management.

Core Competencies Developed

1. **Analytical/Assessment Skills**: Assessment skills are being continuously developed by using program data for analysis, interpretation and presentation. The use of analytical skills has helped me in defining public health problems (rate and frequency of maternal complications, maternal deaths and case fatality rates), defining risks to the target community (faulty pre-referral management at L1 and L2 facilities) and identifying the importance of utilizing data in shaping public health solutions (complication tracking and management at L3 facilities and high delivery load L2 Facilities). I am currently using the following analytical tools in program management:
    i. Beginner's knowledge of the statistical tool STATA for analysis of program monitoring data.
    ii. Working knowledge of statistical tool SPSS for analysis and interpretation of program monitoring data.
    iii. Expert knowledge of Microsoft Excel for all program data management.
    iv. Data collection, compilation and presentation from UP-HMIS and Monthly Facility Report (MFR-Program Data).
2. **Program Planning and Management Skills**: Working for BMGF and GoUP through UP-TSU has taught me the skills of using public health policies and translating this information into program policies. I have also learned how to draft and develop policy recommendations, and its aid in program planning, strategizing and implementation. This skill combined with the analytical skills attained during my

work here at TSU has congruently developed monitoring and internal evaluation techniques for the implemented policy programs.

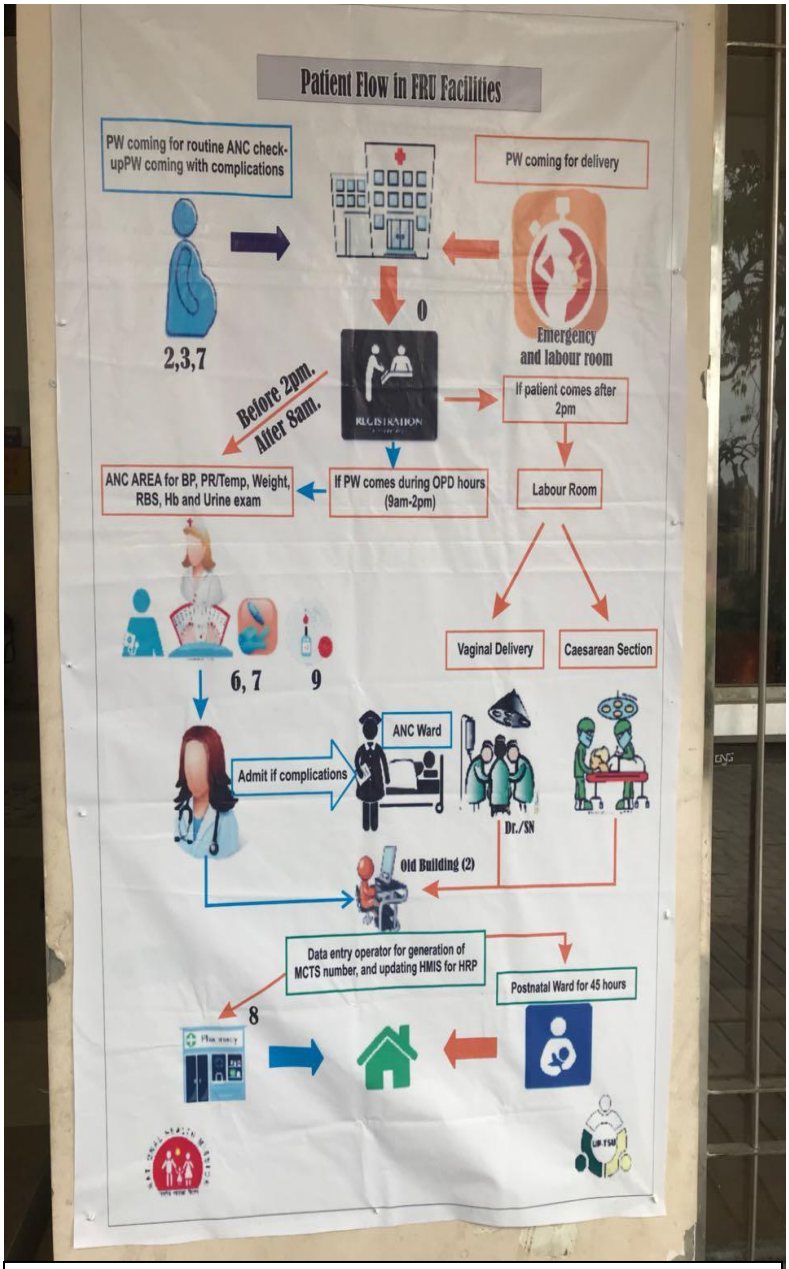
3. **Advocacy, Liaison and Communication Skills**: In the 20 weeks of working at UP-TSU, I have formulated communication plans through stakeholder inputs, and learnt the art of communicating effectively with a variety of stakeholders. Additionally, I have utilized the skills of various forms of media (print, audio and visual) to enhance communication between service providers, GoUP and beneficiaries to explain scientific information to lay audiences. Honing communication skills is as much science as it is an art. However, public health advocacy has made me proficient in creating connections and collaborating with key stakeholders for the RRTC/FRU Intervention Project, to promote maternal and child health.

Picture Glossary

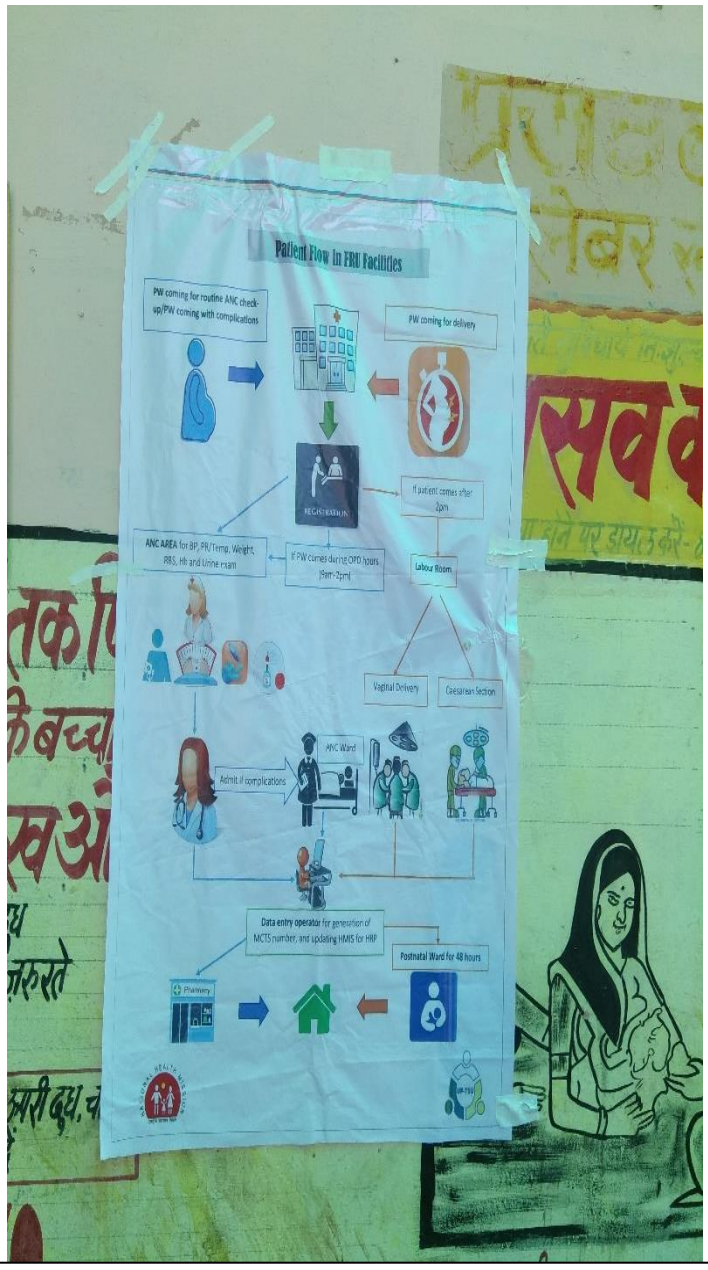
Training of Specialist Doctors and Medical Officers from 25 High Priority Districts at King George's Medical College, Lucknow

Supportive Supervision and On-Site Mentoring at various FRUs

Display of Patient Flow Protocol in 25 High Priority Districts
(Scaled-up to 75 Districts by UP-NHM)



Community Health Centre-FRU, Sandila, District Hardoi



Community Health Centre-FRU Kaiserganj, District Baharaich

District Combined Hospital, Shrawasti

Community Health Centre-FRU, Sidhauli, District Sitapur

बिल गेट्स फाउंडेशन ने परखीं महिला अस्पताल की सुविधाएं

सीतापुर। बिल गेट्स फाउंडेशन की टीम ने शुक्रवार को महिला चिकित्सालय का औचक मुआयना किया। इसमें टीम ने अस्पताल में स्वास्थ्य सेवाओं की तहकीकात की। इस दौरान मरीजों को अस्पताल में दी जा रही सुविधाओं की जानकारी भी ली। सीएमएस डॉ. सुषमा कर्णवाल ने बताया कि यह संगठन भारत सरकार के साथ मिलकर एनआरएचएम के तहत काम कर रहा है। टीम पूरे प्रदेश के अस्पताल में जाकर वहां के मरीजों को मिल रही सुविधाएं जानकारी एकत्र करके भारत सरकार को उपलब्ध कराती है। साथ ही अस्पताल की बेहतरी के लिए सुझाव भी दिए जाते हैं। शुक्रवार को टीम ने अस्पताल पहुंचकर सबसे पहले लेबर रुम, एनआईसीयू, ओपीडी का मुआयना किया। यहां पर रखे उपकरण, रजिस्टर व दी जा रही दवाओं की हकीकत देखी। मरीजों से अस्पताल से मिलने वाली सुविधाएं पूछी। इसके बाद पूरे अस्पताल में भ्रमण करके जांच प्रक्रियाएं परखीं। *अमर उजाला*

UP-TSU Clinical Programs

Media coverage of on-site visit by members of Bill & Melinda Gates Foundation India (BMGF) Country Office to District Women's Hospital, Sitapur