India Primary HealthCare Support Initiative



Health Service Delivery: Human Resources for CPHC

District CPHC Strengthening Workshop





















By the end of this session, we should be able to understand the obligations of all the staff members in charge of delivering health services under CPHC

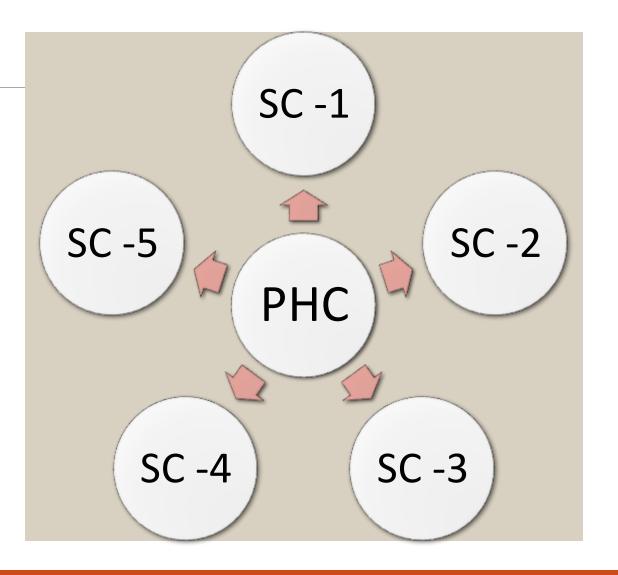
Human Resources and Teams for HWC



Understanding the Health and Wellness Centers











Who are the members, in your opinion, makes up a HWC team?

HWC SC

- 1
- 2
- 3
- 4
- 5

HWC PHC

- 1
- 2
- 3
- 4
- 5
- 6
- 7



Our Team in health and wellness centers – Sub Centers





- ASHA*

Everyone can serve. Everyone can help

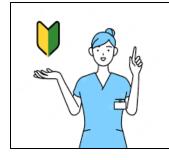


Our Team in health and wellness centers – PHC/UPHC



PHC-1MO

UPHC- 2 MO



PHC – 1 HEALTH ASSISTANT (FEMALE)/ LHV

UPHC – 1 HEALTH ASSISTANT (FEMALE)/ LHV



PHC – 1 HEALTH ASSISTANT (MALE)

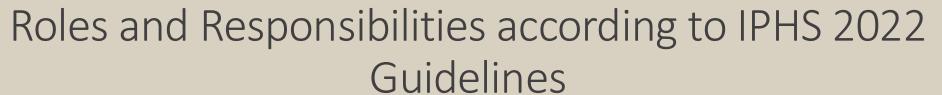
UPHC - NA



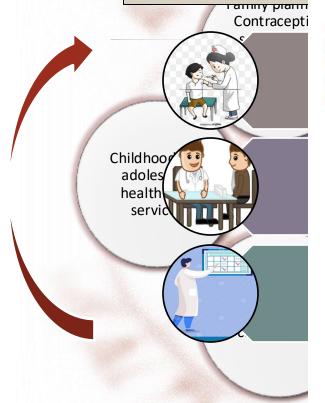
PHC – 1 SANITATION STAFF

UPHC -1 SANITATION STAFF

UPHC - 1ARESSIFIED COMPTUNITY (SUBTIPEOSPEROUS ON CC-1 DEO













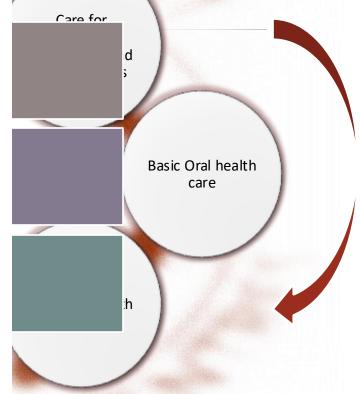
AYUSHMAN BHARAT Health and Wellness Centres

Expanded Range of Services









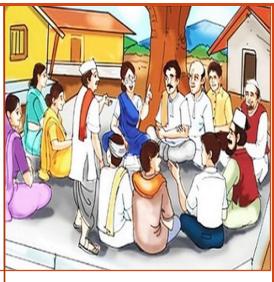
Functional HWC Teams











Facility level Team / Core Team

 Health and wellness team for Sub centers and Primary Health Centers.

Program based Team

 Team working collaboratively on vertical programs like Kayakalp and NQAS.

Administrative level Team

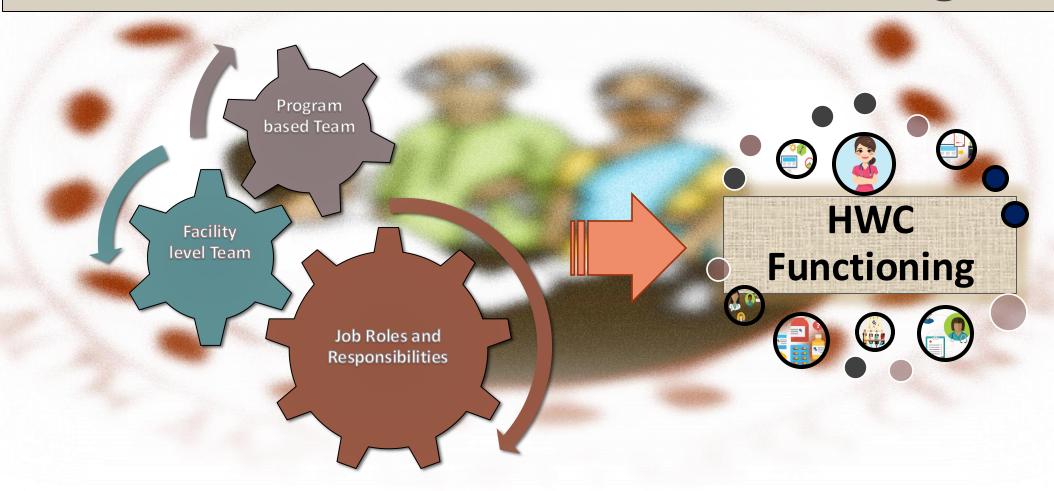
 District level and Block Level Team or team of Trainers and Providers.

Cross-sectoral Team

 Includes health sector personnel working with Panchayat Raj Institution Members, School teachers, AWWs, SHGs.



How do we define team functioning?





How may the positive attributes of one team be transferred to the other?



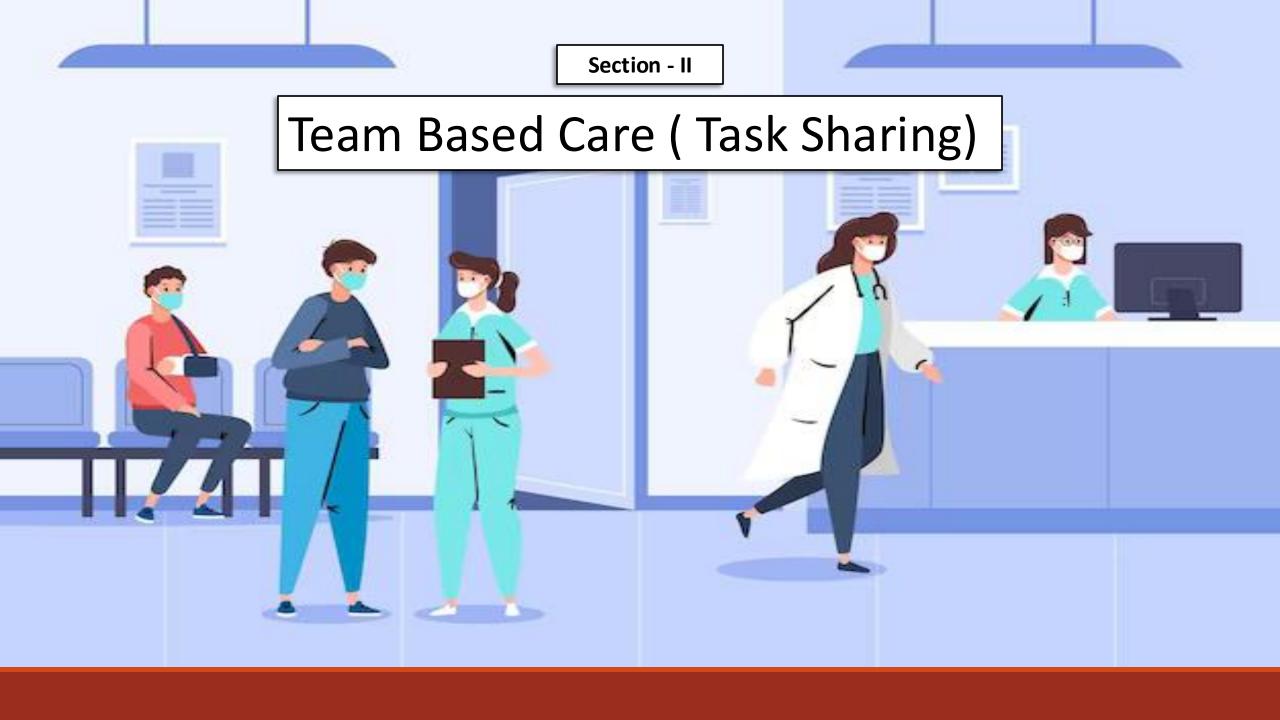
Program based Team (Characteristics)

- 1. Clear and concise communication
- 2. Task Sharing
- 3. Transparency in data sharing
- 4. Target based
- 5. Motivated by incentives
- 6. Well trained and well mentored staff
- 7. Working in collaboration towards common solution

Facility level Team

+ Updated Reports

- 4. Patient satisfaction based
- 5. Self motivated staffs

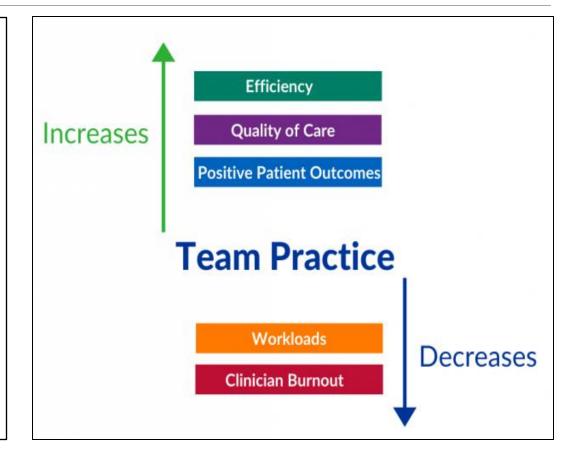




Why shift to Team Based Care (Task Sharing)?

Traditional teams

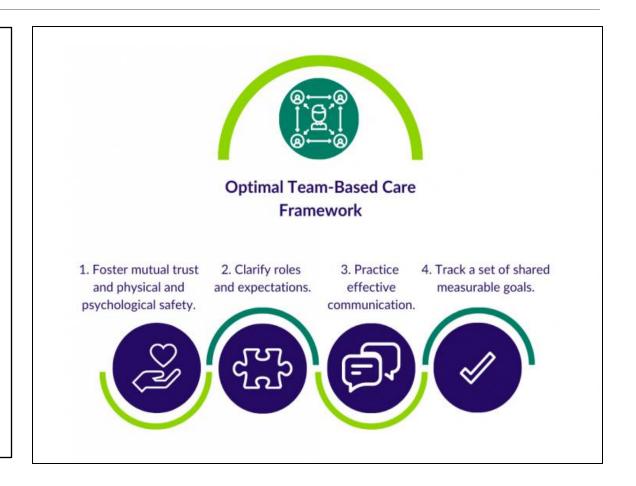
- ➤ Positioned at the same facility
- ➤ Defined Roles and Responsibilities
- Limited opportunity for task sharing





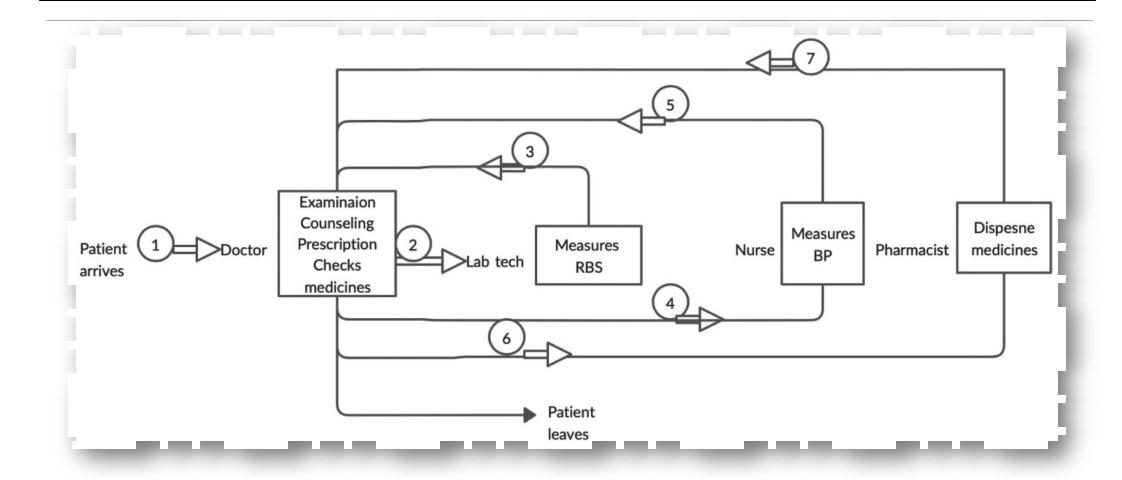
Successful Team-Based Care Framework

- Mutual trust
- Outcomes are well defined
- Effective communication
- Tracking measurable common objectives.





Team Based Care Approach Patient work flow example





Actions that encourage a Team-based care approach

Policy decisions are usually made nationally, but there are methods that health Centre managers can use to help ensure successful implementation:



Consult closely and coordinate with the physician.



Train health care workers in new skills.



Clearly define roles and responsibilities for different team members.



Arrange close supervision, mentoring and support by experienced health center staff.



Schedule regular clinical team meetings and good communications between staff to discuss patient cases and issues, so that they can work together to solve problems.



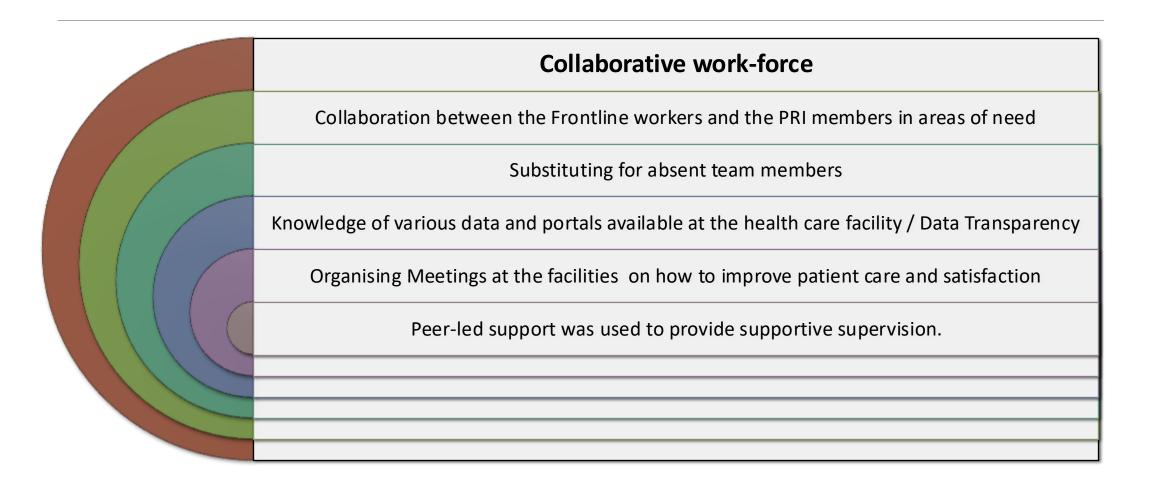
Facilitate regular dialogue between staff about how to improve tasks in order to increase service efficiency and quality.



Devise measurable processes and outcomes.



Pre existing practices of Team Based Care



Section - III

Key Issues in Human Resources and possible solutions





What are the challenges?

A team needs technical expertise, transparency in data sharing, technical training on additional services like EPS, and collaboration with the District administration and other HWCs to handle obstacles such as regular <u>transfers</u> and vacancies and conflicts within the facility.



Task Shifting: The solution to go about managing Transfers and Vacancies





How should a team handle conflict?

Conflict is the disagreement or difference of opinions between or among individuals that can be potentially harmful to any organization.







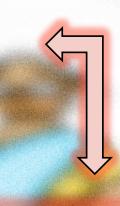
Structure



- Differing word connotations
- •Insufficient knowledge
- unclear exchange of information
- •Noise in the communication channel



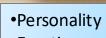
- Size of group
- Degree of specialization
- Jurisdictional clarity
- Member compatibility
- Leadership styles
- •Reward systems
- •Degree of dependence between groups





- Emotions





•Values



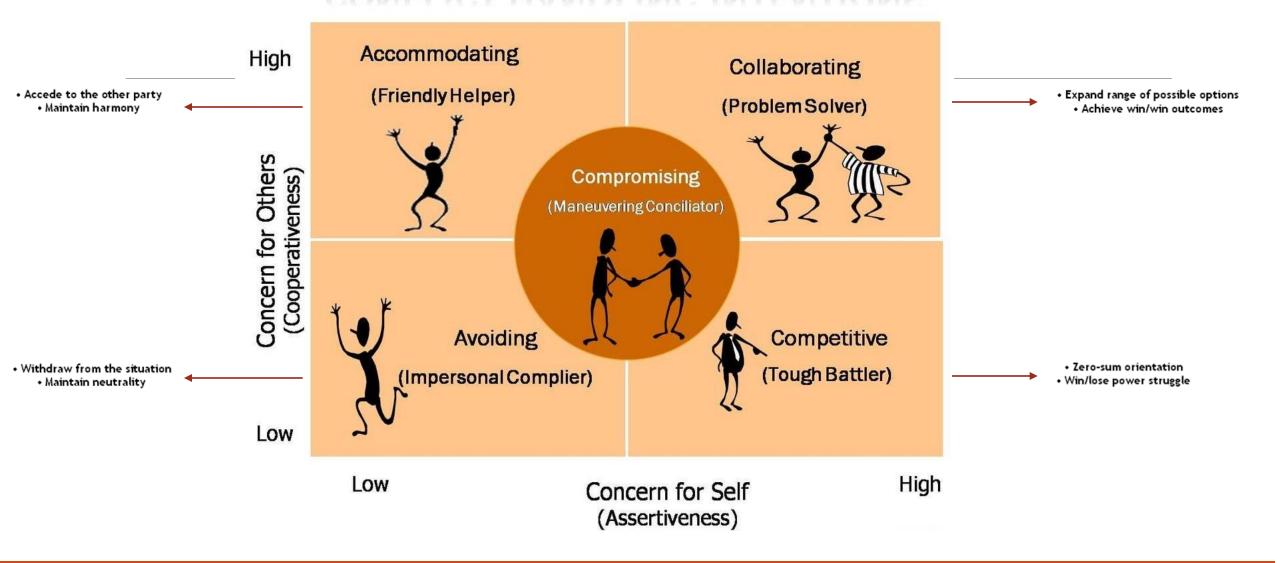
Conflict management?

Conflict management seeks to resolve disagreement/ conflict with positive outcomes that satisfy all individuals involved.





CONFLICT HANDLING INTENTIONS





Case Scenarios 1 - 5

Participants have to identify the challenges at the health facilities in the given scenarios and highlight from the session on how AB (or other successful interventions) is/are addressing these challenges through the adopted strategies/ or can even propose solutions

- •The participants will be divided into two (2 minutes)
- •Each group will have to identify the challenges & propose solutions from their respective scenarios (10 min each ~20 minutes)
- Both the groups will present (10 minutes each ~20 minutes)
- Conclusion and feedback (5 minutes)
- Total Duration: 45 minutes

