Section-B

Q1. Why supply chain management is important for any national health care program, elaborate in detail with suitable example and draw procurement and supply chain cycle? (12)

Q2. (I) Discuss the three essential logistic data items and for what purpose it is used? (12)

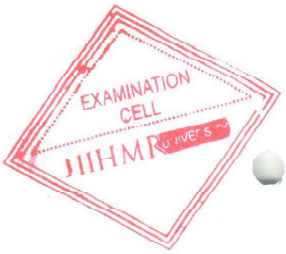
(II) At the warehouse you have 1,700,000 cough syrups that have a volume of .534 m^3. They are available in the pack of 200 per carton. How much space do you need?

Or

Indicators are measures to monitor and evaluate one or more aspects of a program or activity, elaborate each core indicators which can be used in monitoring and evaluation of supply chain management for family planning program?

Q3. Write short notes: (any 3) (11)

a) Essential drug list
b) Quality inspections in health equipment's
c) Data collection methodologies in M&E
d) Design of distribution system



IIHMR UNIVERSITY

Institute of Health Management Research

MBA Hospital and Health Management

Batch-22 (2017-2019)

Health Management

Applied Demography and Population Dynamics

Term Examination

Time - 3 Hour **MM-70**

The question paper contains 3 printed page.

Section- A

Answer any three questions in not more than 500 words. **[3 x 10 Marks]**

Q1. Critically examine India's family planning programme.

Q2. Define five concepts in gender? Describe any two commonly used dimensions of empowerment and potential operationalization in Household, Community and Broader areas?

Q3. What is the purpose of developing Scorecard /Dashboard Indicators? Explain step by step method (including formulae) of developing composite index for all 16 Indicators?

Q4. Define gender-based violence, domestic violence, intimate partner violence with explanation empirical data from India?

Q5. Briefly discuss about structure of population ageing in India?

Q6. Describe the objectives and major strategies adopted by Indian National Population policy 2000?

Section B

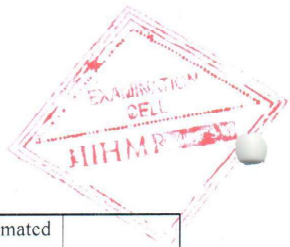
Answer Any Two Questions **[2 x 20 Marks]**

Q.7 Calculate the composite index of Pregnancy Care Indicators (Good-G, Promising-P, Low-L and Very Low-VL) for A, B, C, D, E districts separately for the year 2015-16 and 2016-17? Discuss the performance of indicators by conducting a comparative analysis? [20 Marks]

	Pregnancy Care (2015-16)				
	1st Trimester Registration to total ANC Registration	Pregnant Woman received 3 ANC check - ups to Total ANC Registrations	Pregnant women received TT2 or Booster to Total ANC Registration	Pregnant women given 100 IFA to Total ANC Registration	Cases of Pregnant women with Obstetric Complications and attended to reported deliveries
District A	56	64.8	77.4	98.8	23.2
District B	35.7	59.8	69.5	88.2	4.7
District C	72.6	86.8	89.3	89.2	14.1
District D	47.6	64.2	90.9	85.3	7.5
District E	80.2	76.0	91.6	81.4	5.2
	Pregnancy Care (2016-17)				
	1st Trimester Registration to total ANC Registration	Pregnant Woman received 3 ANC check - ups to Total ANC Registrations	Pregnant women received TT2 or Booster to Total ANC Registration	Pregnant women given 100 IFA to Total ANC Registration	Cases of Pregnant women with Obstetric Complications and attended to reported deliveries
District A	56.5	69.7	77	96.7	16.1
District B	41.5	64.6	68.1	87.1	5.2
District C	66.8	90.8	92.3	94.1	19.2
District D	44.3	64.5	90.8	74.1	5.5
District E	72.2	78	94.2	79.4	2.6

Q8. The block wise following population, CBR, IMR and Number of ANC registration for a district is given below. Estimate the following block wise by using dataset below and identify the worst and best performing blocks for these indicators: [20 Marks]

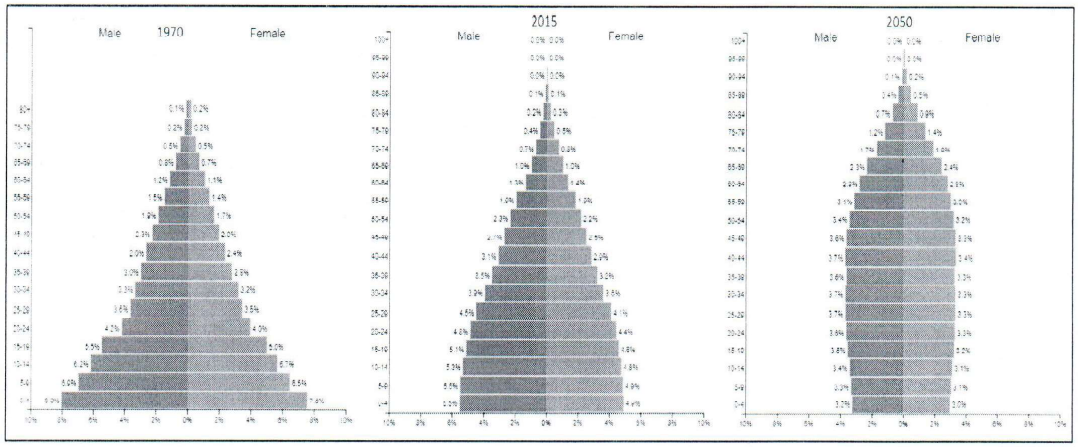
i. Estimated annual pregnancy (consider 5% wastage factor),
ii. Estimated annual delivery
iii. Estimated annual infant death and
iv. % ANC registration



Block	Population	CBR	IMR	ANC registration	Estimated annual Pregnancy	Wastage (5%)	Estimated annual Delivery	Estimated annual infant death	% of ANC registration
A	323985	28.2	91	4205					
B	297994	28.2	91	2483					
C	221233	28.2	91	2437					
D	251529	28.2	91	2757					
E	1849571	28.2	91	16595					
F	224294	28.2	91	3179					
G	202187	28.2	91	2316					
H	187647	28.2	91	3315					

J	258377	28.2	91	3578					

Q9. a) Interpret the change in population structure of Indian population from the following age-sex pyramid below: [8 Marks]



b) Calculate the median age, old, young and total dependency ratios using the given population data of Switzerland, 2004. [4x 3 Marks]

AGE GROUP	TOTAL POPULATION
0-4	366538
5-9	404723
10-14	438225
15-19	430935
20-24	438974
25-29	463460
30-34	538891
35-39	622952
40-44	612913
45-49	542600
50-54	490177
55-59	475574
60-64	398124
65-69	322112
70+	843432
TOTAL	**7389630**

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Health Management

Quality Management and Patients' Safety

Term Examination

Time - 3 Hour **MM-50**

The question paper contains _One__ printed page.

Answer all the Questions. Marks of each Question are shown separately.

1. Enumerate the perspectives of quality with reference to Users, Providers and Managers of health care. **[6]**
2. What is Total Quality Management (TQM)? How does the approach differ from the approaches of quality improvement? Briefly explain the focus area of TQM. **[6]**
3. What is Cost of Quality? Explain this with examples of cost of prevention. **[6]**
4. Write down the different methods of Quality Assessment? Describe Situation Analysis Approach for Quality Assessment. **[6]**
5. What do you mean by Cause Effect Diagram? Explain in detail the purpose of Cause Effect Diagram by giving appropriate example. **[6]**
6. What is the purpose of Quality Assurance Cycle? Explain with the help of example. **[6]**
7. Illustrate the Benefits of Accreditation to the healthcare organization by giving suitable examples. **[6]**
8. Write notes on any two of the following **[8]**
   a. Regulation Vs Accreditation
   b. Structure of NABH
   c. NABH Patient-Centered Standards