Post Graduate Certificate Course in Health System and Management

Module 3

Basics of Management and Planning

2015

Indian Association of Preventive and Social Medicine Gujarat Chapter

Post Graduate Certificate Course in Health System & Management (PGCHSM)

Team –2014

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Preface

Understanding of Health system and acquiring skills of health management are assuming importance in protecting and promoting people's health. Sound epidemiological knowledge and skills are ineffective if it is not complemented with robust Health System and Effective management. Hence it is the high time for every health manager to acquire the managerial understanding and skills.

As a professional body in Public Health; it is our responsibility to act as a catalyst in increasing the quality of health services. This course; Post Graduate Certificate In Health System and Management is an attempt to bridge the gap between technical and managerial worlds for Community Physicians and Public Health experts.

This course is covering key topics on health system, planning, managing human resources, materials and machines. Also health fineness and health economics, monitoring and evaluation, quality in health care are covered. The strength of the course lies in its faculties. Faculties are mixed of experts from the medical colleges and public's health cadres. Also it is envisage that students who are opting the course develop critical and creative thinking, reasoning power and analytical skills in Community Health with vision of applicability.

We have successfully completed two PGCHSM courses during the years 2013 and 2014.

I am sure this is a small step, but it will go a long way in creating culture for learning about health system and health management in the medical expert involved with public health. We are looking forward to your suggestions and support to further enhance the quality of this course.

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Acknowledgement

: About Module :

In recent years; scope of the duties and responsibilities of Community Physician/Public health experts have expanded from technical jobs to managerial ones. It is expected that they ensure better performance of health system and efficient delivery of the health services along with excellent technical guidance. It requires; acquiring understanding about health system and developing management skills by Community Physician and Public Health Experts. For the same they have to know about Policy, Planning, Implementation and Controlling of the Health programs/services at different levels; hence basics about management.

This module will be providing basic understanding about the concept, principles and function of management. Also differences between different levels of management and their different roles and functions are described in the same chapter. Along with that certain important management techniques are also briefly mentioned which can be used in the health system.

Chapter two will be about the Managers. Manager is the most crucial person who is at the centre of all management practices. Managers have to play different roles like planner, strategist, communicator, leader etc. in different proportions at different levels of management. For becoming successful manager a specific attributes are required and different managerial skills are to be used. In this chapter a comprehensive understanding about the same is given.

Planning is most crucial activities in the management. A good plan is a half success. Planning is not an accidental activity. It is a systematic process, carried out in orderly manner by use of information and understanding of organization as well as its environment. Understanding about Different approaches for planning, centralized and decentralized planning and national health planning can be gained in chapter three while chapter four gives exclusive understanding about the strategic planning and operational Planning.

Finally, in chapter five preparing a Project by use of principle of Project Cycle Management is explained. How a project planning tool, Log Frame Analysis for developmental project can be used in project planning is explained in detail with examples of health situation. This small project planning exercise can give a big idea about the entire planning processes to be carried out at larger level e.g. State or National.

We are hopeful this module will be a good catalyst in amalgamating the management understanding and skills with the epidemiological skills in the Community Physician and Public Health experts and will be a great help in enhancing their role as a successful Health Manager along with the current one.

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Post Graduate Certificate Course
In
Health System & Management
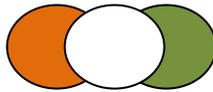
Module 3: **Basics of Management & Planning**

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Indian Association of Preventive and Social Medicine

Gujarat Chapter

2015

Chapter : 1: Basics of Health Management

"Good management consists in showing average people how to do the work of superior people."

John D. Rockefeller (1839-1937), mega-industrialist

Learning Objectives:

After studying this unit you should be able to:

1. Define & describe the nature & concept of management

2. Discuss functions and principles of management

3. Identify different levels of management, their functions.

4. Relate the epidemiology and health management.

5. Describe important management techniques and use appropriate techniques of management in various settings

Important Terminologies

|	
Vision	A Vision Statement is inspirational statement of what an organization would like to achieve or accomplish in the mid-term or long-term future. It is intended to serve as a clear guide for choosing current and future courses of action. Vision Statement of Health & Family Welfare Department, Govt. of Gujarat : Increase life expectancy and improve physical quality of life of people of Gujarat so that they attain the highest level of physical, mental and spiritual health and contribute towards the development of the state.
Mission	A mission statement is a statement of the purpose of an organization i.e. what it wants to do to accomplish its vision. The mission statement guides the actions of the organization, spell out its overall goal, provide a path, and guide decision-making. It provides "the framework or context within which the organizations strategies are formulated. Mission statement of Health & Family Welfare Department, Govt. of Gujarat : Increasing life expectancy through various health and medical care interventions contributing to overall Improvement in Human Development Index of the Gujarat to a level comparable with developed countries.

Policies	They are guiding principle stated as per an expectation, not as a commandment. i.e. they are directive not bindings.
Goals	The ultimate desired state towards which all resources &objectives are directed. Goals are broad in nature & focus on long term achievements in same specific area. i.e. population stabilization, halting HIV epidemic, etc. They are long term outcome or Health impact.
Objectives	An objective is precise, time bound, measurable and action oriented desired result. Objectives are short term outcomes or output. They are either achieved or not achieved.
Program	It is a sequence of activities designed to implement policies and accomplish objectives.
Budget	It is allocation of funds for various activities it reflects or commitment priorities & commitments of planner to large extend.
Planning	It is defined as setting performances, expectations and goals for groups and individuals to channel their efforts towards achieving organizational goals/objectives. It also includes measures that will be used to determine whether expectations and goals are being met.
System	System is a set of interdependent parts that works together as a while, towards goal/goals in which the performance of all is greater than the simple sum of the performance of its parts.
Organization	Organization is a formal and systematic arrangement of people, to achieve certain specified objectives or goals. Hospital, Primary Health Centre, District Health Office, schools, factory, banks etc. are all organizations, but they differ by have three common attributes. 1. Distinct Goal and objectives, 2. People 3. Systems, set rules and procedures.
Management	Creation and maintenance of an internal environment in an organization (enterprise) where individuals, working together in groups can perform efficiently & effectively towards the attainment of group goals.
Effectiveness	It is ratio of output(result) to input(resources).
Efficiency	It is ratio of process(activities) to input (resources).
Administration	Administration is a sub set of management which is pertaining to administering the actions (application) by interpreting the policies, directives and rules.
Management techniques	They are sets of procedural steps which may be loosely or rigorously started, which embody multiple idea content sand which are concerned with doing work to achieve an objective.

Introduction :

The Health status of the community is determined by socio-economical situations. Income, education, nutrition, water, sanitation and shelter, (house and surrounding) are important socio-economical determinants. But with these; Health Care Services are assuming vital role in Health Outcomes of the people. Health Care Services embraces promotive, preventive, curative & rehabilitative; all four aspects of care. With better control over socio determinants, quality Health care can result in favorable Health Outcome.

Every Government is having good vision and policies for improving the health status of the people. But appropriate vision and policies need to be translated in to robust Health System with adequate coverage (geographical as well as epidemiological) effective and quality delivery. It is observed that many time weak management of Health System rather than the lack of policies or inadequate resources; that affects the performances of Health System, ultimately Health outcomes of community. Hence it's a growing need that, professionals who are involved in Health care must have basic understanding & skills of management i.e. Health Management.

Health Management expands from formulating policies, Health planning, designing programs, developing strategies, implementing Health services (programs, projects etc.) running Health institutes and many more managerial activities related with Health Care.
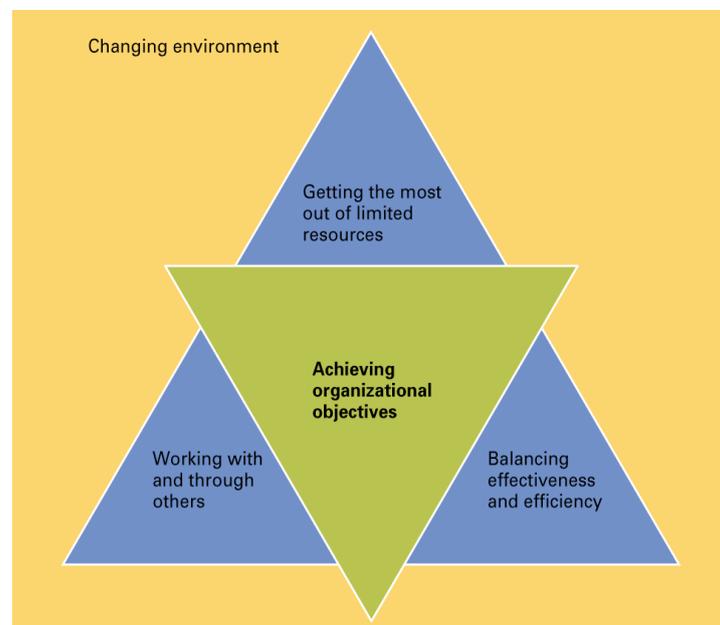
Concept and Definitions :

Shortest definition "Management is getting things done through and with people". Management is defined differently by different people, some of the common understanding about management are given below:

- Management is "getting right thing done in right way in right time by right persons with use of right amount of resources"

- Management is "an art & science of abilities required doing the work in successful way"

- Management is "creation & maintenance of an internal environment in an organization(enterprise) where individuals, working together in groups can perform efficiently & effectively towards the attainment of group goals." (By Koontz and O'Donnell)

There is a distinction between management and administration. Management covers broader roles from formulating the policy, rules to getting it done, while administration

is a sub set of management which is pertaining to administering the actions (application) by interpreting the policies, directives and rules.

From the definition of management, certain aspects stand out quite prominently.

1. Firstly, management deals with people.
2. Secondly, the primary purpose of management is to achieve a goal to its fullest extent that is effectiveness.
3. Thirdly these goals must be achieved with least expenditure of resources that is efficiency.

Therefore the elements of management include people goal achievement, effectiveness and efficiency. Central understanding of all definitions is "It is facilitating coordinated efforts in a systematic ways to accomplish common goals effectively and efficiently."

Balancing Effectiveness and Efficiency :
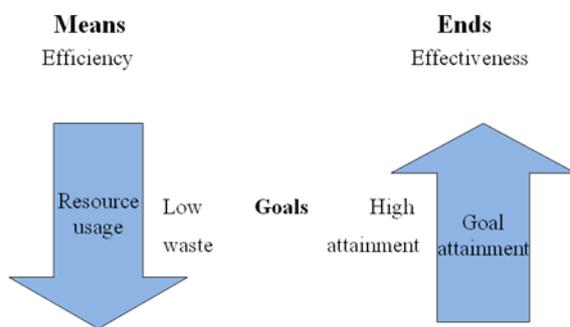
Effective means achieving organizational goals and efficient *means* achieving goals with minimum waste of resources. Thus Successful organizations know how to manage people and resources effective and efficiently to accomplish organizational goals and to keep those goals in tune with changes in the external environment. The pictorial presentation of management efforts on two aspects, one is the means i.e. resources and another is the ends i.e. results-achievement is show. It is clear from the diagram that all efforts of
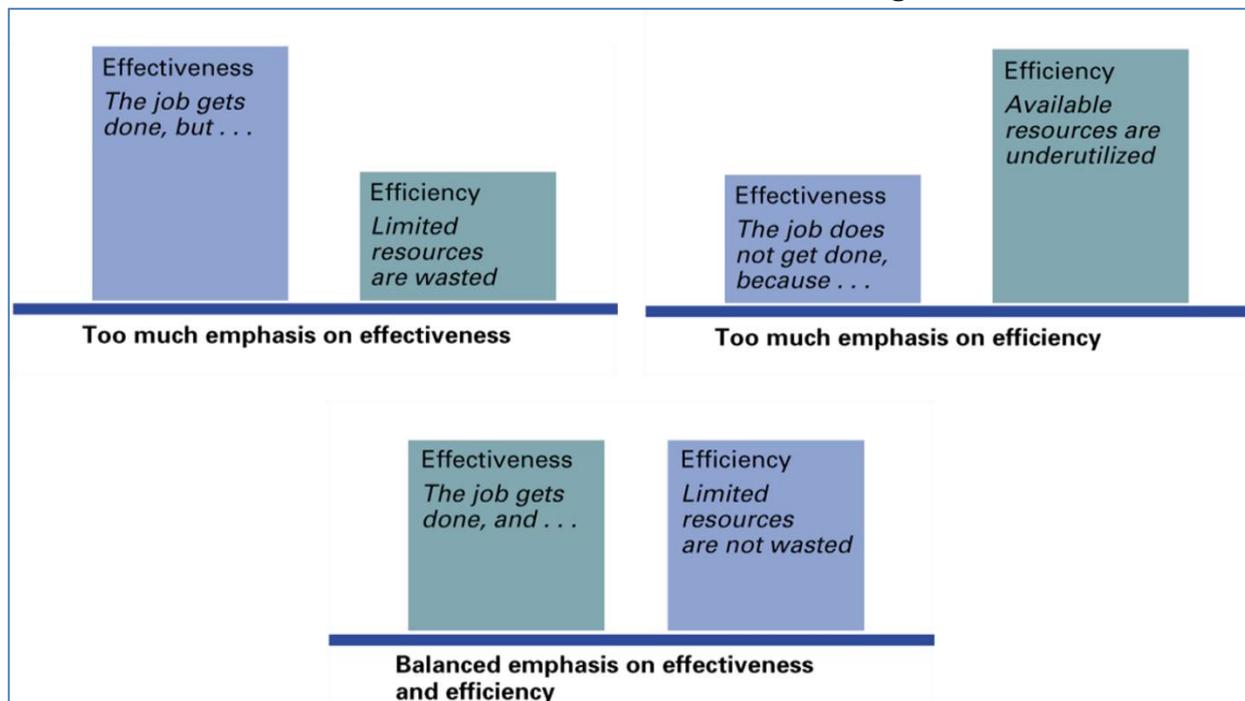
management are towards controlling or reducing the use of resources at the same time increasing the outputs.

Too much emphasis may lead to over use of resources, while too much emphasis can result in to reduced output, which may defeat the purpose. Balancing is above two acts in changing environment is a real art and science. Below is the graphical presentation of three different scenarios described.

Management : Art and Science

Management may be understood as an art & science on following counts:

Management as a science bears the following characteristics:

1. Management is a systematic body of knowledge consisting of principles, generalizations, approaches and concepts to be applied in practical situations. This knowledge serves as the basis for managers to understand the process of management and problems involved in it.

2. The principles, generalizations and concepts of management have been developed and formulated on the basis of observation, research, analysis and experimentation, as is the case with the principles of other sciences.

Management an art because it is having some characteristics as below...

1. The application of management knowledge is personalized, depending on the individual manager. Though knowledge about principles, concepts and generalizations of management remains the same, the manner in which it is used differs from manager to manager.

2. Application of management knowledge calls for innovativeness and creativity. On the basis of fundamentals of managerial knowledge, analytical abilities and farsightedness, the managers goes on discovering new ideas, relationships and more efficient ways of doing things.

Evolution of Management Theory:

Though mankind is involved in management, trivial to large affairs from ages, but during the recent past management has been formalized as a theory. Over the 150 years Management theories transgress from Scientific Management to Management Science theory and now it has reached to Organizational Environment theory.   As a health managers, you may not need to go into the intricacies of the evolution of theories and finer aspects of the theories however for background understanding below is shown the graphical presentation of different theories over an around 150 years time period.

The Evolution of Management Theory
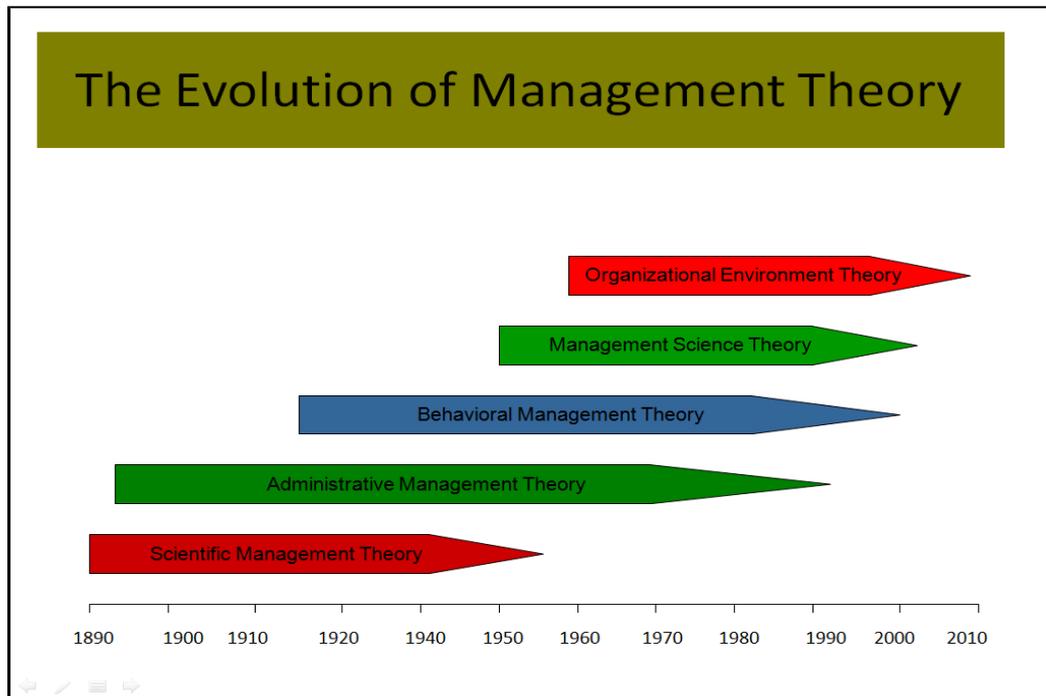
Though different theories and managerial approaches are described, but in practices mix of approaches and theories are seen. One the widely practiced approach under modern management is System Approach. The system approach contains five elements. Four from organization (1) Input, (2) Process, (3) Output and (4) Feedback and Fifth is (5) Environment.
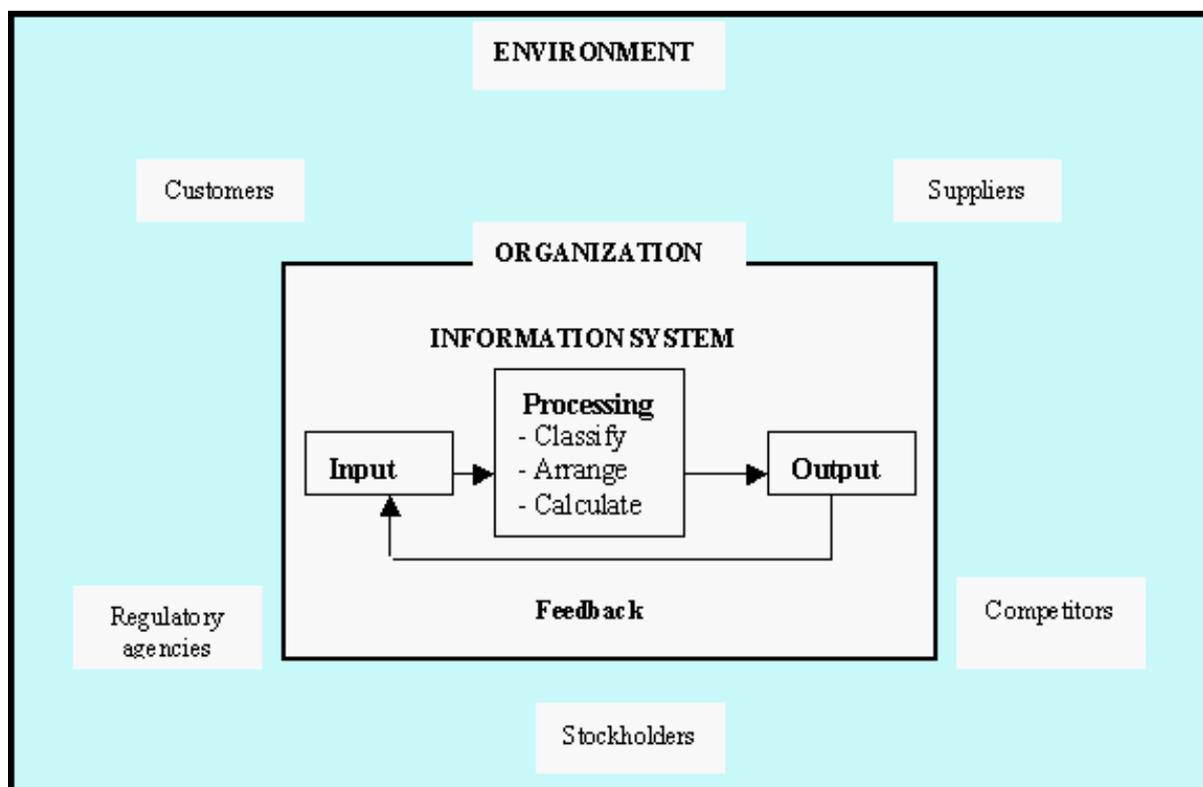
Heath System

Cost		Benefit	
Inputs →	Process →	Out puts →	Outcome/Impact
Management knowledge **Technical knowledge** **Personnel** (Medical, paramedical, auxiliary, non medical staff) **Money, Drugs, Vaccines, Equipments,** Instruments, Vehicles, Consumables etc.	**Clinical work** Patient attended, Laboratory testing, **Outreach activities** Home visits Pills distributed. IUD insertion. Vaccination done. IEC activities	No. Patients Treated. No. Operation done. No. Deliveries carried out. No. Laboratory tests done. No. Blood samples collected. Number of children vaccinated. No. of couple accepted family planning methods. No of drugs distributed.	Increase in life expectancy. Reduction in Mortality. Reduction in specific morbidities. Reduction in Fertility Population stabilization.
	Records Reports	Records/Reports Surveys, Studies	
	Survey, Studies, Surveillance, census ←		

System approach for Reducing Heart related Diseases
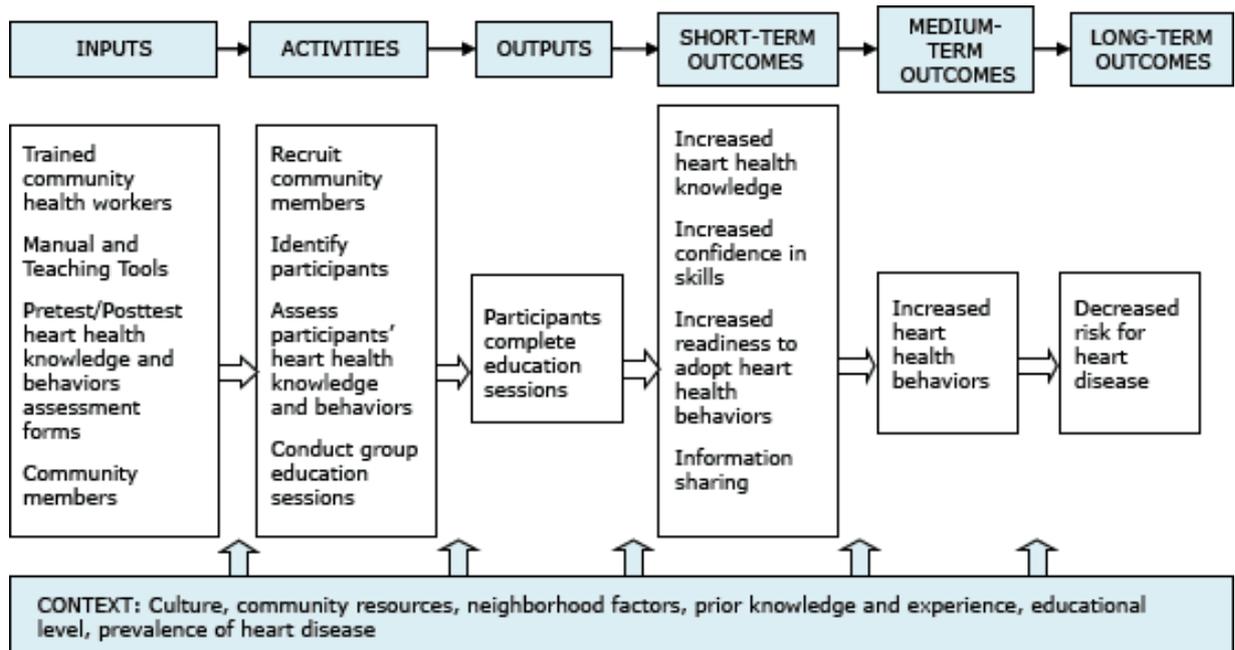
System approach for Obesity Prevention

Inputs
- Data on obesity
- Data on dietary intake
- Other state policies

Local activity
- School gardens
- Farmers marketing to schools

Stakeholders
- US Dept. of Agriculture
- US Dept. of Education
- Farmers Association
- Ecological advocacy organization
- Public health
- Parent/teacher association
- Students
- Legislators

Activities
Formulation
- Create a coalition
- Recruit legislators
- Generate press releases
- Testify to legislature
- Organize grassroots
- Collect endorsements
- Write policy briefs

Enact
Implement
Maintain

Outputs
- No. of partners engaged in advocacy
- Media coverage
- Public awareness
- Public support
- Policymaker support
- Policy drafted

- Policy enacted
- No. of participating schools
- No. of participating farmers
- Cost to schools
- No. of schools with gardens
- No. of children reached

Outcomes

Short Term | Intermediate | Long Term

Access to healthier foods | Intake of healthier foods | Equitably distributed improvements in body mass index

Management Functions:

If goal and objectives of a Health System/programme are to be achieved, certain basic management functions are to be carried out.

According to Gulliksen a more traditional classification of management function is as follows:

a. Planning

b. Organizing

c. Staffing.

d. Directing

e. Coordinating

f. Reporting

g. Budgeting

h. Evaluating

The modern classification such as planning, implementing and controlling and innovating encompasses all the traditional groupings of management functions.

The management functions indicated below:

A. **Planning:** The management first outlines the job he wants to do and then sets short and long-term objectives for the organization and decides on the means that will be used to achieve them. In order to do this it is necessary for management to forecast, and be able to evaluate the economic, social and political environment in which organization will be operating, and the resources it will require for the execution & monitoring.

B. **Organising:** The management must carry out the plan by organizing resources – personnel, supplies, transport, finance, etc. management must establish operating procedures and reporting relationships. The work done by team will necessarily be interrelated; hence, some means of coordinating their efforts must be provided. Coordination is, in fact, an essential part of organizing.

C. **Staffing:** Having known the work to be done, management must find the right person for each job. An established health service, of course, already has people filling the staff positions. However, staffing obviously cannot be done once and for all, since people are resigning, being promoted, and retiring. Furthermore, workers skills improve with the acquisition of experience, or by getting additional training and acquire new skills also. So a manager must make periodic assessment of his staff and attempt to plan each person into the position where he can do the best job.

D. **Direction**: Since problems and opportunities in the day-to–day work cannot be anticipated beforehand, job descriptions must be stated in general terms. The management while providing day-to-day directions to his team members, must make sure that they know the results he expects in each situation, help them to improve their skills, and, in some cases, tell exactly how and when to perform certain tasks. A good management makes his subordinates feel that they can't to do the job in best possible way, not merely work well enough to get by.

E. **Coordination**: The manager has to inter-relate the various activities contributing to the achievement of an objective. This is an important function of management to blend all the activities into a unified action

F. **Reporting**: The management has to report the progress of achievement to his superiors regularly. The progress needs to be assessed from records and reports, which will also be useful for monitoring and evaluation.

G. **Budgeting:** The management has to prepare a budget, and monitor expenditure. At the end of the year management has to assess the financial performance.

H. **Control/Evaluation**: This function helps the management to determine how well the jobs have been done and what progress is being made towards the goals. He must therefore know what is happening so that management can step in and make changes if the organization is deviating from the path he has set for it. A mechanism of control is required for systematically judging progress towards goals.

These functions are broadly divided in three functions as 1. Planning, 2. Implementing 3. Monitoring and Evaluation. In modern management they are described as four functions. (a) planning, (b) Organizing (c) Leading and (d) controlling. This is a modern approach to management functions.

Planning	Organizing	Leading	Controlling
1.Defining goals	1.Determining what needs to done	1.Directing	Monitoring activities to
2.Establishing strategy	2.How it will be to done	2.Motivating all involved parties	ensure that they are
3.Developing subplans coordinate activities	3.who is to do it	3.Resolving conflicts	accomplished as planned

Resulting in → Achieving the organization's stated Goals & Objectives

However whatever way managerial functions are divided and enumerated but they are more or less talking the same which can be seen as in table below.

Managerial Functions	Modern Managerial Functions	Traditional Managerial Functions
Planning	Planning	Planning,
Implementation	Organizing	Organizing(Staff, Budgeting)
Implementation	Leading	Directing Coordination-Communicating
Monitoring	Control	Reporting, Evaluating

In modern era Leading, innovation and managing changes are considered important functions of the Managements.

Leading :

Leading is stimulating people to be high performers. Managers must be good at mobilizing people to contribute their ideas. It is the management function that energizes people to contribute their best individually and in cooperation with other people. Leading involves, clearly communicating organizational goals, inspiring and motivating employee, creating conditions that encourage management of diversity, provides guidance employees need to perform their tasks

Managing Innovation and managing the Change

Peter Drucker, a pioneer of Modern Management has stressed this managerial function. He said. "Managing cannot be bureaucratic and administrative jobs, but it must be a creative task. A manager needs to innovate several ways, i.e. may develop new idea himself, combine old ideas into new ones, pick up ideas from other fields and adapt them to his own use or merely act as a catalyst and stimulate others to develop and carry out innovations.

Principles of Management :

Certainly a person who does management functions is a manager. He needs to carry out managerial functions by observing certain principles of management. These principles

are nothing but fundamental statements or truth which provides direction to thought or action.

A French management guru Henry Fayol has described fourteen principles of management for managers for effective and efficient management. Though Fayol's fourteen principles were part of the Administrative Management Theory, they are very relevant in today's management. Below are the fourteen principles and its explanation.

1 **Division of work**. By dividing total job into small component people will be doing only a small job but will be doing that repeatedly over a period of time these people become specialized in these jobs. As a result productivity and quality will improve.

2 **Authority**. Managers are responsible to achieve results. They have to work through people. They must have formal authority so that they can ask the subordinates to do as per the order. Besides the formal authority, the mangers also must have certain powers derived from certain personal qualities such as superior knowledge.

3 **Discipline**. In an organization the people must have a positive attitude towards discipline so that they respect the rules and regulations of the organization and follow them. Good discipline can be achieved through good leadership only.

4 **Unity of command**. This means that a subordinate can receive orders from one superior only otherwise conflict and confusion will occur.

5 **Unity of direction**. One manager using one plan should direct the activities in an organization that has the same objective.

6 **Subordination of Individual Interest to common Interest**. Organization's interest comes first and foremost. Managers have to ensure that personal interest does not take precedence over the common interest.

7 **Remuneration**. Remuneration for the work done should be satisfactory and just to both employees and employers.

8 **Centralization**. Depending upon the circumstance managers should decide how much authority they should keep to themselves for decision making and how much authority they should give to their subordinates.

9 **Scalar chain**. The line of authority runs from the top management level to the lowest level throughout the organizational hierarchy. Though this chain should not normally be broken, but where it is obviously detrimental for the organization it can be bypassed.

10 **Order**. Both people and material should be at their respective appropriate places. The most suitable people for a particular job should be placed in that job.

11 **Equity**. Managers must treat their subordinates in a just manner without any bias.

12 **Stability of Tenure**. Employees cannot develop an attachment to a job if the employee turnover rate is high. This is not good for moral of the employees.

13 **Initiative.** An intelligent personal will always like to plan and execute a particular job own way. This will give him quite a bit of satisfaction. Though the employees occasionally may commit some mistakes, but this tendency should never be curtailed as it is done in the interest of the organization.

14 **Esprit de Corps.** Feeling of kinship and oneness is important for any organization. Method of communication is an important factor in achieving this.

These principle, as pointed out by Fayola, are applicable to all types of organizations, be a business organization, health system, a hospital or a hotel.

Levels of Management

Management is concerned with achievement of goals and objectives with efficient use of resources. However there is large number of mangers in big organization working in different layers of the system. In every organization or system different hierarchical levels have different objectives. At higher levels objectives sets are broader but with descending down the management hierarchical line, objectives become more specific and measurable. These managers differs in term of their role, function and hence skills depending upon their position in the Management hierarchy. In the health system also the scenario is the same, where one can find large number of managers working in different levels and playing various roles.

Traditionally management or managers are divided in to three levels. 1. Top level, 2. Middle level and 3. Lower level. These levels are viewed differently by different schools of theory, but their roles and function are by and large same with some overlapping in the line of the specific goals and objectives of the organization.

1. Top Level Management: (Senior management/Corporate /Governance)

These people are at the highest level of the hierarchy and are in overall charge of an organization. They are policy makers and give a general direction to the organization. They also interact with the external environment to obtain input for efficient functioning and orientation and reorientation of the organization Minister and Secretaries in the Health System, Collector or District Development Officer, Medical Superintendent of a hospital, Chairperson of the company, board of directors, CEO, COO, senior vice presidents etc. may be called a top manager. There are characterized as below..

- Responsible for overall management of an organization
- Establishes the goal/objectives of the business/program
- Decides how to use the company's resources
- Set the direction the organization will follow
- Focus on long-term issues
- Emphasize the survival, growth, and effectiveness of the organization
- Concerned with the interaction between the organization and its external environment
- Emphasize the growth and overall effectiveness of the organization
- Not involved in the day-to-day problems

2. Middle Level Management: (Executives/tactical managements)

These groups of managers comprise of a few levels. They supervise other managers and also occasionally the operation employees. They look after the activities necessary for implementation of organization plans for achievement of its goals. They also develop the action plan for implementation, direct the lower level managers, lead them and motivate them. Health Commissioner, Directors, Chief Health/Medical Officer of the

Districts, divisional heads, district sales managers in company may be called as Middle level managers. They are characterized as below.

- Located between top-level and frontline managers in the organizational hierarchy
- Responsible for translating strategic goals and plans into more specific objectives and activities
- Traditional role was that of an administrative controller who bridged the gap between higher and lower levels
- Evolving role is that of a developmental coach to the people who report to them
- Responsible for meeting the goals that senior management sets
- Sets goals for specific areas(geographical/sub sets of program)of the organization.
- Decides which employees in each area must do to meet goals

3. Lower Level Management: (Supervisory /Operational Manager/Frontline)

These managers function at the lowest levels of the organization and are in contact with the workers whom they supervise. No other managerial personnel are placed below the as an example the ward in charge of a nursing unit supervises the work of staff nurses who are the operating workers. Medical Officers of Primary Health Centre, Health Supervisors/inspectors in different health program, ward-in-charges or sisters-in-charge, crew leaders, store managers, are the first line managers

- Operational managers are the link between management and non-management staff.
- Make sure the day-to-day operations of the business run smoothly
- Responsible for the people who physically produce the company's products or services
- Lower-level managers who supervise the operational activities of the organization
- Implementing the specific plans developed with tactical managers.
- This is a critical role to the organization.
- Increasingly being called on to be innovative and entrepreneurial.
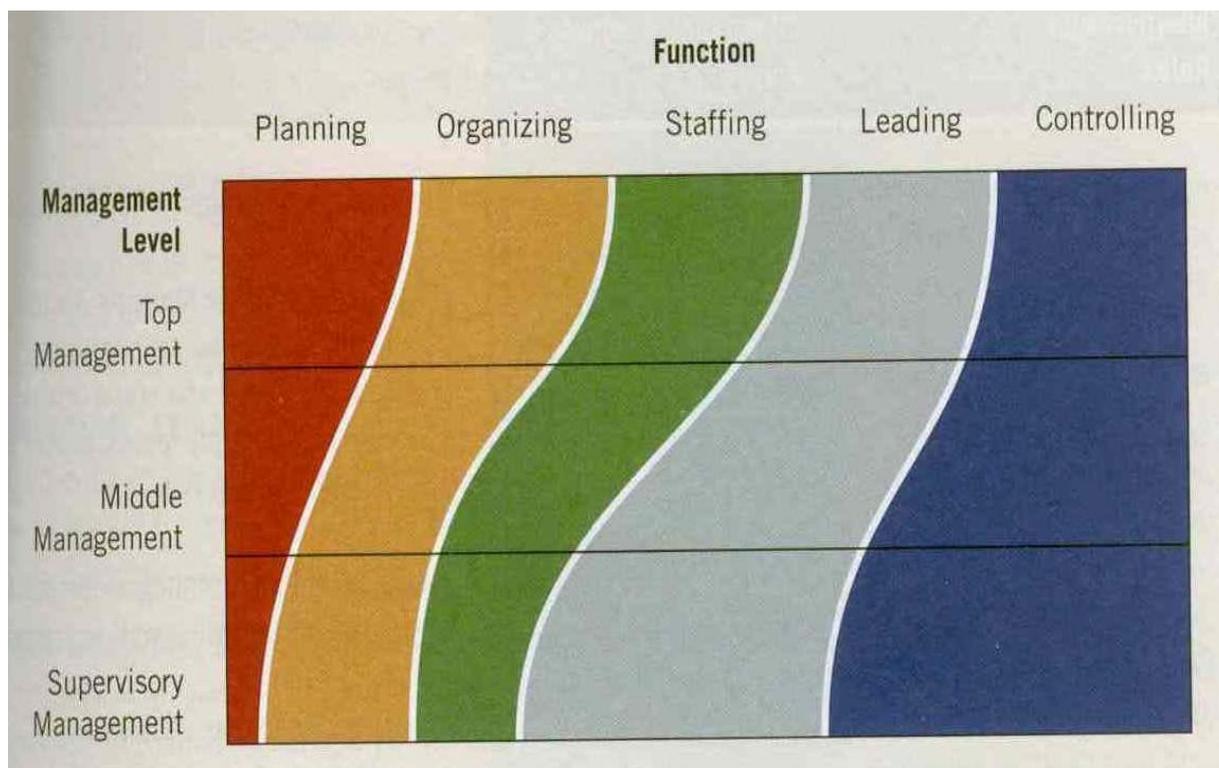
It is evident from the above description that different level of Management has different sets of the managerial function. But by and large managers of all management levels have to carry out typical managerial functions of planning, organizaing, staffing, leading and controlling. However quantum and nature of the managerial functions are different at different levels with some overlapping. Diagram gives broad idea about the relationship between the level of management and managerial functions.

Level of management, manager and typical roles and function in the Government Health System is shown in the table below.

Level of Management	As per the function	As per the role	National Health System	District Health System
Top	Corporate Managers	Strategic Managers	Health Ministries with secretariats, Health Council, Health committee of Planning Commission	Collectorate or District Development Office
Middle	Executive Managers	Tactical Managers	Health Commissioner Health Directors	District Health Offices
Lower	Operational or Frontline Managers	Supervisory Managers	District Health teams	Primary Health Centre Team consisting of Medical Officers, Supervisors

Epidemiology and Health Management

The common understanding about the epidemiology is that it is a science to be used by specialist for epidemiological studies and research. Unfortunately available textbooks are also written so; targeting such a specialized group, but the fact is that epidemiology is the most powerful tool for Public Health Workers and Health Managers, to be used in Health Management. The principals, methods & tools of epidemiology can be applied at all different levels of management. In other words large part of applied epidemiology i.e. field epidemiology is health management.

Epidemiology has vast role in health system, than carrying out few specialized studies, to identify the etiologies; filling the gap of diseases history, establishing cause and effect relationship between etiology and diseases, interventions and effects etc. Thus its' large scope of use is beyond the academic and research institutes.

Some of the common managerial activities in which application of knowledge & skills of epidemiology is carried out are as below...

- Defining and analysing the health problems (community diagnosis) for planning;
  - rank health priorities, identifying risk factors, defining high risk groups,
- Recommending strategies & intervention (health promotive, preventive curative, rehabilitative),
- Testing and establishing causal relationship between strategies/ interventions and health outcomes,
- Suggesting indicators, methods and tools to monitor the interventions and
- Evaluating the strategies/ interventions/programs.

Thus use of simple but effective epidemiological methods can help heath managers in planning and designing health program/services, monitor & evaluate community health program/services. Here again it is to reiterate that basic epidemiological concepts are highly practical and relevant not only for the use of top level management, or district health team but also for all health workers.

Epidemiological studies in Health Management

Epidemiology is about health information. Information is needed for planning, implementation, monitoring & evaluation. The Epidemiologists are the person looking for the answers of questions "what, why, who, where, when, how and Health Managers are also the person who have to keep on asking these questions.

Different epidemiological indicators on morbidity, mortality, are used to assess the health situation and diagnose the community health problems by use of descriptive epidemiology; health problem, its frequencies, group of people affected; geographical area involved can be identified.

Use of analytical epidemiology tried to suspect direct and indirect factors behind the health condition and further testing of hypothesis (relationship) of suspected factors with health condition outcomes etc.

Intervention or experimental epidemiology is used for knowing the effectiveness of new method for improving health condition preventing & control diseases.

Though little known but commonly used branch of the epidemiology is the evaluation epidemiology. Effectiveness of different health services, programs, strategies, interventions are carried out as a part of the evaluation and used in re-planning.

Thus descriptive epidemiology can be used by lower and middle level manager. Top level manager can use descriptive and analytical epidemiology for situation analysis and thus in health planning. Experimental or interventional epidemiology can be used before introducing or scaling up the newer interventions. Evaluation epidemiology can be used by higher level managers for validation or modification or replacement in planning.

The relationship between epidemiology & health management is summarized below.
Summary epidemiological methods/tools, their application scopes

Epidemiological	Scope of Application	By whom
Descriptive disease, description in terms of time plan & person	Health situation analysis what is the health programs and its frequency, who is affected where is present?	• Health worker • PHC - MO • District health manager
Analytical epidemiology confirmation of hypothesis & establishing cause-effect relationship	What causes the disease? Why it is continuing? What intervention can make the difference?	• Mid-level managers • Top level managers
Intervention or experimental epidemiology	Effectiveness of the newer (methods) interventions for improving health situation	• Top level management high level management
Evaluation epidemiology	Measure effectiveness of various health programme & services	• Top level & mid-level management (district health team)

To summaries; epidemiology is very useful in following actions in health management

1. Describing disease burden and disease of public health importance.
2. Identifying the factors that increase or decrease the risk of acquiring diseases.
3. Identifying the high risk group, area or session.
4. Helping in indenting the chain of disease transmission in community.
5. Knowing the trend of diseases.
6. Testing of the efficacy of intervention strategies
7. Identifying the health needs
8. Evaluating the intervention strategies
9. Evaluating the public health program
10. Monitoring the health status of community.

Above list is illustrative and not exhaustive.

Managements techniques:

In management, to achieve specified goals; planning, organizing and controlling of human and other resources is carried out with the application of Management techniques. Management techniques are applied to bring about increased managerial capability, efficiency, effectiveness and productivity. A management technique is a "set of procedural steps which may be loosely or rigorously started, which embody multiple idea content and which are concerned with doing work to achieve an objective". Management techniques make positive efforts to analyse the situation in a systematic and scientific manner and provide a rational basis for decisions.

Management techniques are either concerned with decision-making in general or with decision relating to planning, organizing or controlling of human and/or other resources with a view to achieving the specified objectives in particular.

Classification of Management Techniques

Management techniques are classified based on the objectives i.e. what does the techniques hopes to achieve? Or In terms of various resources employed in an organization, viz.., human, material, machinery & equipment, money and time.

a. Classification of management techniques based on the Objectives :

Sr.	Objectives		Techniques
1	**Detection**	To find out or discover something e.g., what is happening or what is wrong?	Input-output Analysis, Attitude Survey, Production study, Activity Sampling, Critical Examination, Break-even Analysis. Management Information System
2	**Evaluation**	To measure or estimate the value of an item	Job evaluation, work Measurement, and Work Estimation, performance Appraisal, Cost-benefit Analysis.
3	**Improvement**	To improve performance	Management by objectives, method study, value analysis etc.
4	**Optimization**	To optimize performance	Linear programming, Ergonomics, Operations Research etc. Participatory Management, Organizational Development
5	**Specification**	To specify a desired value or situation or action	Layout planning for offices and plants layout, designing, etc.
6	**Control**	To prevent the deviation from the stated objectives	Cost Control, Credit Control, Labour Control, Inventory Control, Production Control, Budget Control, etc.
7	**Communication**	To communicate information	Visual Aids, suggestion schemes, report writing, communication Theory, Information Theory, Management Information System etc
8	**Demonstration**	To demonstrate something	Programmed learning, job instruction, management development and training etc.

B. Classification based on Resources deployed

Sr.	Resource	Management Techniques
1	**Human Resources**	1. Organizational analysis 2. Participative Management and organizational Development (OD) 3. Job Evaluation 4. Training 5. Incentive Schemes 6. Suggestion Schemes 7. Method study 8. Work Measurement
2	**Material**	1. Inventory Control 2. Value Analysis 3. Material Handling 4. Standardization 5. ABC/VED
3	**Machinery and Equipment**	1. Method Study 2. Value Analysis
4	**Space and Building**	1. Layout Planning 2. Method Study
5	**Money**	1. Cost benefit analysis 2. Budgetary control 3. Performance budgeting 4. Management accounting
6	**Time**	1. Method study 2. Work measurement 3. Network analysis (PERT/CPM

1. Organizational Analysis :

Modern management Guru, Peter F. Drucker has said "Good organizational structure does not itself produce good performance, just as good constitution does not guarantee good government and good laws does not ensure good society. But poor organizational structure makes good performance impossible, no matter how good the individuals may be"

Organizational Analysis is a managerial technique to achieve maximum results with minimum costs by harmonizing the human and material resources with reference to the goals and objectives of the organization.

When to do organizational analysis?

Time to time organizational analysis is needed in all the health organization, whether old or new. The common reasons for carrying out the organizational analysis are as below.

- When there is change in the objectives of the Organization.
- Where there is a change in methods of work.
- Over organization (over the period of time).

Techniques for organizational analysis :

1. **Organizational Charting** : Drawing organizational structures, flow of authority, assigned responsibilities, number of personnel, positions and incumbents, name of the components, salary, promotional avenues, etc.

2. **Organizational Manual** : General functions, responsibilities, and authorities, relationship with others, descriptions of various jobs, set of rules, regulations, norms and standards etc.

3. **Work Distribution Chart** : Individual or unit/group wise work assigned and job contents.

4. **Checklist of principles of an Organization** : For systematic checking of present and proposed arraignments against accepted principles of organization.

5. **Job Analysis :** Reviewing the tasks against duties, responsibilities of an individual.

2. Personnel Administration: Participative Management and organizational Development (OD)

The health of an organization is measured in terms of its capability to adjust with internal and external environmental challenges. In all organizations there is a lot of friction amongst the experts and other staff generating an atmosphere of frustration and low morale, resulting in the overall inefficiency. Participative management and organization Development (OD) helps in maintaining the healthy atmosphere of work as well as lead to increase in effectiveness.

Organizational Development is an "effort: (1) Planned, (2) Organization wide,(3) Managed from the top to, (4) increase organization effectiveness and health through,(5) Planned interventions in the organizations' 'process' using behavioural science knowledge."

The heart of the OD is a belief that personnel in an organization are key to development. OD depends upon the purely internal initiative of the employees of an organization. It is not mere structural changes but includes personal dedication and capabilities of management and staff. OD helps in warding-off the bureaucratic attitudes which is result in low output and stagnation. It can be integrate with other techniques e.g. Management by objectives, Participative Management to optimize the efficiency of personnel in an organization. "**Participation** is ….. an individual's mental and emotional involvement in a group situation that encourages him to contribute to group goals and to share responsibility for them."

Employees require proper motivation, which is the base for the management functions of planning and organizing. A climate of creativity must be developed and maintained by management. It is the duty of the officers of such units to make the employees feel that their work and their association with a given organization represent a vehicle which will accelerate the achievement of goals of the organization. This would require the active participation of the employees in the decision making process of the organization.

3. Management Information System :

From policy formulation to day to day decision making, pertinent information is must otherwise it is difficult to make any rational policy or decision. Management Information System is creation of the system to provide such information to the decision-makers which is most relevant, accurate, complete, concise, timely, economic, reliable and efficient. A good information system provides data for monitoring and evaluating the programmes and gives the requisite feedback to the administration and planners at all levels. A proper use of it increases the better planning, implementation, monitoring and hence effective and efficient performances.

4. ABC & VED Analysis

ABC analysis is a technique which would enable a manager to prioritize the activties. By arranging his work into an order of priorities, he can decide on which items to concentrate first, which others to deal later and yet which others to delegate to his assistants. When done more systematically and in quantitative terms, this system of building up priorities of work is called the ABC analysis. ABC analysis can be of great use in dealing with materials management. Forty to sixty per cent of the total expenditure of an organization is generally spent on materials. The other from of ABC analysis is VED, i.e. arranging the activities in the orders of Vital, Essential and Desirable and preparing cross tabulation according to ABC and VED.

5. Management By Objectives (MBO)

MBO has been used in various ways: as a planning tool, as a motivational tool and also for performance appraisal.

The principals of MBO can be applied either for the entire organization or for a department. The essential features of MBO are participation where involvement of all levels of managers is important. MBO, being based on behavioural approach to management, is based on concepts as under :

- a) Emphasis on results rather than activities.
- b) Defining objectives (expected results) for specific positions.
- c) Participatory or Joint objective setting.
- d) Identification of Key Result Areas (KRAs)
- e) Establishing a Periodic Review System.

The process of MBO starts with goal setting at the top, setting of subordinate's goal with their active participation, periodic review of the performance and finally appraisal. A positive outlook towards the people is essential for the MBO process. The objectives are formed in hierarchy such that objectives of one level contribute towards achievement of objectives for the next higher level. The lower level managers are also involved in objective setting of the higher level. In MBO the system of objectives ultimately help to realize the common goal.

6. Work-Study: Work study is of two types

1. Method study
2. Work measurement

Before describing work study certain terms are to be understood:

a. Job: The totality of and/ or responsibility assigned to or a category of hospital worker (e.g. Nurse working in the ICU vs. in the Injection Room of OPD)

b. Function: A broad area of hospital care included in jobs involved in it e.g. maternal and child health care. A function includes a number of activities.

c. Activity: A distinct unit or category of work, a part of the function pertaining to a specific job. For example, Pregnancy diagnosis is an activity consists of a number of tasks.

d. Tasks: A specific procedure or unit of work included in an activity. In the above example of diagnosis of pregnancy the individual tasks are History taking, Physics examination, Investigation etc.

e. Task Element or sub-task: one of the many action (or component of task) which has to be performed to satisfactorily complete a task (e.g. inspection palpation percussion & auscultation of the pregnant lady are element or sub-tasks of physical examination stated above.

Method study and Work measurement

In a hospital patients have to wait for 3-4 hours in OPD before getting their turn. Even to get a room in private ward means too much of formalities. Methods and procedures in a hospital are so complicated that the attendants of patients get exhausted even before the admission of the patient. Wrong methods, practices and procedures hamper the functioning of heath care system. In order to be effective, deliver services quickly and efficiently right procedures and methods for the above situation a method study can be carried out.

Method study is one of the techniques of work study to improve on 'How' of doing work. It is a technique to improve method of work, with a view to increase efficiency and effectiveness of resources-men, money and material.

Method study must be used when a new organization is created or when an alteration is made in the existing organization or when some problem arises in the existing health organizations.

While **organizational analysis** deals mainly with the division of work and responsibility for the efficient fulfillment of objectives, the **method study** deals with the way the work is performed. Objectives of method study are to find better ways of doing things, resulting in better performance.

As per the British Standards Institution Method study is a systematic recoding and critical examination of existing and proposed ways of doing work, as a means of developing and applying easier and more effective methods and reducing costs; while Indian Standards Institution defines Method study as the systematic analysis and improvement of work method and system through the application of innovatory techniques to achieve better utilization of resources.

Work measurement

The measurement of human work has always been a problem for management. Work measurement is concerned with the determination of the amount of time required to

perform a unit of work. I.L.O states "Work measurement is the application of techniques designed to establish the time for a qualified worker to carry out a specified job at a defined level of performance". Thus, work measurement is to provide a yardstick for human effort which can help in efficient manning, improved planning and control, sound and effective schemes. Without measurement, the organization operates in darkness with hardly any basis for comparison or control.

Health administration run by hit and trial methods, i.e., without any yardstick(standards) to measure the individual and collective performance. It reduces the efficiency. How can we allocate human resources without knowing these standards? That is why in most of the health organization, there is lot of mismatching and some health organization are over- staffed while other are under-staffed. All these problems can be solved technique of work measurement is used. This technique is easy to apply, provided it is done from time to time to introduce desired change.

Work measurement has both a negative and positive role. Negatively, it locates the existence of ineffective time; positively it sets standard times for the performance of work. Since Method Study is a technique for reducing work content, therefore, it is necessary that Method Study should precede work measurement. In short, work measurement is interested in investigating, reducing and subsequently eliminating ineffective time.

1. What is the utilization time of different categories of health workers?

2. How many ANC women can be examined by a doctor in a given time?

3. How many children can be vaccinated in outreach session in a given time?

4. How many HIV /TB testing can done out per hour?

5. How many IUD can be inserted per hour?

Work studies undertaken for a number of reasons such as:

1. *Planning and management* of Health manpower e.g. allocation of tasks to various categories of Health workers.
2. *Evolution of the effectiveness and efficiency*: of programmers or services including performance of the personnel e.g. to ascertain, for example the performance of program/services correspond to the time devoted.
3. *Planning and revision of training programmers***:** for Health workers e.g. does the content of curricula relating to training of Health workers correspond to the job function expected of Health personnel.

Work-studies include a number of activities some of which are listed below:

a. *Identification* of action to be performed by the medical and paramedical personnel in providing in-patient and outpatient services.

b. *Specification* of these action by identifying activities and tasks, and if necessary task elements.
c. *Analysis* of present performance of these activities or tasks; and

d. *On the basis of such analysis **Development of work profiles**, i.e. job description for various categories of Health workers, as and when necessary, skill profiles etc.*

It is not necessary that any one study will be concerned with all these steps. In fact the use of work-study will vary from one situation to another.

7. Cost Benefit and Cost Effectiveness Analysis

Cost benefit analysis (CBA) is determined by relating benefit of a program to its cost. It is expressed in monetary terms. It helps the decision-maker in deciding which of the alternative programme should be given priority. Thus it gives ideas about if a particular intervention is undertaken to what extent the programme will be benefitted. It is a method of aggregating all cost and all benefit associated with a given project programme or decision in monetary terms, converting them to present value and combining them in a single index such as the present value of net benefit.

In the broader sense cost benefit analysis is an activity, which investigates the cost and benefit that are associated with a project programme to arrive at a decision. For understanding the Cost benefit analysis following terminologies need to be understood.

- Costing Exercise : It is just, cost calculation made to observe the expenditure.
- Budget Expenditure Exercise (Budgeting) : It is the comparison of costing exercise (expected/actual expenditure) with financial sanction.
- Cost Analysis: It is the comparing of costing exercise (expenditure) i.e. what was spent for a health services, the deprecation there off to the present expenditure and the burden on the present finance etc.

The CBA is the method by which one can convince the administrators (or even ministers!), regarding a new plan or programmes. Cost- benefit analysis is an aid to systematic thought and helps the planners to decide as to what should be done-on the relative merits of different programmes.

In performing cost benefit analysis the opportunity cost has to be taken into account. For example, if resources are committed to prevention of HIV/AIDS then what is the loss of their value for other uses? This would help in justifying allocation of resources (e.g. Budgeting for HIV/AIDS program). If the analysis could show that internal rate of return on investment in the programme is at least as much as the investment made in other sectors. If the rate of return is even lower than the bank rate interest then detailed investigation need to be made about the programme implementation. CBA can used to be evaluating alternate investment decision such as strengthening of specialize Health care set up or setting up of special care unit at district hospitals. Another example is making decision about devoting resources to health education or maternal and child health services or immunization against particular disease?

Thus through DBA any given budget for health may be distributed between programmes by including, first, those with the highest ratio of benefits to cost, then those with the next larger and so on, until the budget is fully allocated.

Limitation of the CBA :

The CBA has to weight the cost spent and the advantages achieved in monetary terms only. In some situation the purpose of government expenditure is specific and well understood yet benefit which accrue due to certain action, cannot be expressed in monetary terms. In such cases often cost effectiveness analysis (CEA) is used in which alternative systems are investigated to determine:

Cost Effectiveness Analysis

CEA is carried out to answer following two questions?

1. Which of them is least costly when the alternative are equally effective in achieving the objective, and
2. Which of the one alternative is most effective in achieving the given objective when they are equally costly?

CEA also predicts what effect was achieved by expenditure e.g. Decrease of incidence of measles by vaccination: or reduction in maternal mortality by giving JSY scheme to mothers etc. Thus in CEA it attempted to measure benefit(e.g. in term of Health outcome rather than monetary return) and costs in different units detailing the maximum benefit that can be achieved for each amount of expenditure leaving the final choice of amount to higher levels decision makers. Occasionally, an extension of cost effectiveness analysis is useful for investigation budgetary allocation for a public purpose. The cost effectiveness analysis could be used to study the alternative models /strategies given as under:

- Hospital vs. domiciliary treatment of a T.B patient.
- Installation of X-ray equipment in every PHC or for a group of selected PHC or CHC.
- Prevention of maternal mortality by tetanus toxoid or aseptic condition in the labor room.
- Diagnosis of malaria by PS for MP or RDK.

Problems in Analysis Costs and Benefits

The concept of cost (or input) benefit (or output)provides an extremely useful framework for organizing pertinent facts and relationship in dealing with police problems but there are various problems associated with costs or benefit or both make it difficult in actual practices.

One cannot cost tangible costs associated with action regarding personnel, material and capital expenditure, other kinds of cost e.g. spill over costs, good will cost, cost of community disruption, cost of sufferings etc. It cannot answer in what time period these costs will reduce? Many costs are not computable in financial terms or are not even quantifiable. But they are real costs and may be susceptible to logical analysis. The cost of certain services also cannot be converted in monetary terms.

The second problem is specifying the relationship between inputs of a person and outputs. These relationships are production functions which define available alternative courses of action.

Third problem is defining outputs or benefits. For example if life of a person is saved by DOTS what cost did the drugs recovered? Is it cost of the drug vis-à-vis cost of the life? If so, what is the cost of a human life?

What output should be produced? Calculated?

Cost benefit analysis on the other hand is a framework for keeping our thinking strength in evaluating projects. It is a framework that demands explicit attention in deterring the impacts of a proposal and assigning values to these impacts. It is more than a tool, which provides information helpful in taking decisions. For example increase of couple protection rate by use of a particular Family planning method.

8. Network Analysis: PERT, CPM and Gantt chart

This managerial techniques are used for effective management of Time in implementation of project/programme.. The basic principle of network analysis is a simple one-namely to record in the form of a diagram such as that shown in fig below, the logical sequence in which events must take place.
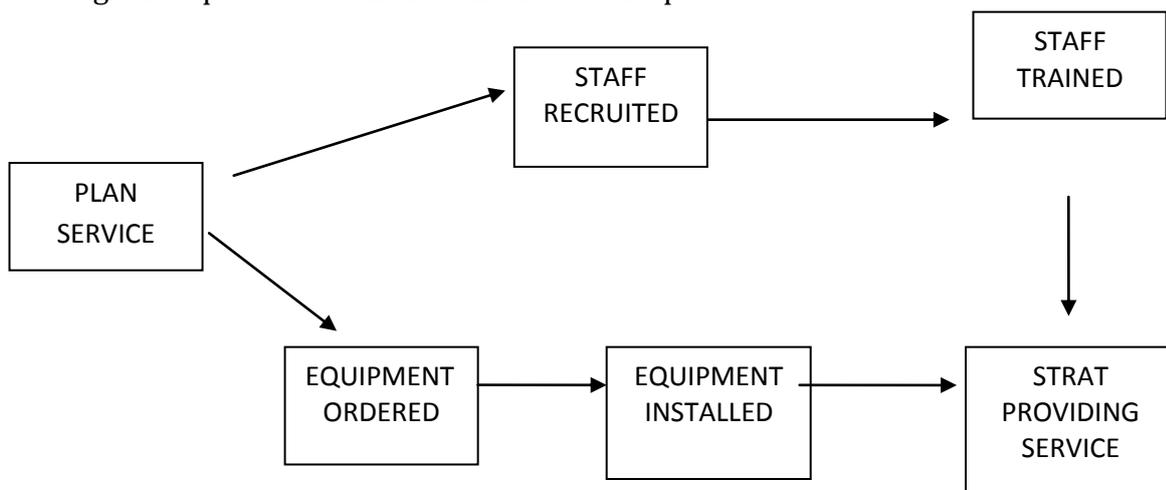
By simple arithmetic it is possible with a diagram to calculate the time by which each activity must be completed and to identify those activities that are critical (i.e. those if delayed will delay the whole work/project. This simple technique a basic method by which all concerned in a project can know what is expected of them and by what time. Thus it provides a ready means for working out change in a programme to minimize the effect of any delays or crises that may occur.

Two types of network techniques are commonly employed depending upon the situation namely, PERT (Programme Employed Review Technique) and CPM (Critical path method). They were developed by the US navy in 1958 for the Polaris Missile project. CPM was independently developed in 1957 by walker of the integrated Engineering Control group of American chemical firm and Kelley of Remington

Corporation of the USA in search of new ways for scheduling of project. Thus use of both techniques of planning and scheduling of work involves three main stages:

- Breaking down the project into a set of individual jobs arranging them into a logical sequence and time to draw a network flow of action similar to the Fig shown above.
- Estimating the duration and resource requirements of each job, scheduling and finding which jobs control the completion of the project, and
- Re-allocation budget to other resources to improve the schedule.

For using PERT and PCM certain skill/expertise are needed Gantt chart, other time scheduling method be used by most of the activity managers in much simpler way. These techniques are useful right from planning and scheduling the work to monitoring the progress of project implementation to ensure its timeliness They are widely used in the engineering field. They are also many health managers and have been employed in hospital set ups too.

Example-I: Setting a Specialized laboratories in a district hospital.

In order to set-up such department with minimum problems prepares an action plan. This involves:

(a) Listing of all major activities and their expected duration as shown below.

S .No	Activity Description	Duration (in weeks)
1	Submission of proposal	4
2	Obtain administrative approval	10
3	Identify accommodation in the hospital	1
4	Get necessary modifications done in the building	4
5	Invite tenders for equipment	4
6	Process quotations and place order for equipment	2
7	Receive equipment	6
8	Install equipment	2
9	Action for recruitment of staff including advertisement	8
10	Process of application and holding of interviews	6
11	Issue appointment letter	1
12	Joining of staff	6
13	Training of staff in use of equipment	1
Total	Actual duration might be much less than the mathematical total because overlapping of activities by networking as shown in the figure above.	Mathematical total 55

(b) Scheduling the Activities: This involves defining the inter-relationship in time with other activities namely predecessor successor or concurrent The activity whose start is dependent on completion of the preceding activity is called successor and the preceding one is called preceding activity The activities which are independent

and can be started and activity can be initiated simultaneously without waiting for completion of any other activity, are called concurrent activities. For drawing of network the scheduling is done by allotting the number to these activities is shown below where successor activities are given the next number of the predecessor activity. Concurrent activities are given the same number. After this the network can be drawn similar to the one shown in Fig.1 using the PERT/CPM. This will require calculation of slack time, critical activities and critical path.

Gantt chart

Sr.no	Activity Number	Activity description	Duration (in weeks)	Time schedule for completion
1	1	Submission of proposal	4	
2	2	Obtain administrative approval	10	
3	3	Identify accommodation in the hospital	1	
4	4	Get necessary modification done in the building	4	
5	4	Invite tender for equipment	4	
6	5	Process quotations and place order for equipment	2	
7	6	Receive equipment	6	
8	7	Install equipment	2	
9	4	Action for recruitment of staff including advertisement	8	
10	5	Process of application and holding of interviewers.	6	
11	6	Issue appointment letters	1	
12	7	Joining of staff	6	
13	8	Training of staff in use of equipment	1	

The forgoing representation also shows the total time required for completion of the overall activity. If the time duration to be reduced then the inter-relationship of activities is to be examined in more detail to make more activities concurrent and reduce the time duration for completion of various activities by putting more resource, wherever possible The utility of the Gantt chart can be further increased by writing the name of the person responsible, against each activity, for its conduction Then the project manager can easily monitor the progress of project implementation using Gantt chart with certain amount of answerability from person entrusted with the work.

Comparison of PERT/CPM: PERT was development and used mostly in research and development types of projects/programmes which are relatively new. Thus much information is not available. This leads to uncertainty in calculating timing for accomplishment of various activities. On the other hand, CPM is applied to most repetitive type of projects where activities are standardized & their properties are known. Changes occur mainly in size, shapes and arrangement rather than in design

concepts. It does not allow uncertainties in time estimates and uses only one time estimate (deterministic). Moreover in CPM times are related to costs. The cost of getting a job done many increase but if other advantages outweigh this added cost, the job should be expedited or crashed. On the other hand, if there is no reason the job should be done at its normal pace with a lesser assignment of resources. Only the critical job needs to be expedited. CPM attempts to solve problems such as which jobs need to be expedited and by how much.

The application of PERT/CPM can be profitably utilised in the programmes and projects of Health, e.g. construction of hospitals, eradication of communicable diseases, family planning programmes, administration of environmental programmes, etc. Care taken that the cost of PERT/CPM should not take away large resources of the project.

9. Total Quality Management (TQM)

Quality can be defined as "the totality of features and characteristics of a product / service which have the ability to satisfy the clients felt / implied needs". Total Quality Management (TQM) as a management tool, focuses on continuous improvement of procedures and processes involved in any activity or any services. The entire focus in TQM is to continuously improve the way things are done in an organisation, for which each member of the organization must know what is the right thing to do, how to do these right things and how to measure the current level of quality and improvement in this level.

Application of Different Techniques :

It is clear that one technique or the other is applied in one form or the other at all the three levels of management. Because the lowest level has to perform operational function, management techniques like work study, Network Analysis, Capacity Utilization studies are adopted.

At the middle level, where the policy is executed, some more important techniques like Manpower Planning, Cost Benefit analysis, Statistics and forecasting, etc., are applied to effect improvements.

The top management uses more strategic techniques like Technological Forecasting, Performance Budgeting, Operational Research Studies, etc.

Conclusion :

Health system is a set of interdependent parts that works together as a while, towards goal/goals(improving people's health) in which the performance of the all is greater than the simple sum of the performance of its parts. Health system (its organization, program/projects) can achieve their goals if they perform well. Managerial acumen is important for its effective and efficient performance. For the same Health system is having managerial hierarchy, Top level management, Middle level management and lower level management. Management teams responsible for carrying out four important managerial functions. 1. Planning, 2. Organizing, 3. Leading and 4. Controlling; depending upon their roles. Innovating is newer managerial function gaining ground in modern management.

Top level management, generally Health ministries and secretariats are involved in policy, strategic planning, resource allocation etc. Middle level managers i.e. Health Commissionerate, directorate, District Health Team are mainly involved in drawing action plan, monitoring, directing and leading the team. Third level management are at operational level, they are Medical officers with supervisory team act as a coach, mentor and facilitator to front line functionaries (Health workers, Clinicians, paramedics etc.)

For effective management performance 14 principles laid down by Henry Fayol and various managerial techniques based on objectives or resource utilization.

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Chapter : 2 : Managers : Levels, Roles & Skills

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"The best executive is the one who has sense enough to pick good men to do what he wants done, and self-restraint enough to keep from meddling with them while they do it."

- Theodore Roosevelt (1858-1919), U.S. President

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Learning Objectives :

At the end of this chapter it is expected that you will be able to...

1. Know the different level of manager and their functions.

2. Understand the different roles & responsibilities of the managers.

3. Develop understanding about important managerial skills.

4. Enlist important characteristics for becoming effective manager.

Important Terminologies

Manager	Manager is the person who has the responsibility of achieving certain goals/ objectives, having been given the authority to utilize the resources.
Leader	A leader is "a person who influences a group of people towards the achievement of a goal".
Leadership	The ability to influence a group toward the achievement of goals.
Skills	An <u>ability</u> and <u>capacity</u> acquired through deliberate, <u>systematic</u>, and sustained effort to smoothly and adaptively carryout complex <u>activities</u> or <u>job</u> functions involving <u>ideas</u>(<u>cognitive</u> skills), things (<u>technical skills</u>), and/or people (<u>interpersonal skills</u>.
Motivation	Motivation is the driving force that causes the flux from desire to will in life.
Organizers	A persons who arranges all resources, systematically and orderly so that they work in coordinated manners in desire direction to achieve the prefixed goals.
Governance	The exercise of economic, political, and administrative authority to manage a country's affairs at all levels. It comprises mechanisms, processes, and institutions, through which citizens and groups articulate their interests, exercise their legal rights, meet their obligations, and mediate their differences. – UNDP. It is all about making administrative, financial decisions, creating sets of rules and institutes and framing policies.

Introduction

Health system is unique in many ways. There are a large number of people working with wide skill differential. At one end there are highly skilled clinicians and paramedics, on the other end very large number of people who are easily substitutable. Managing an organization characterized by such a high level of differential knowledge throws up unique management problems. Another dimension is added because of their criticality. Their ability to make an impact on the well being of the community is undisputable. Health and development of communities' dependence on the health care services hence there is a need for better management of these services, so that they can be run effectively and add value to society.

To achieve this first requirement is to develop trained manpower, i.e. Health managers (or Health Leaders) that will be in charge of these health care services.

Health Manager :

There are three characteristics all organizations having in Common.

- Purpose - Typically expressed in terms of goals and objectives.

- Systemic Structure –Hierarchy, division of labor, defined roles of the members, set of rules and regulations

- People – To make decisions and to perform the activities which turn goals into reality

Manager is the person who decides the purposes, create the systematic structures and use the resources to meet the purposes. Thus he/she is having the responsibility of achieving certain goals/ objectives, having been given the authority to utilize the resources. i.e. human, financial, physical assets, and information.

Manager denotes an employee with certain managerial responsibilities to lead functions or departments and / or employees. These responsibilities spanned from planning, directing the work of a group of individuals, monitoring, supervising, and taking corrective action. Managers have diverse responsibilities for people and functions depending, upon the size of the organization. In the smaller organization, few manager(s) carry out all the activities from setting goal to supervision but in larger there are layers of mangers, senior managers, to supervisors. Managers may direct workers directly or they may direct several supervisors who direct the workers.

The manager must be familiar with the work of all the groups he/she supervises, but does not need to be the best in any or all of the areas. It is more important for the manager to know how to manage the workers than to know how to do their work well.

Like all organizations, Health System consists of different three levels of Management and hence three different sets of Managers.

Top Level Managers :

They are called strategic managers or corporate manager. They are linked with policy making, governance issues; higher level of planning (strategy formulation) and resource allocation. Their overall responsibility for the organization is to develop organization's goals with focus on long-term issues. They emphasize survival, growth and overall effectiveness of the organization and concerned primarily with the interaction between the organization and its external environment. They decide how to use the resources. Top level managers are not involved in the day-to-day problems. They set the direction that organization will follow.

In typical Government Health set up, ministers along with the team of Secretaries (Generally IAS officer) are playing role of the top level management in India. From one point of view Health Commissioner, Directors at state level, District Head of Health Department (including District Magistrate/District Development Officer) are examples of top level managers. In Hospitals owner-chairman, president of the Hospital or senior vice president are the top level managers. In Voluntary Organization Chairman-President, Board of Trustees, are parts of top level management. In corporate world; Chairperson of the company's board of directors, Chief Executive Officers (CEO), Chief Organization Officer, senior vice presidents etc. are considered high level managers.

In Government Health System, examples of different functions carried out /being carried out are given below...

- **Formulation of Health Related Policies :** National Health Policy, National Population Policy, State Population Policy, Drug related policies etc

- **Setting Goals and objective :** IMR<30/1000 Live birth, MMR<200/100000, Eliminate Leprosy by 2005 ,Eliminate Kala Azar, reduce mortality by 50%on account of TB, Malaria and Other Vector and Water Borne diseases and reduce Prevalence of Blindness 0.5% by 2010, Eliminate Lymphatic Filariasis by 2015.

- **Allocating the fund :** Fund in general budget and approving the specific health programs and item wise budget are the jobs of senior managers.

- **Designing National and State health program/schemes :** National Rural Health Mission, National Vector Borne Disease Control Program, Reproductive and Child Health Program, Revised National Tuberculosis Program, State School Health Program, Chiranjeeve Scheme, Mukhya Matri Amurtam Yojna, Janni Surakha Karyamak etc

- **Operational Policies :** Levying user charges, creating institutes, like Rogi Kalyan Smitee, Village Health Committee, creating facility based New Born Care, involving community by ASHA schemes, involving private sector (Public Private Partnership), creating IT grid in Management Information System etc.

- **Human Resource Management: Recruitment of Middle level Mangers :**

  o Sanctioning of posts, Appointing/promoting of District Health Officers, Directors etc.

  o Preparing the recruitment rules, promotion and transfer policies,

  o Preparation/approval of Job chart and responsibilities of different professionals.

- **Evaluation :** National Family Health Surveys, District Level Health Survey, HIV Sentinel Surveillance, Behavioral & Biological Surveillance etc.

Middle Level Managers :

They are also known as tactical managers, executives etc. They are responsible for translating the general goals and plans developed by top management into specific objectives and activities. Traditional role was that of an administrative controller who bridged the gap between higher and lower levels. They develop action/implementation plan, coordinate resources; act as a developmental coach to the people who report to them. Middle level mangers set goals for specific areas of the business- objectives- subset of goals. He decides which employees in each area must do to meet goals.

District Health officers, Block level officers are the middle level managers. In hospital set up, Managing Director, Head of various Divisions can be considered the middle level managers. In typical corporate world department or divisional heads, regional or district sales managers are middle level managers.

Some examples of functions carried out being carried out by Middle Level Managers in General Health Systems are as follow..

- **Preparing Action Plan or Project Implementation Plan :** Action Plan for NRHM, NACP etc.

- **Monitoring & Evaluation :**

  o Review meeting : State or regional quarterly or monthly review meetings, Meeting with state(district) Program officers, Reviewing district Health Officers wise, Dean & Superintendent meeting. Review meeting at District for, District Program officers, Superintendent of CHCs, Block Health officers or PHC MOs etc.

  o Field visits : Visits by State-Regional Directors, and District Health officers.

  o Reviewing the monthly (periodical) reports : Indicator wise analysis and performance review based on the reports received from district/block, Peripheral Institutes.

  o Reviewing surveys and studies carried out by different external agencies.

- **Human Resource Management:**

  o Recruitment & promotion of lower level management and non management staff (paramedical and non medical),

  o Training and

  o Appraisal of the staff.

- **Procurement and supply :** Drugs, vaccines, equipment, vehicles, furniture, consumables etc are procured at National, state and district level as per the procurement policies and guidelines and supplied to actual destinations.

First level or Lower Level (Opearational) Manager :

They are operational managers, supervisors, frontline manager. Lower-level managers supervise the operations of the organization. They are directly involved with non-management employees. Lower level managers are the link between management and non-management staff. They are involved in implementing the specific plans developed with tactical managers. This is most crucial cadre of the management. They play critical role to the organization as they make sure the day-to-day operations run smoothly. They are responsible for the people who physically produce the health care related services or company's products.

In Government Health System Medical officers at PHC, supervisors (Health or administrative), superintendent of office, ward in charge sisters, sanitary inspectors are examples of the first level managers. In business houses, assistant managers, team leaders, captain, foremen, departmental heads etc are the first line managers.

- **Supervision :**

- o Field visits: Observing the field activities, interacting with beneficiaries, stakeholders.
- o Reviewing the records, registers and reports : viewing for completeness, correction, consistency.
- o Observing : On field observing vaccination , staining of slides, IEC session, being carried out by the workers. etc.

- **On field Technical Support :**
  - o Guiding in preparation of Micro-plan for implementation: Micro Plan for Village Health and Nutrition Day, National or sub National Immunization day, Special Immunization day, Village Health Committee meeting, IEC session, Pre Monsoon Preparation, Celebration of Health days etc.
  - o Demonstrating: Right techniques for vaccination, inter personal communication, counseling the clients, preparing the slides, filling up the records, registers and reports etc.
  - o Facilitating : Identifying the field problems and reasons behind, facilitating in finding the solutions and/or accompaniment the staff e.g. identifying the proper site for VHND session, Community mobilization for IEC or medical session etc.

Summary of the different levels of managers and their roles and functions are given in table below.

Sr.	Level of Management	Managers	Role & Functions
1	**Top**	**Government Settings.** Ministers and Secretaries **Non Government Settings** : Board of Directors, Trustees, Chairman etc.	**Strategic Role : Policy development and Programming.** • Developing the Organization's goals, policy, plan, strategies with focus on long term view. • Deciding about the need of resources, mobilizing and allocating them for implementation. • Emphasizing the growth and overall effectiveness of the organization • Monitoring interaction between the organization and its external environment.
2	**Middle**	**Government Setting :** Commissioner, Directors District Officials Block (Taluka) Health	**Tactical Role : implementing, and monitoring the organizational activities.** • Translating the general goals and plans developed by strategic managers into specific objectives and action plan. • Traditional role an administrative

		officer, PHC-MO, **Non Government Settings.** Chief Executive officers, Managing Directors, Chief Operating Officers, Chief Finance Officers Divisional Head	controller who bridged the gap between higher and lower levels but modern role is developmental coach to the people who report to them who lead them with proper direction and motivation. • Coordination of resources
3	**First or Lower**	**Government Setting :** Supervisors, Inspectors, **Non Government Settings.** Assistant mangers, supervisors, team leaders, department heads, foremen etc.	**Operational Role : Supervising and Directing non management team and controlling the activities.** • Lower-level managers who supervise the operations of the organization. • Directly involved with non-management employees • Acting as a link between management and non-management staff • Implementing the specific plans developed with tactical managers.

Responsibilities of Health Managers:

1. **Responsibilities towards Society :**

   Ultimately every organization is for the society. Health is a part of developmental sector; hence its role towards society is very important. Health manager has to see that his/her organization takes initiatives in playing a more positive and pro active role towards wellbeing of society.

2. **Responsibilities towards People/beneficiaries :**

   A health manager has the responsibility towards people in terms of ensuring uninterrupted availability, accessibility, acceptability and affordability of the desired quality of care, i.e. preventive, promotive, curative and rehabilitative.

3. **Responsibilities towards Higher offices/officers :**

   Health manager is responsible to his higher offices-bosses in way of delivering the desired results (goal-objectives) keeping the organization, values, vision and mission in mind and using the organization rules and framework.

4. **Responsibilities towards Staff :**

They are the most important resource of the organization. Health managers should provide a good working environment and fair treatment to all staff; so that they feel happy and satisfied about the organization and the works they are doing.

5. **Responsibilities towards Stakeholders :**

Community Leaders, personnel from other departments/sectors, allied organizations, voluntary agencies consisting of stake holders present in external environment. A good manager should use the good opportunities lying with such stakeholders. Hence it is the responsibilities of Health mangers to cultivate a good relationship, carry out networking and linkages with them.

6. **Responsibilities towards Government :**

Health mangers working in the government system is abided to the rules and regulations of the governing system along with its duties and responsibilities. Health managers working in the private organizations must ensure that it is working within legal framework and broad health policies of the nation. Also submitting technical as well as financial reports, taxes, dues are the responsibilities of the organizations. Hence fulfilling such duties is the responsibility of the managers.

Different roles of the managers :

1. Planner and strategist.
2. Organizers
3. Leaders
4. Communicators
5. Controller

Manager as a Planner & Strategist :

As a part of management; manager attempts to define (forecasting) the future state of its organization. It is not predicting the future but uncovering the future that the organization would have. As a strategies managers focuses on key objectives without getting mired in detail.

Strategist is the most responsible for success or failure of the organization. Strategists have various job titles, such as chief executive officer, president, owner, chair of the board, executive director, chancellor, dean, or entrepreneur. They are usually found in high levels of management, which help organization gather, analyze, and organize information, track the changes in situation and trends, develop forecasting model, evaluate corporate and divisional performance. Effective strategic leaders manage the organization effectively & efficiently, sustain a high performance over time, make better decisions than their others, make candid, courageous, pragmatic decisions, understand

how their decisions affect the internal systems in use by the organization, solicit feedback from peers, superiors and employees about their decisions and visions

As a planner & strategist manager needs to be able to ...

- See big picture and think ahead.

- Analyze internal and external environment.

- Forecast future environmental trends affecting organizational vision and mission/goal.

- State organizational objectives.

- Formulate strategies that will help in attaining these objectives with respect to future trends.

- Arrive at performance standards or yard sticks for monitoring the implementation of these strategies.

- Define the best approach to accomplish personal and organizational objectives.

Manger as an Organizer :

Organizing is the putting plan in logical orderly manner to ensure effective and efficient implementation. As a organizers mangers require expertise to arranged human, financial, physical, informational, and technical resources in coordinated way for performing tasks to achieve desired goals in time bound manner. As a good organizers manger should have skill to group related activities together and assigns employees to perform them.

One of the important tasks of managers as an organizer is the staffing. While planning specifies what will be achieved when, staffing specifies who will be achieving what and how it will be achieved. Staffing involves identification of specific jobs, grouping of jobs of similar nature, number of jobs to be included in a specific group, and deciding how many people a manager can effectively oversee. An integrated network of people, their jobs and their working relationships ultimately constitutes the structure of the organization. Staffing can be broadly spelled out as ability of manager to..

- Analyze and describe various organizational jobs.

- Select, train and induct people in jobs,

- Draw working links i.e. define authority and span of control amongst people.

- Change these working links whenever there are major changes in the environment or technology or strategy of the organization etc.

Manger as a Leader :

Every manager needs to be Leader, but all leaders need not to be manager. Leading skills requires to tasks of giving directions and motivating the others. To be a leader manager must understand the values, personality, perceptions, and attitudes of self and others. Health system is the services sector, and like all service related organizations, human is its most important and large resource. Success of the service sector depends

upon the effective use of human resource. Leader is one of key role and leading is the one of the important skills to be acquired by the manager. As a leader manger requires to understand different people and to influence them towards achieving common goals and objectives.

This involves clearly communicating organizational goals, inspiring and motivating employees, providing an example for others to follow, guiding others, creating conditions that encourage management of diversity, provides guidance employees need to perform their tasks. Characteristic, style of leaderships and ways to motivate the human resource is mentioned in detail in another chapter.

Manager as a Communicator :

Manager as leader constantly giving directions and as monitor receives information. To fulfill a role as a communicator manager has to disseminate factual information from vision, mission, goals and objectives of the organization to set of rules for procedures and actions. Also manager needs to guide, provide feedback to team members, reports to higher mangers. Four functions to be carried out as a communicator are kknowledge management, decision making, coordinating work activities and fulfil relatedness needs in team members. For all these responsibilities manager has to be effective communicator and use all formal, informal channels of communications.

Manager as Controller :

Control is monitoring + correction. Controlling consists of actions and decisions which mangers undertake to ensure that the actual results are consistent with the desired results. The management function that measures performance, compares it to objectives, implements necessary changes, and monitors progress. Many of these issues involve feedback or identifying potential problems and taking corrective actions. Receiving information through direct observations, getting feedbacks from others, reviewing registers, reports and records are the techniques monitoring. Newer technology has made it possible to achieve more effective controls.

Thus for four fundamental managerial functions such as planning, organizing, leading (directing + motivating), controlling & monitoring, manager has to play active role and the skills to be required are to be mastered by manager.

In order to fulfill these roles manager has to keep in mind, the type of jobs, results to be obtained, size of organization, the skills and the experiences of the people who work and the time available at his disposable.

Management Skills :

Health management is a challenging profession. It is more complex than management of any other organization. A typical health/hospital administrator in India is a medical graduate with postgraduate degree in health administration. Whatever may be the feeder channel for the profession of health administration; certain attributes are necessary for efficient performance of their jobs. There are successful past records of efficient and effective management by medical professional and ability to direct the subordinated to achieve the organizational objectives. This can be attributed largely their managerial skills like conceptual skills, human skills and with stand the all adverse criticism. In order to perform as a successful manager, he/she require possessing and exhibiting certain skills.

Managerial skills are the personal ability put to use by the manager in specific position that she or he holds in organizational hierarchy. The most important skills required for managers are summarized by Robert Lukasz as Technical Skill, Human skill (Inter-personal Skill) and Conceptual Skill. As one moves up in hierarchy of the managerial positions; the responsibility increases, hence use of managerial skills.

1. **Technical skills** : It is the ability to work in a particular area of expertise, ability to use the tools, techniques and procedures for the particular job. These are specific abilities that people use to perform their jobs, perform a specialized task that involves a certain method or process e.g. clinical, medical skills, accounting , statistical calculation, engineering, mechanical, typing, report writing etc. Without technical skills one is not able to manage the work effectively.

   These skills are most use by non management persons and lower level management. Higher levels rely less on technical skills.

2. **Human skills** is the ability to work with individual and ability to understand their needs with empathy. At every managerial level manager requires to interact with other people. While technical skills is primarily concerned with doing job technically correct; human skills concern with emotions and intelligence and relations of personal involved in executing the jobs. For human skills managers need to understand and work well with people. Capability to understand other people's emotions pains and agony and to act in a manner that shows that you are really concerned and whatever you are saying are not only lip service. Sensitivity in the mangers is the most important requirement for the good Inter-personal skills.

   It includes interviewing job applicants, forming partnerships with other organizations, resolving conflicts, leading, negotiating, and motivating the staff. For a good human skill, manager has to understand his own attitudes, beliefs, perceptions, assumptions and of other individual and group.

   Health services organizations are human resource-intensive organizations. A congenial environment is conducive to productivity, satisfaction and happiness. A health administrator must have good interpersonal skill to create such an environment. At the core of interpersonal relationship are communication and empathy. This skills help understand and work well with people, interviewing job applicants, forming partnerships with other businesses, resolving conflicts. Some of the important skills under inter-personal skill are given below.

   a) **Leadership skills :** A health administrator must have leadership skill He should be able to influence people to act with zeal and enthusiasm to achieve organizational goal. This he can be done either by his personal example, superior knowledge or by having access to power. There are several power based leading models from which a leader can drive his power. There are positional power, referent power (like the power which Gandhi had over the masses), expert power by virtue of this possessing superior knowledge, information power and connection power

   b) **Interpersonal skill**. Health services organization are labor-intensive organizations. A congenial environment is conducive to productivity, satisfaction and happiness. A health administrator must have good interpersonal skill to create such an environment. At the core of interpersonal relationship are communication and empathy.

c) **Conflict management skills**. In an organization like a health care delivery organization where diversity of objectives is the norm, quite often control conflict situation arises It is argued that a ascertain level of conflict is essential for any organization to remain vibrant, dynamic and responsive This is functional conflict and utilized by managers to the benefit of the organization A health administration must e able to mange conflict well and should not allow it become dysfunctional.

d) **Negotiating skill**. A health administrator called upon to negotiate quite often om various matters pertaining to his organization Negotiation means a process in which two or more parties exchange goods or services and to arrive at a common meeting point. It has to be carried out in an atmosphere of cordiality and at the end both the parties must have a feeling of winning. In a health services organizations. A collective bargaining is also a form of negotiation between the management and the workers union.

e) **Communication skill.** If you analyze how a person spends his time, you may come across a very startling face individuals at their workplace spend almost seventy percent of their time communicating in various forms. The art of communication is very important for managers. Managers have to endeavor to master good communication skills. A health manager has to deal with people with a very wide range of qualification and with very levels skills. Some of them may be intolerant, while some other may be highly egoistic, To deal with them a very good communication skill is necessary.

3. **Conceptual skills** are the ability to visualize the organization as a whole and the ability to integrate the activities of the entire organization. This skills help managers understand how different parts of a organization relate to one another and to the organization as a whole. It is also useful in decision making, planning, and organizing, identifying problems, resolve problems for the benefit of the organization. It requires logical thinking, reasoning powers and analytical capabilities. These skills assume greater importance as manager acquires more responsibility. It is required the most by top level managers.

All levels of management require a combination of conceptual, human relations, and technical skills. However it can be summarized as Conceptual skills most important at senior management level, Technical skills most important at lower levels while Human relations skills important at all levels. A graphic understanding about the managerial skills with the level of management is shown below.
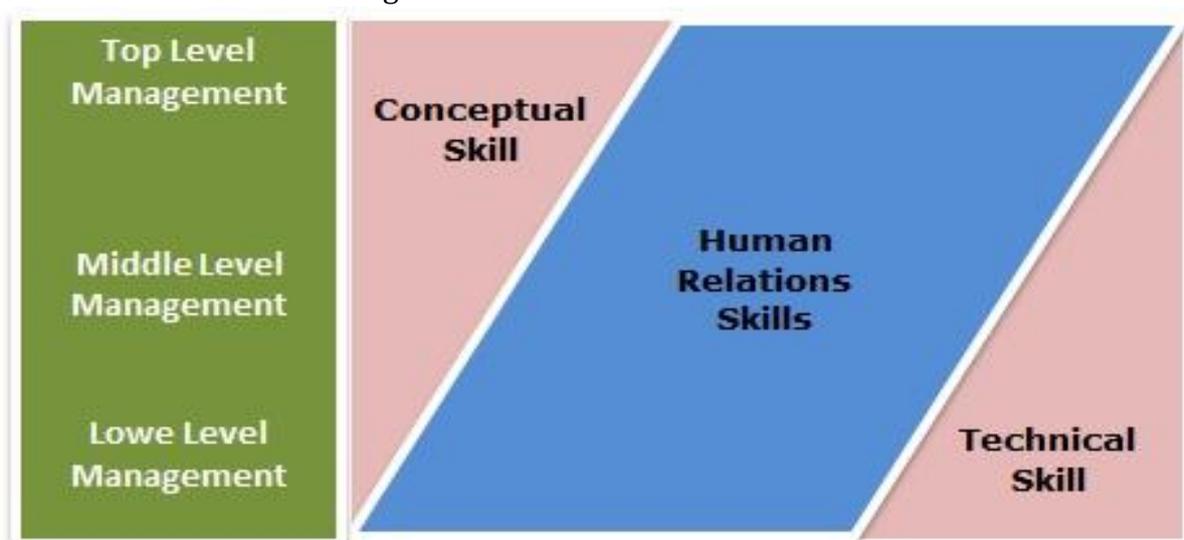
It is evident that as manager moves higher the role of the technical skills goes lower and importance of conceptual skills increasing. However the importance of Human Skills remains uniforms at all the level of management and for all the role of managers.

Tasks of Manager :

1. **Providing purposeful direction to the organization :**

    Top level manager is giving the direction to the organization through defining the mission and objectives for the entire organization. Task of middle & lower level managers is to direct the actions of all the people who work for organization in various department or division (project or programs) are in line of organizations objectives and goal.

2. **Maintaining the effectiveness and efficiency :**

    Manager has to ensure the desired results are delivered at the same time he has to ensure that results are obtained in efficient manners by proper planning, organizing resources and effective implementation of strategies.

3. **Meeting the challenges & looking for opportunities from external environment :**

    Keeping the eyes and ears open for any type of the information, ideas, suggestions, complaint, criticisms and use them for local planning & strategy development as well feeding them to higher management for revision of the strategies as well resource planning to meet the challenges and utilize the available opportunities.

4. **Developing the Human Resource :**

    Human is the most critical resource in any organization. A good worker is a valuable asset to any organization. Reorganization, appreciating and nurturing the human people by manager will bring rewards in terms of improved results and loyalty.

    Every manager must constantly be on look out for people with potentiality and attract them for job. Also developing the competency, keeping them abreast with newer knowledge and skills is the task of the managers.

5. **Building a Human Organization :**

    A manager with competent team has already won half of the battle. However, competent or brilliant individuals may be, if they cannot work together with each other, they are not of much use to organization. The manager we could not build the team cannot succeed. Managing the conflicts between the organization's members or between member and organization is also important task in building and sustaining the team.

6. **Decision Taking :** Management all about making the decision. It is required from high level planning to field implementation. A managerial skill of decision making for routine or non-routine problems is most critical activity and certainly poses a challenge to managers. A manager's effectiveness lies in making a good and timely decision. For making a good & timely decision. Many times for routine problems managers don't find difficulty in making the decision but it is advisable for routine or not routine problems manager should follow the steps : 1. Identify,

define and analyze the problem 2. Develop the alternative set of decisions. 3. Select the best of all alternatives which will solve the problem and 4. Implement the decision.

7. **Problem Solving :** Managers come across the problems as part and parcel of manager's life. Manager has to go down to the root cause of the problem. Manager needs to identify the problem, tries to prioritize them, analyses them, identifies the root cause(s), and finds out the best solutions and facilities its implementation.

Characteristic of Good manager /effective manger :

To be successful manger one requires to master the understanding about organization, its environment, goal, objectives, process, rules, guidelines managerial techniques and skills, but it is seen that in reality it is the personality traits or characteristics rather than the managerial understanding and skills make the managers a successful or effective managers. Some of the key characteristics of a successful manager are as follow.

- **Honesty & Integrity**: For whatever qualities/traits expected by manager, he or she has to possess and demonstrate the same to his sub ordinates. He should set himself as an example. Self-confidence, honesty, sincerity and integrity are some the attributes which impress the group and are expected to be adopted by team.

- **Positive Attitude :** Manager who displays positive attitudes, are more likely to encourage their employees and create a positive and more productive work environment.

- **Leadership** : As with all manager, leadership is extremely important so that direction and motivation to the team can be provided. Best of the team members can be brought out.

- **Team Player :** By displaying willingness to take action and work as a team, fellow employees will be more willing to do tasks that they know their management will perform as well. For creating the team spirit manager has to invest his time and energy in the work of the group, actively participate in setting group direction, respect the views of team members, shows, flexibility in his attitude, and facilitate their development.

- **Innovative/Creative :** By not being afraid to try new tactics or procedures, both management and employees may find new ways to keep from going "stale" and not losing interest in a job, or even create a more efficient pattern to do a certain task.

- **Critically Thinking :** Problem solving with ability to find the reasons behind the problem and making appropriate decision to solve it by us of critical thinking.

- **Emotional Intelligence :** Manager must be sensitive but he should use his emotions properly keeping the good of organization and employee in heart. In the event of any type of problem such as an emergency or even an employee conflict, management must be able to remain calm to handle the issue at hand keeping sensitivity at heart without getting carried away in emotion.

- **Trust worthy-** If a manager is not reliable; employees may lose trust or even begin to follow the same negative pattern.

- **Effectively Resolve Conflicts-** Conflict management takes large chunk of the a conflict makes itself known, it is imperative that managers be able to resolve it immediately with as little time as possible to prevent any type of escalation.

Conclusion :

"Management" just does not "occur". It requires understanding about organization, its goals and objectives, available resources and formulation of the strategies. For effective and efficient management; managers are the most crucial player at all levels of management. Understanding the roles and responsibilities of manager and mastering the managerial skills are vital for success of any organization.

Manager requires possessing different skills like technical, human and conceptual skills. Out of all skills, human skills the most important at all levels of the managers. Manager has to play different roles like planers, leaders, controllers etc. depending upon his position and responsibilities. Leading, decision makings, motivation, problem solving are some of the important tasks to be performed by managers. Acquiring understanding about mangers is not sufficient to be successful managers. To be successful manager one has to cultivate certain characteristics.

* * * * * * * *

"Failing to plan is plan to fail"

"Winners are having "Plan" and looser are having "Excuses"

Learning Objectives :

At the end of this chapter it is expected that you will be able to...

1. Understand the Health planning and process.
2. Describe step wise planning process.
3. Merits and demerits of different planning approaches
4. Differentiate different levels of planning.

Important Terminologies :

Health planning	It is as an orderly process of defining community Health problems, identifying unmet needs & surveying the resources to meet them, establishing priority goals that are realistic and projecting administrative action to accomplish the purpose of proposed programme.
Health policy	A general statement of understanding [to] guide decision making that results from an agreement or consensus among relevant partners on the issues to be addressed and on the approaches or strategies to deal with them.
Health Programming	The stage of the national health planning cycle in which the National Health Policy/Strategy/Plan (and in some cases its Medium Term Expenditure Framework), is translated into annual operational plans.
Health service	Any service (i.e. not limited to medical or clinical services) aimed at contributing to improved health or to the diagnosis, treatment and rehabilitation of sick people.
Health system building blocks	An analytical framework used by WHO to describe health systems, disaggregating them into 6 core components: leadership and governance (stewardship), service delivery, health workforce, health information system, medical products, vaccines and technologies, and health system financing
Health system performance	The degree to which a health system carries out its functions - (service provision, resource generation, financing and stewardship) to achieve its goals.

Introduction :

Planning is the most crucial and first step for any activity, small or large. Small task requires minimum planning but with increase in quantum of the activities, i.e. projects, program, Organization or complex activities, importance of the methodological planning increases many fold. Success of any project or activity depends on how well it has been planned.

Planning :

It is not possible for even wealthiest of wealthy country to meet all the needs, demands & expectations of its community because there is always a restriction on the available resources. Planning and managements is essential to maximize the use of available resources & achieve the desired goals and objectives. Planning is needed for effective programme implementation & efficient use of resources.

Planning consists of deciding in advance what to do, how to do, when to do and who is to do it, and thus it bridges the gap between where we are presently and where we have to reach. Planning consists of taking conscious and well thought out decisions about which course of action to take out of the many available and most suitable methods to achieve these objectives. Planning ensures that pre-determined objectives and goals are identified so that all resources can be allocated and dedicated in achieving these goals in the most optimal manner.

Plan must always precede action.

Planning is a very scientific and systematic process which essentially visualizes as to where we are at present (present situation or baseline), where do we want to go (the future or "outcome"), why do we want to go there (logic) and how do we get there (process). It consists of a series of steps and we need accurate data at each of these steps. Planning is a process of analyzing a system or defining problems; assessing the extent of the problems prioritize the problems, formulating goals of objectives to meet them, examining & choosing strategies among alternate interventions, initiating the necessary actions for its implementation; monitoring the system to ensure proper implementations of the plan & evaluating the outcomes against the stated goals & objectives."

We need planning to…

(1) Match the limited resources

(2) To minimize wasteful of expenditures

(3) To develop the best course to define to attain goals/objectives in another word planning is for …..Effective of efficient achievements of desired results.

Planning is also very useful as it..

- Provides an identified directions to all towards the pre determined objectives and goals, i.e. road map to goal.

- Provides a unifying framework of organization, decision making, roles and responsibilities.

- Helps in understanding present and future opportunities and threats.

- Facilitates control i.e. preventing deviating from the decided path.

- Creates the environment that activities are being carried out in coordination.

Elements of Planning :

1. <u>Goals & Objectives</u> :It is planned end point of all activities and is concerned with the problem itself. They are talking about the ultimate results (impact or outcomes to be achieved.
2. <u>Policy</u> : guiding principles stated as an expectation. It is not binding but they are directive in nature.
3. <u>Programme</u> : is a sequence of activities designed to implement plan and accomplish objectives.
4. <u>Schedule</u> is a time sequence for the work to be done.
5. <u>Procedures</u> : is a set of rules for carrying out the work.
6. <u>Resources</u> : manpower, money, material, Minutes(time), Methods (skills-strategies)
7. <u>Target</u> : is discreet activity. It is degree of achievement .Ex. No. of blood films, no. of vasectomies. It is used as operational level.

Health Planning:

Health planning can be defined as an orderly process of defining community Health problems, identifying unmet needs & surveying the resources to meet them, establishing priority goals that are realistic and projecting administrative action to accomplish the purpose of proposed programme. Health planning has been there in some ways or others for many decades, but it is in recent past the thrust on using rational and scientific approach in health planning gas gained momentum.

Health manager depending upon his roles and responsibilities is often has to come across with the situation where he has to plan various health activities. The basics of planning process in the health sector can be remembered by answering the following key questions :

1. Where are we at present (situational analysis)

2. Where do we finally want to reach (objectives & goals)

3. How do we get there (resources & constraints)

4. How effectively we have performed the required activities (evaluation, monitoring & feedback)

5. What new problems do we face and how do we overcome them (re-planning)

Planning process :

Planning requires a critical analysis of the problem to be addressed. Problem analysis is important for developing a goal and objectives for the project that are realistic and achievable. Once the goal and objectives are set, strategies for achieving them can be determined. Resources needed in the project, and ways to obtain them, are then identified. The planning process also includes deciding how the project will be managed, sustained and evaluated.

Steps in Health Planning :

Planning is a relational process which involves many steps. Also planning health services are to be carried out different level i.e. national, state, District, below district or

organizational level. The planning steps may vary from level to level. However the common steps for planning are as below

1. Pre-Planning
2. Health solution (problem) Analysis
3. Identifying Health Problems
4. Setting or Selectivity priorities
5. Defining Goals & objectives
6. Strategy development
7. Formulating the plan.
8. Implementation.
9. Monitoring & evaluation Planning
10. Re-planning.

1. Pre Planning:

This is the stage where existing policies, legislation, health structure, institutes, Political commitments etc. are considered, assessed & based on that health planning units is created. Also before starting planning scope of planning the general perimeters or "boundaries", in terms of place, time, population and disease condition(s), within which the health program being planned, will be restricted to.

2. Analysis of Health Situation:

This is the most important and crucial step in planning. Effective health planning and execution of health program depends only the reliable data. It is the assessing the health problems, direct and indirect factors in the occurrence of health problems, health and related institutes and services, opportunities for actions, availability of the resources,

Requirement of the data depends upon the broad purpose of the planning. In general for health planning, following types of data would be required.

1. Socio – demographic.
2. Epidemiological Situation
3. Health facilities & functioning
4. Available resources i.e. Personnel, materials and finance.

Data collected would not only guide for the planning but would also act as baseline for monitoring & evaluation of the health interventions.

3. Identifying the Health Problems:

This can be equated with "Community Diagnosis". On the basis of the data analysis, enumeration of the health problems, which need to be addressed, can be done. Problems can be categorized as

1. Disease burden (Medical)
2. Behavior& custom culture, Awareness
3. Health care system related
4. Environmental Health Management

5. Social determination related

6. Inter-sectorial related.

Identifying the health problems includes the detail problem analysis, i.e. tracking the direct causes and indirect factors leading the health outcomes.

4. Setting the Priorities:

The available resources are limited to meet the needs of people. Therefore, there is a need to select the pressing and urgent problems. For setting priorities, numbers of factors, i.e. economical, technical, financial, social, political, administrative, ethical etc. must be taken into consideration. Three important aspects which is taken in to considerations are as below..

1. Importance of Public Health Problem. (How severely it is affecting the people? based on mortality, morbidity, suffering, cost of treatment and loss of productivity).

2. Availability of the effective interventions.

3. Cost of interventions (Treatment or preventive modality).

Some of the criteria used in prioritizing health problems in Health planning are as below..

1. Affecting large number of the people and their capacity.

2. Associated with vulnerable groups.

3. Largely prevalent in weaker sections of the community.

4. Acute in nature.

5. Having serious social and economical consequences.

5. Defining the Goals & Objectives:

Once priorities are set and it is decided to work on "identified" problem(s), next step is to set goal(s). Goal is the ultimate result, towards which all resources are diverted. They are generally broad and focusing on impact or long term outcomes.

A goal is described in term of …..What to be attained, to what extant to be attained and when to attain.

Objectives are "Broken down goal". They are precise (specific), more elaborative and may be further broken down in immediate, intermediate and ultimate objectives are focusing on output or short term outcomes.

Long Term Objectives : Objectives can be defined as specific results that an organization, program or projects seeks to achieve in pursuing its basic mission or goal. Long-term means more than one year. Generally they are organizational /program objectives. Objectives are essential for organizational success because they state direction; aid in evaluation; create synergy; reveal priorities; focus coordination; and provide a basis for effective planning, organizing, motivating, and controlling activities. Objectives should be specific, measurable, achievable, relevant and time bound

Annual Objectives (Target) : Short term objectives Annual objectives are short-term milestones that organizations must achieve to reach long term objectives. Like long-term objectives, annual objectives should be specific, measurable, achievable, and relevant and time bound. We also use term "Target" for such short term objectives. A set

of annual objectives is needed for each long-term objective. Short term objectives are to be framed for all or important divisions, activities or outputs. Short term objectives are especially important in strategy implementation, whereas long-term objectives are particularly important in strategy formulation. Annual objectives represent the basis for allocating resources.

Targets should not be confused with organizational/program objectives. Targets are mainly set at operational level (Lower Management Level), focusing on performance.

6. Strategies:

Basically strategy is the part of plan write-up. It is the chosen approach out of available approaches and which would be taken for implementation.

Strategies are the means by which long-term objectives will be achieved. Strategies are potential actions that require top management decisions and large amounts of the organization, program or project's resources. In addition, strategies affect an organization's long-term prosperity, typically for at least five years, and thus are future-oriented. Strategies have multifunctional or multidivisional consequences and require consideration of both the external and internal factors facing the organization.

In short: Strategies are means to achieve long term objectives, while annual objectives/targets are means to achieve long term objectives. Annual objectives are broken to parts of long term objectives.

7. Formulating the Plan:

After setting the priorities and deciding the goal(s) and objectives; the next step is writing a plan. Plan means developing alternative ways of achieving the objectives and selection of a most appropriate way(s).There is not a single way to achieve the objectives, hence developing alternative ways requires both creativities and understanding. The planner should know the cause & effect relationship (Applied epidemiology).

Along with identifying the most suitable ways, write-up should contain time sequence for the plan to be implemented, set of rules (procedures) for implementing the plan, use of resources, monitoring & evaluating etc.

8. Implementation Plan:

Implementation is also integral part of planning process. Before actual action to be occurred in the field, it requires to be thoroughly translated in to action(s). These action(s) should be directed towards specific objectives.

With the background of the enunciated goal, objectives, targets and indicators, and duly considering the resources select out as to what overall strategy you will use in the proposed programme.

For instance, in a HIV Prevention Programme, the strategy could be to only have health educational efforts, or else it could be a comprehensive strategy of combination of health education, blood safety, diagnosis and treatment, surveillance and PPTCT. Obviously the choice of strategy will be strongly guided by the programme objectives and your available / expected resources. If you do not have lot of resources, naturally you would select a strategy of limited activities which are likely to give you the best results. Now, having decided the strategy, write down a detailed action plan as to how

the programme will be executed. Do ensure that a "time-line" has been given for each objective, target and indicator, giving the date of each end point.

Place the required manpower, equipment, material and other logistics at the required places. If some more resources are expected, make a plan as to where they will be relocated and how. Make out detailed, written "operations manual" including the operative procedures for each activity, i.e. "who will do what to whom and in what manner". Ensure that your personnel have been centrally trained and tested for undertaking the procedures.

9. Monitoring & Evaluation:

For last many years, an emphasize is given to include monitoring & evaluation plan as an integral part of overall planning and a reasonable proportion of budget must be allocated along with a specific monitoring and evaluation frame work in planning.

Monitoring :

Monitoring is a continuous process of observing, recording, reporting on various indicators (tasks and activities) and identifying any deviation from the desired. A frame work of Monitoring and evaluation should be integral part of the planning, specifying what to be monitored, who will be monitor and how it will be monitored and how frequently it will be monitored etc. The monitoring is used by operational level manager and middle level managers to early pick up any deviation and institute the corrective measures immediately.

Evaluation :

While monitoring is for day to day control evaluation is for validating the strategies and planning. It is done to know the relevance of the services, program, strategies or activities or to know the adequacy of the services, resources (inputs) to know the quality of the services, or efficacy, effectiveness and efficiency of services/program, strategies. Evaluation is used by top level management and some time by middle level management. It helps in re-planning.

Monitoring and Evaluation frame work :

Monitoring/evaluation need may be different at different level of management. Different sets of indicators for different level of management may be created. Further indicators should be kept optimum in number, specific in nature and must cover all the three phases of management, inputs, process and outputs, outcomes/impact.

Developing Indicators :

- Input indicators: Manpower, material and supplies, financial resources.
- Output indicators: task, activities, performance, target related indicators.
- Outcome/Impact indicators: Service utilization, knowledge and behavior change, reduction in mortalities/mortalities, change in health status.

10 Re-planning:

Planning is continuous process and it requires constant watch through monitoring and evaluation. Due to change in health situation, advent of newer knowledge/technology in tackling the health problems or feedback on effectiveness, efficiency and efficacy of the interventions/strategies, re-planning can be carried out.

Planning cycle
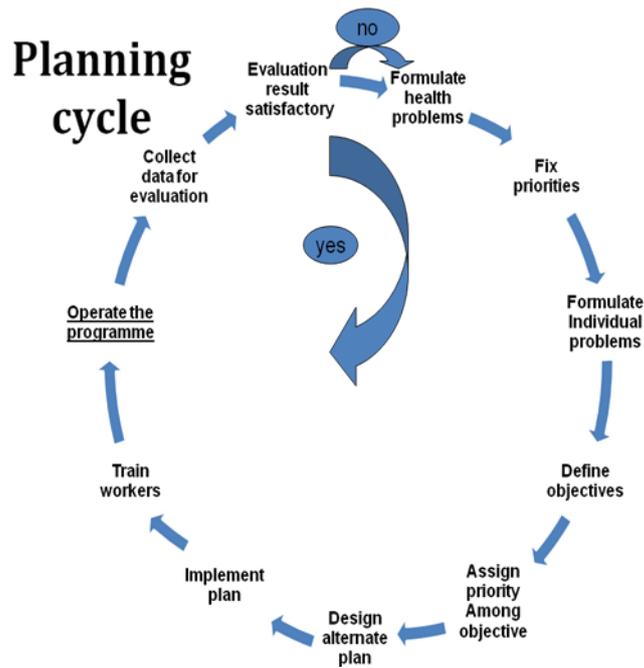
In short, Health Planning process is answers to following questions

Sr.	Managerial Questions	Planning activities.
1	Where are all we now	Situational Analysis
2	Where do we want to reach?	Goal, objectives, priorities
3	How will we get there?	Strategies, operational and implementation plan
4	How well we have done?	Monitoring & Evaluation
5	What are new problems & how we can tackle them?	Re-planning

Approaches to Planning:

There are different approaches being used for planning. Some of the common approaches are mentioned below

1. Rational (comprehensive planning)
2. Incremental Planning
3. Allocate planning
4. Participative planning
5. Transitive (Decartelized) planning
6. Radical planning
7. Innovative planning
8. Zero budget planning

1. Rational / Comprehensive planning:

It is an ideal form of planning. It utilizes lot of information for situation analysis, define goals & objectives, identify all possible ways of achieving those objectives, these alternatives are critically evaluated and the best alternative and action plan is selected.

It is ideal but very difficult to practice, as it is impossible to develop alternatives and environment is complex, keeps on changes over the course of implementation.

2. Incremental Planning:

It is most commonly used approach. It heavily emphasis on learning of previous experiences rather than use of information, format analysis innovation etc. The incremental are either in term of changes (results, budget) over previous years or in terms of sequential action.

Critics often describe as "Non-Planning" plan.

3. Allocative Planning:

Allocative planning approach is largely depending upon of distribution of limited resources. It involves, taking decision relative to how the resources will be used and which activities will be under taken in the contact of identified priorities.

4. Transactive Planning:

Primary purpose of the planning is to produce effective action but in Transactive planning the purpose is to involve as many people as possible in planning for action which affect their lives. "Participation" is central to this approach. And planning is decentralized. Community Need Assessment (CAN) under RCH program & involving village health & sanitation committee in village plan under NRHM are examples of Transactive planning.

5. Radical Planning:

As name suggests it is completely different approach than conventional. The role of health system is minimal in this approach. It differs from Transactive planning in terms of absence of dialogues between planners (Govt.) and people (client). Here people are the planners.

All said & done, it is very impractical approach for large level of planning.

6. Innovative Planning:

Innovative planning focuses on changes in the system, often leading to restructuring of its relationship with the environment. It requires critical analysis of part and greater understanding of cause-effect relationship.

7. Participating Planning:

All planning approach mentioned above need some participation of different groups. The importance is "Who participate" & "How". It is now gaining root that implementers themselves should be involved in the planning process.

Through, there are numerous approaches to the planning, but it is observed that mix of the approaches is used in planning generally.

However, generally Comprehensive/Rational planning is used for new Health Programs, Incremental planning for well established programmers, Allocative planning where

resources are the constraints, while Transactive participating planning for local (small-project) planning.

Levels of Planning :

Planning is carried out at various levels and for various timeframes. Broadly they are

1. National /State Planning

2. District Planning

3. Local Planning i.e. Institutional level Planning, event planning,

   Or

1. Strategic planning

   a. Long term strategic planning (Having long horizon for achievement)

   b. Short term strategic planning (around up to five years planning)

2. Action planning /Implementation/operational (one to two years)

3. Micro planning (depending upon the requirement of implementation, a day to month period).

Strategic Planning and Operational planning :

Planning activities are done at all three levels of management. At the top management level policies and strategies are formulated, resources are allocated and goals (health outcomes) are fixed. This is known as Strategic Planning.

The top level management planning is addressing question.

1. Which health problem(s) are to be addressed/prioritize?

2. What the ultimate results is to be achieved?

3. What approaches can be adopted?

4. How much fund can be allocated?

The Middle level management is usually responsible for implementation of the programmes and has to decide objectives, components of implementations, inputs and outputs of the programs planning. Thus are planning the activities to employ the strategies for achieving desired goals in operational environment. Hence it is called as operational planning. In operational planning; management is attempting to answer following questions..

1. What needs to be done?

2. Who will do it and how?

Planning at this level also includes fixing the targets, establishing and maintenance of the physical infrastructure, developing supply and logistic chain, manpower development and program support activities like inter-sectoral coordination, community participation etc. Further at field level planning focuses on more specific questions likes.

1. What activities are to be done?

2. Who will do which activities?

3. When and where activities will be done?

The relationship between different planning activities and various level of management is shown below in the table.

Planning tasks at different levels of management

Level of Management	Planning with (Focus on)	Planning tasks
Top	Strategic (Outcome/impact)	• Prioritizing Health Problems • Fixing Goals • Formulating polices • Developing Strategies • Allocating resources • Evaluation plan
Middle	Implementation (Input-output)	• Planning for service delivery • Output delivery • Negotiating Targets • Logistic supports • Human Resource development • Inter-sectoral Coordination • Monitoring plan
Lower	Operational (Activities)	• Operational plan (Micro planning of sessions, campaigns, activities etc.), • Supervision plan

However there is interrelationship between different levels of managements and planning process and distinction between different may not be always clear.

Centralized Vs. Decentralized planning :

In highly decentralized programmes, the three levels of planning may be carried out at the field level itself but in case of centralized planning top-down approach in planning is seen. In such case goals, strategies, targets and guidelines for operation all are specified at the top level, and middle and lower levels have to follow the orders only.

Limitation of the to-down(centralized) approach is that it is not able to fit the local situation and many times not feasible to implement such plans. On the other hand in bottom-up(decentralized) planning there may not be capacity to plan or not have adequate resources to implement it.

Hence often to overcome this often mixed approach i.e. combination of top-bottom and bottom-up planning is used. In this broad guidelines are issued by the top management and operational managers prepare detailed plans based on guidelines. The plans are aggregated to assess their feasibility and a final plan is negotiated between the top and operational level managers.

In the National AIDS Control Program, every State AIDS Control Society (SACS) has to prepare their plan and has to negotiate with National AIDS Control Organization(NACO). Further NACO aggregate all approved state plan as a national plan to National AIDS Control Board for approval.

Under National Rural Health Mission(NRHM), further decentralized planning is proposed. It is envisaged that every village should prepare NRHM plan, which is to be aggregated at taluka and Talukas's plan are to be aggregated as District Plan. State should compile all district plans adding state level plan and is made presented in front of Central Mission for NRHM for discussion, negotiation and finalization. However, currently the decentralization of NRHM plan is restricted up to the district level only and further up aggregation and state plan preparation is being done.

National Health Planning :

Thought state is a health subject, but national level health management team play a pivotal role in national planning. The health policy of Independent India, adopted by the First Health Ministers' Conference in 1948 was the recommendations of the Bhore Committee. Also there are number of the health programs were initiated within few years after independence and are incorporated as an integral part of national development. Important national level health planning related activities are..

1. **Health Planning as a National social-development five year plan:** Planning commission works under the chairmanship of the Prime Minister. It analyses the national health situation, prioritizes the health problems, identifies the thrust areas, proposes the strategies and policies-principles, fixes the national goals and allocates the fund accordingly; keeping the overall national development plan in mind. Every five year; these planning exercises are carried out since year 1950. Currently 12th five year plan is going on. It starts in the year 2012 and having scope up to 2017. The detail about five year plan is mentioned in another chapter on five year plan.

2. **Health related policy :** Health policy is a general statement of understanding to guide decision making that results from an agreement or consensus among relevant partners on the issues to be addressed and on the approaches or strategies to deal with them. Different health policies are framed and communicated from time to time. The policies are prepared by the group of experts as per the broad guidelines and frame work proposed by political commitments and overall national health goals. It is guiding principles, policy and strategy prescription. In India first National Health policy was framed in the year 1983 and current National Health policy is launched in year 2002. Besides that numerious health related policies are prepared. Details are given in another chapter related with Health Policies.

3. **National Health Programs-Schemes :** Health problems which are affecting large part of the nation are identified by the national health management team. They priorities national health problems, i.e. diseases, health manpower, infrastructure, services etc. To meet the national goals fixed by national level group as a part of various national planning exercises and accepted by the Government numerous Health programs- schemes are launched by National Health Management Team.

The health programming is the stage of the national health planning cycle in which the National Health Policy/Strategy/Plan (and in some cases it's Medium Term Expenditure Framework), is translated into annual operational plans. National Health Management teams designs the program, decides the goals, objectives and formulate strategies of such program. They also prepare technical, operational and financial guidelines as well. Further national level Monitoring and Evaluation framework is created for such program/schemes is also prepared to keep the track on progress.

4. **Health related legislation :** Such acts or rules are moved by the Centre Health Ministry or Health related ministries and passed in the parliament. There are many direct or indirect health related laws are framed and in force. Details are given in another chapter related with Health Legislations.

Health System and Health Planning :

Health system building blocks are an analytical framework used by WHO to describe health systems, disaggregating them into 6 core components: leadership and governance (stewardship), service delivery, health workforce, health information system, medical products, vaccines and technologies, and health system financing. Health system performance is the degree to which a health system carries out its functions - (service provision, resource generation, financing and stewardship) to achieve its goals. Health services are any service (i.e. not limited to medical or clinical services) aimed at contributing to improved health or to the diagnosis, treatment and rehabilitation of sick people.

A well functioning health system responds in a balanced way to a population's needs and expectations by:

1. Improving the health status of individuals, families and communities
2. Defending the population against what threatens its health
3. Protecting people against the financial consequences of ill-health
4. Providing equitable access to people-centred care
5. Making it possible for people to participate in decisions affecting their health and health system.

Though the very much purpose of the health planning is to improve the health status through increasing the life conditions and reducing the impact of morbidities and mortalities; but it focuses on following dimensions of the Health Care System or Health Services.

1. **Availability :** Making services within reach of community.

2. **Accessibility:** Ensuring the services can be availed by community. It the aspects of the structure of health services or health facilities that enhance the ability of people to reach a health care practitioner, in terms of location, time, and ease of approach.

3. **Affordability :** That a country and community can afford and sustain.

4. **Adequacy :** Health services in amount people need.

5. **Efficiency :** The capacity to produce the maximum output for a given input. Relates to maximizing the quality of a comparable unit of health care delivered or unit of health benefit achieved for a given unit of health care resources used.

6. **Equity :** A measure of the degree to which health policies are able to distribute well-being fairly. Relates to providing health care of equal quality to those who may differ in personal characteristics other than their clinical condition or preferences for care.

7. **Quality :** The degree or grade of excellence. It is the degree to which health care services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.

8. **Client Satisfaction :**

Constraint of Health Planning:

There are large numbers of factors which come in the way of effective planning. They are as follows:

1. Inadequate, incorrect health information.
2. Relatively low priority to health by politician, policy makers, people.
3. Lake of capacity for planning.
4. More of centralized planning.
5. Inadequate co-ordination of planning between different health related sectors.
6. Resistance to change.

Conclusion :

Health planning is a managerial process to carry out health situational analysis, prioritize the health problems, fixes the health goals/objectives and formulates strategies, designs monitoring & evaluation framework and allocates resources. It is a systematic approach and uses for matching the limited resources with unlimited needs. There are different seven approaches and ten steps for planning. Planning is to be carried out at all levels of the Health management. The purpose and planning tasks may be different at different levels of management. Strategic planning and operation planning are the two important planning process use at different level of management depending upon their role and needs.

There are two models of planning; decentralized and centralized. It is advisable to use both models to overcome some challenges and take advantages of merits inherited by each model. National Health Policy, National Program and schemes, National legislation are the examples of national level health planning in India.

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Chapter 4: Strategic Management/Planning & Operational Planning

"Without a strategy, an organization is like a ship without a rudder, going around in circles. It's like a tramp; it has no place to go."

—Joel Ross and Michael Kami

Learning Objectives:

After reading this chapter the participants will be able to:

1. Understand the concept of strategic management/planning
2. Know the principles & process of strategic management/planning
3. Enlist the advantages of strategic planning
4. Use the SWOT as a management tool in strategic planning.
5. Describe Operational Planning process in health programmes.

Important Terminologies

Strategies	Strategies are the means by which long-term objectives will be achieved. It is a long term plan of action designated to achieve a particular goal , most often 'Wining' Strategic Planning :
	It is an organization's Process of defining its Strategy or and making decision on allocating its resources to Pursue this strategy, Including its capital and people.
Strategic Management	Strategic management can be defined as the art and science of formulating, implementing, and evaluating cross-functional decisions that enable an organization to achieve its objectives.
Strategic Planning	It is an organization's process of defining strategies or directions and making decisions on allocating its resources to pursue this strategy including its capitals, and people. It involves the development of objectives and linking of these objectives with the resources which will be employed to action.
Competitive Advantage	"Anything that a firm does especially well compared to others. When a organization implements a strategy that its competitors are unable to duplicate or find too costly to try to imitate.
External opportunities and external threats	Refer to economic, social, cultural, demographic, environmental, political, legal, governmental, technological, and competitive trends and events that could significantly benefit or harm an organization in the future.
SWOT Analysis:	It is a Strategic Planning tool used to evaluate the Strengths, Weaknesses, Opportunities and Threats involved in a project or Program/services. It involves specifying the objectives of the program/ services, or project and identifying and classifying the internal & external factors that are favourable and unfavourable to achieving these objectives.
Operational Plan	It is a plan describing a how the organization will operate in practice to implement its action and monitoring plan, engage resources, deal risk, to obtain organizational objectives.

Introduction :

- Under National AIDS Control Program, in the beginning focus was towards generating mass awareness through mass media, but later on it was shifted to focused IEC in High Risk Groups and interventions for Targeted Groups.

- For Polio eradication; routine immunization, supplementary immunization, surveillance of AFP & targeted "mop-up" campaigns are used as four pillars.

- New approaches for prevention and control of vector-borne diseases are emphasizing "Integrated Vector Management" – as an approach that reinforces linkages between health and environment, optimizing benefits to both.

- In routine immunization at PHC outreach session are planned on fixed date and day.

The commonality out of all above situations is that an approach, method, ways are suggested and being used in all situation are helping in achieving the goal and objectives of the respective programs. These approach, methods, ways etc are the called "strategies". Strategy is an action an organization takes to attain superior performance and f*ormulating, implementing and evaluating such strategies are strategic Management.*

Resources are scarce and health problems are numerous, also epidemiological picture of health situation keep on changing from over the period of time as well as it varies from place to place. Over the period of time epidemiological understanding of the health situation increased, newer drugs, technologies and instruments are coming up. Hence it is required to adopt the strategy which gives an advantage over the other one. The full set of commitments, decisions, and actions required for an organization to achieve strategic competitiveness and earn above-average returns.

Strategic Management:

Strategic Management can be defined as the art and science of formulating, implementing, and evaluating cross-functional decisions that enable an organization to achieve its objectives.

The term strategic management is synonymously with the term strategic planning. The later term is more often used in the business world, whereas the former is often used in academia. It is an integrated and coordinated set of commitments and actions designed to exploit core competencies and gain a competitive advantage.

Strategic management consists of the analysis, decisions, and actions an organization undertakes in order to create and sustain "competitive advantages" over others (strategies). This definition captures two main elements that go to the heart of the field of strategic management.

First, the strategic management of an organization entails three ongoing processes: *analysis, decisions*, and *actions*. That is, strategic management is concerned with the *analysis* of strategic goals (vision, mission, and strategic objectives) along with the analysis of the internal and external environment of the organization. Next, leaders must make strategic decisions. These *decisions*, broadly speaking, address two basic questions: Which strategy should compete in? How this strategy would compete in with

other strategies? And last are the *actions* that must be taken. Decisions are of little use, of course, unless they are acted on.

Second, the essence of strategic management is the study of why some strategies outperform others. Thus, managers need to determine how a strategy is to compete so that it can obtain advantages that are sustainable over a lengthy period of time. It is important to create competitive advantage that is sustainable. Sustainable competitive advantage is possible only through performing different activities or performing similar activities in different ways.

Many occasions the term *strategic management* is used to refer to strategy formulation, implementation, and evaluation, with *strategic planning* referring only to strategy formulation.

Basic Tenet of Strategic Management

Strategy Formulation

Take advantage of **External Opportunities**

Avoid/minimize impact of **External Threats**
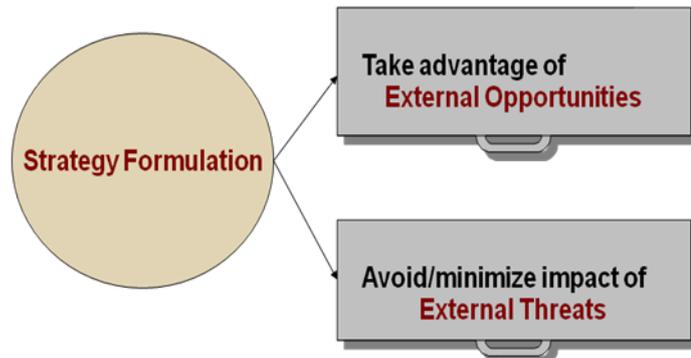
Developing Strategic Plan

Strategy is management's overall plan and actions for deploying resources and skills taking into consideration opportunities and threats in the environment to achieve it's mission, vision and objectives and to establish a favorable competitive position or success. Strategic planning is therefore concerned with overall all functions of Management.

Strategic Management Process:

Identify the organization's current mission, goals, and strategies

External Analysis
• Opportunities
• Threats

SWOT Analysis

Internal Analysis
• Strengths
• Weaknesses

Formulate Strategies

Implement Strategies

Evaluate Results
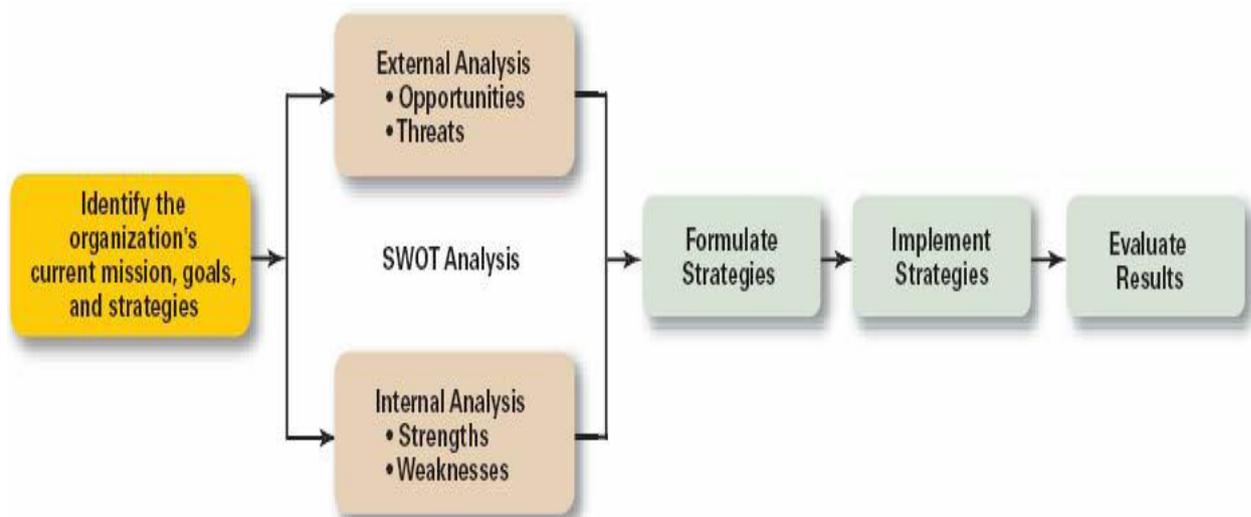
Strategic plan is, in essence, a game plan for any project or program. Just as a cricket team needs a good game plan to have a chance for success, a organization must have a good strategic plan to have compete success. A strategic plan results from tough managerial choices among numerous good alternatives, and it signals commitment to specific health situation, policies, procedures, and implementation in lieu of other, "less desirable" courses of action.

The process by which managers choose a set of strategies to pursue goal and objectives of the organization is Strategic Management Process.

Strategic Management Process is on-going and continuous cycle of situation analysis (internal evaluation & environmental scanning), establishing a mission, vision and objectives strategy formulation, strategy implementation, strategic control and performance Evaluation.

Strategic planning forces managers to think analytically. It stresses on paying attention on the future output and outcome i.e. success or failure. It helps in developing greater understanding about environment and develops ability and outlook of managers to see on the basis of performance evaluation and assessment

SWOT Analysis :

It is a Strategic Planning tool used to evaluate the Strengths, Weaknesses, opportunities and threats involved in a project or Program/services. It involves specifying the objectives of the program/ services, or project and identifying and classifying the internal & external factors that are favourable and unfavourable to achieving these objectives. As a first step; in SWOT analysis of external environment and internal environment are carried out.

Internal Analysis ;

Internal environment is having many strength points as well as numerous weak spots. Strength, are to be tapped and weaknesses are to be plugged in for success of organization.

It involves the evaluation Organization's resources and capabilities. Resources are tangible resources like financial or physical assets or intangible resources like brand name, reputation (product/service & organization), organizational culture, etc. Capabilities or competencies are the managerial ability, specialized skill & knowledge base of staff, etc.

Internal Strengths & Weaknesses

Based on internal analysis of organizations strive to pursue strategies that capitalize on strengths and improve weaknesses. They arise in the management, promotion, finance, accounting, production/ operations, staff capacity, research and development, and management information systems. Identifying and evaluating organizational strengths and weaknesses in the functional areas of a business is an essential strategic management activity. Organizations strive to pursue strategies that capitalize on internal strengths and eliminate internal weaknesses

Environmental Analysis

It is one of the most important activities in the strategic management. It involves the evaluation of the "business" environment of the organization. All external influences that impact a Organization's decision and performance.

Environment consists of the international/national economy; changes in demographic structures; social, cultural and political trends; technology; legal, governmental and the natural environment, stakeholders, suppliers, clients/beneficiary; staff, unions and owners and shareholders, etc.

External Opportunities and threat:

External opportunities and threats are refer to benefit or harm to the organization, program or project due to any change in above factors in environment .

A basic tenet of strategic management is that organizations need to formulate strategies to take advantage of external opportunities and to avoid or reduce the impact of external threats.

Some of the examples in SWOT analysis are shown below in typical General Health System.

(A). Strength

- Well defined goal, objectives, guidelines and targets.
- A Large network of Health care institutes.
- Political Commitment.
- Qualified, Trained and motivated staff.
- Decentralized Planning flexibilities.
- Computerized management information system

(B) Weaknesses

- Lack of local planning capacity.
- Weak organizational leadership.
- Irregular supplies and logistic support.
- Overburden staff at field level.
- Inadequate fund.

(C) Opportunities

- High educational levels of communities.
- Presence of active voluntary organizations.
- Specialized private hospitals.
- A good read connectivity.
- Wide network of internet, electricity.
- Good inter sectional collaboration.

(D) Threats

- Rigid Custom & Cultural. beliefs
- Non acceptance of Health insurance in community.
- Low Priority of Health.
- Inadequate safe Drinking water and sanitation facilities in remote areas.

SWOT and Strategic Choice

The *Strengths-Weaknesses-Opportunities-Threats (SWOT) Matrix* is an important matching tool that helps managers develop four types of strategies: SO (strengths-

SWOT Matrix

Analysis	Strengths – S	Weaknesses – W
Opportunities – O	**SO Strategies** *Use strengths to take advantage of opportunities*	**WO Strategies** *Overcoming weaknesses by taking advantage of opportunities*
Threats – T	**ST Strategies** *Use strengths to avoid threats*	**WT Strategies** *Minimize weaknesses and avoid threats*

opportunities) Strategies, WO (weaknesses-opportunities) Strategies, ST (strengths-threats) Strategies, and WT (weaknesses-threats) Strategies.3 Matching key external and internal factors is the most difficult part of developing a SWOT Matrix and requires good judgment—and there is no one best set of matches.

There are eight steps involved in constructing a SWOT Matrix:

1. List the organization's key external opportunities.

2. List the organization's key external threats.

3. List the organization's key internal strengths.

4. List the organization's key internal weaknesses.

5. Match internal strengths with external opportunities, and record the resultant SO Strategies in the appropriate cell.

6. Match internal weaknesses with external opportunities, and record the resultant WO Strategies.

7. Match internal strengths with external threats, and record the resultant ST Strategies.

8. Match internal weaknesses with external threats, and record the resultant WT Strategies.

SO Strategies use an organization's internal strengths to take advantage of external opportunities. All managers would like their organizations to be in a position in which internal strengths can be used to take advantage of external trends and events. Organizations generally will pursue WO, ST, or WT strategies to get into a situation in which they can apply SO Strategies. When an organization has major weaknesses, it will strive to overcome them and make them strengths. When an organization faces major threats, it will seek to avoid them to concentrate on opportunities.

WO Strategies aim at improving internal weaknesses by taking advantage of external opportunities. Sometimes key external opportunities exist, but an organization has internal weaknesses that prevent it from exploiting those opportunities. For example, there may be a high availability of Information Technology but a certain staff lack skills to use technology. One possible WO Strategy would be to outsource the tasks to an organization having competency in this area. An alternative WO Strategy would be to hire and train people with the required technical capabilities.

ST Strategies use an organization's strengths to avoid or reduce the impact of external threats. This does not mean that a strong organization should always meet threats in the external environment head-on.

WT Strategies are defensive tactics directed at reducing internal weakness and avoiding external threats. An organization faced with numerous external threats and internal weaknesses may indeed be in a precarious position. In fact, such an organization may have to fight for its survival.

Although the SWOT matrix is widely used in strategic planning, the analysis does have some limitations. First, SWOT does not show how to achieve a competitive advantage, so it must not be an end in itself. The matrix should be the starting point for a discussion on how proposed strategies could be implemented as well as cost-benefit considerations that ultimately could lead to competitive advantage.

Second, SWOT is a static assessment (or snapshot) in time. A SWOT matrix can be like studying a single frame of a motion picture where you see the lead characters and the setting but have no clue as to the plot. As circumstances, capabilities, threats, and strategies change, the dynamics of a competitive environment may not be revealed in a single matrix. Third, SWOT analysis may lead the organization to overemphasize a single internal or external factor in formulating strategies. There are interrelationships among the key internal and external factors that SWOT does not reveal that may be important in devising strategies.

Thus through SWOT analysis one can…

    (1) Formulate strategic plan.

    (2) Assures if program is meeting its objective.

    (3) Decide the change in strategy if required.

Strategic-Management Process Three Stages

Strategy Formulation

Strategy Implementation

Strategy Evaluation

The *strategic-management process* consists of three stages: strategy formulation, strategy implementation, and strategy evaluation.

Strategy formulation: It *includes* developing a vision and mission, identifying an organization's external opportunities and threats, determining internal strengths and weaknesses, establishing long-term objectives, generating alternative strategies, and choosing particular strategies to pursue.

The strategy formulation process involves designing a course of action for addressing strategic issues facing the organization, program, project after going through the external and internal evaluation processes. Actual strategy of a program, project or organization involves planned **or intended actions**, i.e. deliberate & purposeful actions or r**eactive or emergent actions** i.e. reactions to unanticipated events in program, project or organization's micro and macro environments. Strategy formulation is concerned with the all levels of program, project or organization:

High Management Level (Governance, Corporate Level) : This strategies are known as Corporate strategies. These strategy deals with specific area Government/organization wants to be in & how to manage those areas. In Health sectors Government's decision to identifying the thrust areas and allocation of resources are dealt at High Management Level: Focusing Rural Population, encouraging Research or use of IT, involving AYUSH, launching NRHM, NUHM etc are some examples of strategy formulation at High Management Level. It can be well reflected in National Health Policy, National Goals and Five year plans as well as annual health budget.

Middle Level (Executive Level, Business or Implementation Level): Theses strategies are known as Competitive strategies or Implementation strategies: Conventionally in profit making business organize are always looking for get a competitive advantage in given situation as well as over the competitors. In public health the strategies are mainly focusing getting the desired objectives in effective and efficient manners, i.e. with optimum use of resources. Mass approach to high Risk approach for prevention and control of any disease, integrated vector control strategy, Targeted Intervention in HIV control, DOTS etc are example of executive level technical strategies. PPP, levying user charges, incentives for difficult areas etc are managerial strategies.

Lower Level (Operational, Functional Level): These strategies are known as functional strategies or operational strategies. These strategies are short goal-directed decisions & actions of an organization's various operational or functional departments. Arranging a camp or campaign, reaching the target population though booth or house to house visits are examples of strategies concerning with lower level management.

Strategy-formulation issues include deciding what new project, program or health area to adopt, which program-project to abandon, how to allocate resources, whether to expand the services or integrate, whether to cover all areas or selected areas, how to overcome a hostile environment or barriers. Because no country, state or organization has unlimited resources, strategists must decide which alternative strategies will benefit the most. Strategy-formulation decisions commit to specific Health problem, program, project, services, method, and technologies over an extended period of time. Strategies determine long-term competitive advantages. For better or worse, strategic decisions have major multifunctional consequences and enduring effects. Top managers have the best perspective to understand fully the ramifications of strategy-formulation decisions; they have the authority to commit the resources necessary for implementation.

Criteria for selection of strategies

(1) Congruence with goals and objectives

(2) Effectiveness

(3) Efficient

(4) Ethically acceptable

(5) Economically viable

(6) Technologically feasible.

(7) Operationally feasible

Strategy implementation:

It is often called the "action stage" of strategic management. Implementing strategy means mobilizing staff and managers to put formulated strategies into action. Often considered to be the most difficult stage in strategic management, strategy implementation requires personal discipline, commitment, and sacrifice.

Strategy implementation requires a development of annual objectives i.e. short term objectives or annual target, implementation policies, motivate staff and allocate resources to formulated resources

Strategies formulated but not implemented serve no useful purpose. Successful strategy implementation

Strategy Implementation
- Annual Objectives
- Policies
- Motivate Employees
- Resource Allocation

hinges upon managers' ability to motivate employees, which is more an art than a science.

Interpersonal skills are especially critical for successful strategy implementation. Strategy-implementation activities affect all staff and managers in an organization. Every division and department must decide on answers to questions, such as "What must we do to implement our part of the program/project or organization's strategy?" and "How best can we get the work done?" The challenge of implementation is to stimulate managers and employees to work with pride and enthusiasm toward achieving stated objectives.

Strategy evaluation:

Strategic Evaluation is the final stage in strategic management. Managers desperately need to know when particular strategies are not working well. Good strategy gives an extra edge, while erroneous strategic decisions can have severe negative impact.

Strategy evaluation is the primary means for obtaining this information. Strategic evaluation is vital to organization. Strategic evaluation is the process by which *desired outcomes* (mission, vision, & objectives) are compared with *achieved outcomes* to determine if there are gaps. If any gap is there then to initiate corrective actions by monitoring changes in environment – changing scenario, newer opportunities, people's needs & expectations.

All strategies are subject to future modification because external and internal factors are constantly changing. Three fundamental strategy-evaluation activities are

(1) Reviewing external and internal factors that are the bases for current strategies,

(2) Measuring performance, and

(3) Taking corrective actions.

Strategy evaluation is needed because success today is no guarantee of success tomorrow! Success always creates new and different problems; complacent organizations experience demise.

Benefits of Strategic Management:

1. It helps in identification prioritization, and exploitation of Opportunities

2. Objective view of management problems is developed.

3. Improved coordination & control among the staff, managers at all levels.

4. Minimizes adverse conditions & changes

5. Decisions that better support objectives are taken.

6. Effective allocation of time & resources can be carried out.

7. Internal communication among personnel improves.

8. Integration of individual behaviours is observed.

9. Clarification of individual responsibilities is sought.

10. Encourage forward thinking in managers.

11. Creates a framework for internal communication among personnel.

12. provides a cooperative, integrated, and enthusiastic approach to tackling problems

13. and opportunities.

14. Encourages favorable attitude toward change in team.

15. Provides discipline and formality to the management in activities.

Characterizes of a Strategic plan. : Strategic plan is known as "winning game plan" of the organization. It is generally having following four characteristics.

1. External orientation

2. Futuristic action oriented

3. A long term plan

4. Closely tied to the Budget

Reason for not Planning :
However some organizations do not engage in strategic planning and some organizations do strategic planning but receive no support from managers and employees. Some reasons for poor or no strategic planning are as follows:

1. *Lack of knowledge or experience in strategic planning* : No training in planning.

2. *Poor reward structures :* When an organization assumes success, it often fails to reward success. When failure occurs, then the organization may punish.

3. *Firefighting* : An organization can be so deeply embroiled in resolving crises and firefighting that it reserves no time for planning.

4. *Waste of time* : Some organization see planning as a waste of time because no marketable product is produced. Time spent on planning is an investment.

5. *Too expensive* : Some organizations see planning as too expensive in time and money.

6. *Laziness* : People may not want to put forth the effort needed to formulate a plan.

7. *Content with success :* Particularly if a program is successful, individuals may feel there is no need to plan because things are fine as they stand. But success today does not guarantee success tomorrow.

8. ***Fear of failure*** : By not taking action, there is little risk of failure unless a problem is urgent and pressing. Whenever something worthwhile is attempted, there is some risk of failure.

9. ***Overconfidence*** : As managers amass experience, they may rely less on formalized planning. Rarely, however, is this appropriate. Being overconfident or overestimating experience can bring demise. Forethought is rarely wasted and is often the mark of professionalism.

10. ***Prior bad*** experience : People may have had a previous bad experience with planning, that is, cases in which plans have been long, cumbersome, impractical, or inflexible. Planning, like anything else, can be done badly.

11. ***Self-interest*** : When someone has achieved status, privilege, or self-esteem through effectively using an old system, he or she often sees a new plan as a threat.

12. ***Fear of the unknown*** : People may be uncertain of their abilities to learn new skills, of their aptitude with new systems, or of their ability to take on new roles.

13. ***Honest difference of opinion :*** People may sincerely believe the plan is wrong. They may view the situation from a different viewpoint, or they may have aspirations for themselves or the organization that are different from the plan. Different people in different jobs have different perceptions of a situation.

14. ***Suspicion :*** Employees may not trust management.

Pitfalls in Strategic Planning

Strategic planning is an involved, intricate, and complex process and does not always provide a ready-to-use prescription for success; There is some potential pitfalls and as a managers one nees to be aware of and address them for success. Some pitfalls to watch for and avoid in strategic planning are as below.

- Using strategic planning to gain control over decisions and resources
- Doing strategic planning only to satisfy accreditation or regulatory requirements
- Too hastily moving from mission development to strategy formulation
- Failing to communicate the plan to employees, who continue working in the dark
- Top managers making many intuitive decisions that conflict with the formal plan
- Top managers not actively supporting the strategic-planning process
- Failing to use plans as a standard for measuring performance
- Delegating planning to a "planner" rather than involving all managers
- Failing to involve key employees in all phases of planning
- Failing to create a collaborative climate supportive of change
- Viewing planning as unnecessary or unimportant

- Becoming so engrossed in current problems that insufficient or no planning is done
- Being so formal in planning that flexibility and creativity are stifled.

Seventeen Guidelines for the Strategic-Planning Process to Be Effective :

For effective use of strategic planning seventeen broad guidelines suggested. Out of them two are general, eights are about "doing" and seven are about "not doing".

1. Do not pursue too many strategies at once.
2. Continually strengthen the "good ethics is good business" policy.

It should **BE** a...

1. People process more than a paper process.
2. Learning process for all managers and employees.
3. Words supported by numbers rather than numbers supported by words.
4. Simple and nonroutine.
5. Vary assignments, team memberships, meeting formats, and even the planning calendar.
6. Challenge the assumptions underlying the current corporate strategy.
7. Welcome bad news.
8. Welcome open-mindness and a spirit of inquiry and learning.

It should **NOT** be..

1. A bureaucratic mechanism.
2. Become ritualistic, stilted, or orchestrated.
3. Be too formal, predictable, or rigid.
4. Contain jargon or arcane planning language.
5. Be a formal system for control.
6. Disregard qualitative information.
7. Be controlled by "technicians."

Operational planning

After defining strategic plan, the next step is to prepare its operational plans. Operational Plan is a plan describing a how the organization will operate in practice to implement its action and monitoring plan, engage resources, deal risk, to obtain organizational objectives. Operational planning is carried out at field levels and involves actions to achieve the desired goals. It has major two purposes.

1. Make the services client oriented
2. Effective resource utilization

Thus it is providing services according to felt need of clients and prioritizing them; the aligning resources accordingly, formulating a realistic work plan as well as supervisory plan.

Operational planning dealt with organizing resources, i.e. manpower, money, materials and machine for the desired activities in time frame. Fixing the job responsibilities, who will be doing what, when etc. are the essential questions to be answered in the operational planning. In operational plan annual targets or annual targets broken in smaller period is also fixed in the line of overall objectives.

In operational planning local factors and real pictures like availability of the staff, attributes of workers, areas characteristics, community compositions, logistic supply, administrative arrangements, organizational climate, other available support systems etc are kept in mind. To ensure effectiveness and efficiency planning of field visits, schedule planning, supervisory visits and planning of supplies are important steps.

Relationship between Strategic Planning and operational Planning :

One can directly jump to operational planning from goals without going through the strategic planning. But it is not advisable as Health Mangers can have the advantages of carrying out strategic planning before operational planning. They are mainly as follows.

1. Prioritization of activities can be done.

2. Critical activities may be giving due weightage.

3. Relationship between activities (means-ways) and results (ends-targets) can be established.

4. Supervision and monitoring plan may be selectively directed toward critical elements of operational plan, strategies or objectives.

Types of operational plan

At Primary Health Centres there are number of the activities and the range of operational responsibilities which requires a systematic approach in planning services. There are broadly two times of the activities..

1. **Routine (programmed) type of activities to be performed regularly.**

   Routine preventive, promotive, curative activities etc. immunizations, VHND, ANC, Malarial surveillance, supervision of SC activities etc. are the examples of the routine types of the activities. For such activities, fixing the job responsibilities, setting the rules for task/ procedures, scheduling, and organizing the resources, realistic targets (workloads) are carried out. Organizational Analysis, Job description, Job evaluation, Work Measurement, Method Studies, Inventory Control, Value Analysis, Material Handling, Standardization, ABC/VED analysis etc are the some management techniques which can be used for such planning.

2. **One time tasks which is not routine but to be performed on special occasions or for special purposes :**

National Immunization Day, camps, campaign, trainings are the examples of the onetime tasks. Apart from some of the management techniques mentioned above in programmed (routine) activities, Network Analysis, GANTT Chart, Program Evaluation and Review techniques (PERT), Critical Path Method (CPM) are the management techniques very useful in one time task plan.

For the best performance, operational plan should match program activities with community needs. Unmet need is one of the approaches, and gap analysis is the tool used in such planning. There are the situations where felt needs of the community and program objectives are matching hence better utilization of the services can be seen, but there are many examples where community felt needs and program objectives are not matching. Hence for such instances along with planning for supply side demand side planning are also to be carried out.

Steps in operational (program) Planning

The operational plan specified tasks, how this will be performed, who will perform them, when and where. There are three steps involved for these.

1. Developing list of all tasks with detail about description of the tasks and level of activities:

    All the activities to be carried out are thought about and exhaustive list of the all tasks are to be prepared. The salient descriptions of the tasks-activities are also noted. Against all the tasks level of activities are to be prepared. Level of activities are the answers to questions like how much?, How many? Time required? Who will perform? etc.

2. Examining the task specifications :

    Every task has been defined and set of specific rules or guidelines are framed as a part of the program designing. Also there are the specific tasks which are prepared locally. They are to be critically reviewed one by one and examined for inconsistency, omission and feasibility and make necessary revisions.

3. Preparing a task schedules :

    It should contain the detail about time and resources to be used on time line/with specified period. Well thought of task scheduling will help..

    a. Logical and rational sequencing of activities

    b. Proper distribution of workload to staff by preventing overburdening or under work load to staff,

c. Preventing overlapping of the task/involvement of same resources like man, machine, vehicle etc.

d. Time slack or consumption of disproportionate resources for specie task.

e. Supervision and review plan can be prepared accordingly.

Advantage of operational planning :

As program activities are planned in advance; better and efficient performances can be achieved because of following advantages...

1. Wastage of staff and time and other resources could be avoided.

2. Better clarity of role and coordinated efforts of team are elicited.

3. Problems with unrealistic targets can go away.

4. Locally prevalent challenges/constraints can be thought of in advance and plan can be prepared accordingly, thus their effects on performance can be minimized.

5. Problems can be forecasted in advance hence innovative solutions can be thought of and used.

6. Program activities can be matched with people's needs.

7. Better inter-sectoral and intra-sectoral coordination can be achieved.

Caution in operational planning :

Though planning help in effective implementation, but some cautioned need to be kept in mind.

1. Too much planning: Over planning becomes pure theoretical than the practical approach. Excessive concern with planning diverts attentions from implementation. It delays the implementation.

2. Over reliance on targets : Many a times operational targets fixed at national level/state level are average targets of good performing and poorly performing units. Hence for some PHC they become unrealistic, while another unit it is already over passed targets. Though generalized targets are set at higher up, but local targets are to be fixed keeping local situation in mind. In case of unrealistic targets pressing too hard for the target will have rebound effects on performance. In case of better performing PHCs this will result in complacency.

3. Institutionalizing of planning : A special team for planning are generally cannot relate themselves with field situations and such planning becomes unrealistic plan. Program/institutional(District, Taluka officers, PHC MO etc.) head and people are to be part of implementation should be part of the planning.

4. Ignoring re-planning : Planning is activities in future and some assumptions are used in preparing the plan. But there are substantial changes or wrong may be encountered. In such instances re-planning is necessary.

Conclusion :

Strategic planning and management are one and same, they are used interchangeably. Strategic planning is the process of deciding on the objectives of the organization or changes in earlier specified objectives, on the resources used to attain these objectives and on the policies that are to govern the acquisition, sue and deposition of these resources. It is to get competitive advantage to other organizations/strategies/plan. It is linked with objectives and resources and takes into account the present and future internal as well as external environment.

SWOT analysis is tool used in the strategic planning, where internal strength and weaknesses and external opportunities and threats are analyzed. Based on that, strategies are developed linking with goals and objectives of the organization.

Strategic planning has certain benefits but there are some dangers to be taken care for its effective uses.

Strategic planning should be followed by operational planning. Operation planning increases the performance efficiency. It requires mainly three steps, task listing, task specification and task scheduling. There are two type of operational plan, one is routine(programmed) type and another is one time task. For both the types; different management techniques can be used for preparing good operation plan.

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Chapter 5: Project Management & Log frame Analysis

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"Management by objectives works if you first think through your objectives. Ninety percent of the time you haven't."

– Peter Drucker, Modern Management Guru.

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Learning Objectives: After learning this chapter the participants will be able to:

1. Understand about the project & project management.

2. Know importance of different stages of Project cycle management approach in planning

3. Use Log Frame Approach for project planning.

Important Terminologies

Project	A project is a temporary process, which has a clearly defined start and end time, a set of tasks, and a budget, that is developed to accomplish a well-defined goal or objective".
	A project is a temporary effort of sequential activities designed to accomplish a unique purpose.
Project management	Project management is the process of combining systems, techniques, and knowledge to complete a project within established goals of time, budget and scope
Stakeholders	Stakeholders are individuals or institutions that may – directly or indirectly, positively or negatively – affect or be affected by the outcomes of projects or programmes.
Log Frame Analysis	The LFA is a managerial technique under which stakeholders identification and analysis of problems, and defining objectives and activities logically linked them in planning.
Beneficiaries	**Beneficiaries** are those who benefit in whatever way from the implementation of the project.
Inputs:	Resources required to support your activities. **Inputs** refer to the set of resources (i.e. financial, policies, personnel, facilities, space, equipment and supplies, etc.).
Activities (Process):	The technical and support tasks required to produce the OUTPUTS.
	Outputs: Products and services that must be in place before the EFFECTS can occur
Effect (Outcome):	A change in the knowledge, attitudes, skills, intentions, or and behaviors needed of the population that contribute to the desired IMPACT.
Impact:	A change in population's health, economic or social status

Introduction:

- A project is a temporary process, which has a clearly defined start and end time, a set of tasks, and a budget, that is developed to accomplish a well-defined goal or objective".

- A project is a temporary effort of sequential activities designed to accomplish a unique purpose.

- A project is a group of inter-related activities, constrained by time, cost, and scope, designed to deliver a unique purpose.

- A project is a temporary endeavor undertaken to create a unique product or service. Temporary means that the project has an end date. Unique means that the project's result is different from the results of other functions of the organization.

- An undertaking that encompasses a set of tasks or activities having a definable starting point and well defined objectives. Usually each task has a planned completion data (due date) and assigned resources.

- A clear set of activities with related inputs and outputs aimed to achieve objectives and goals linked to anticipated (desired) effects and impacts in a target population (sometimes called "beneficiaries")

According to all these definitions,

- Every project is **unique**
- A project has a **beginning** and an **end**.
- A **life cycle** involving a series of phases in between the beginning and end
- a budget
- A project has **limited resources** and use of resources require coordinating
- A project follows a planned, organized method to meet its objectives with specific goals of quality and performance. These are a **set of activities which are sequential, unique and non-repetitive**
- A project has a manager responsible for its outcomes.
- Centralized responsibilities for management and implementation
- Defined roles and relationships for participants in the project

Projects differ in size, scope cost and time, but all have the above characteristics:

During 1960s-70s periods the project became the primary means through which governments of developing countries translated their 'Development Plans' (Health is a developmental activity) and policies into programmes of action. Projects were (and still are) seen to act as a crucial coordinating mechanism for the implementation of policy and the integration of resources and institutions especially in developmental sectors.

Experiences with development planning (unlike profit oriented commercial ventures) were viewed as unsatisfactory prior to 1960s, because development plans tended to lack focus and defined output (they were untargeted), and "participation" in projects by stakeholders was often neglected. Evaluation of 'Devolvement Projects' indicated that a significant proportion of development projects had performed poorly, and identified a number of causes: Poor project planning and preparation, many projects not relevant to beneficiaries, risks were insufficiently taken into account, factors affecting the longer-term sustainability of project benefits were ignored, lessons from past experience were rarely incorporated into new policy and practice.

Out of this analysis Project Management / Project Cycle Management (PCM) was developed by the European Commission to improve the quality of project design and management and thereby to improve aid effectiveness in the early 1990's.

Project Management

Project management is the process of combining systems, techniques, and knowledge to complete a project within established goals of time, budget and scope. It is the way in which projects are planned and carried out follows a sequence beginning with an agreed strategy, which leads to an idea for a specific action, oriented to-wards achieving a set of objectives, which then is formulated, implemented, and evaluated with a view to improving the strategy and further action.

Project management is a process of leading a team of capable people in planning and implementing a series of related activities that need to be accomplished on a specific date with a limited budget.

Project management is the application of knowledge, skills, tools, and techniques to project activities in order to meet or exceed stakeholders' needs and expectations.

Key steps of project management
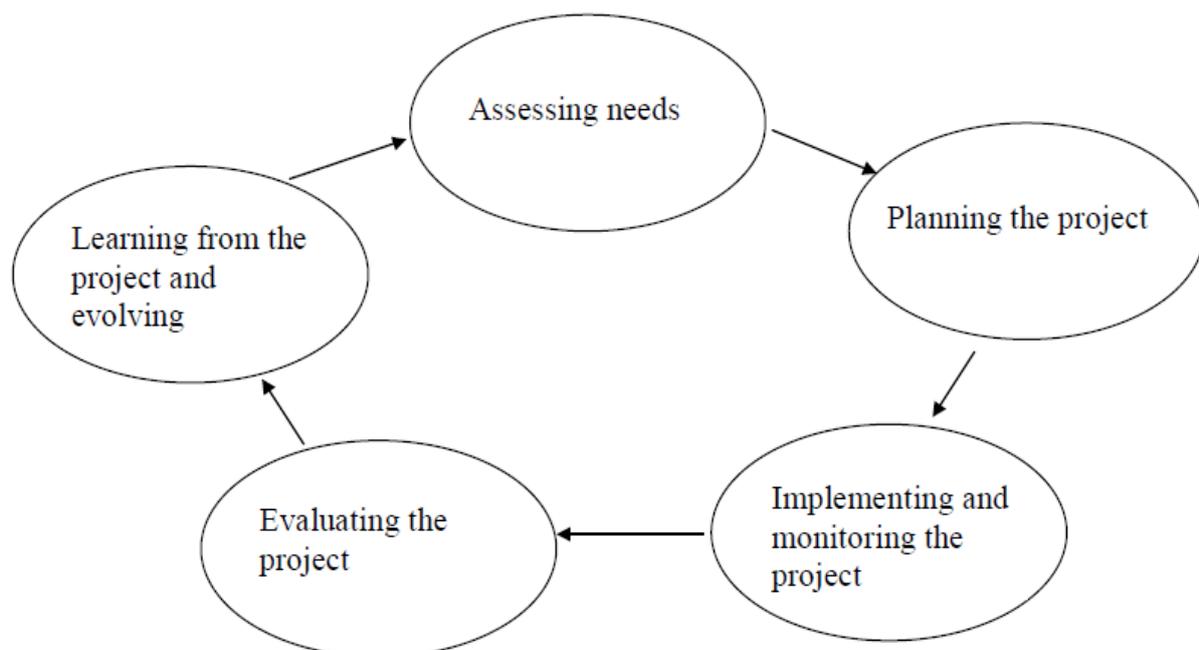
Three 'P's in Project Management:

Purpose of Project Management is to integrate or connect project:

- Purposes – why we do the project
- People – who does the project
- Processes – how we do the project
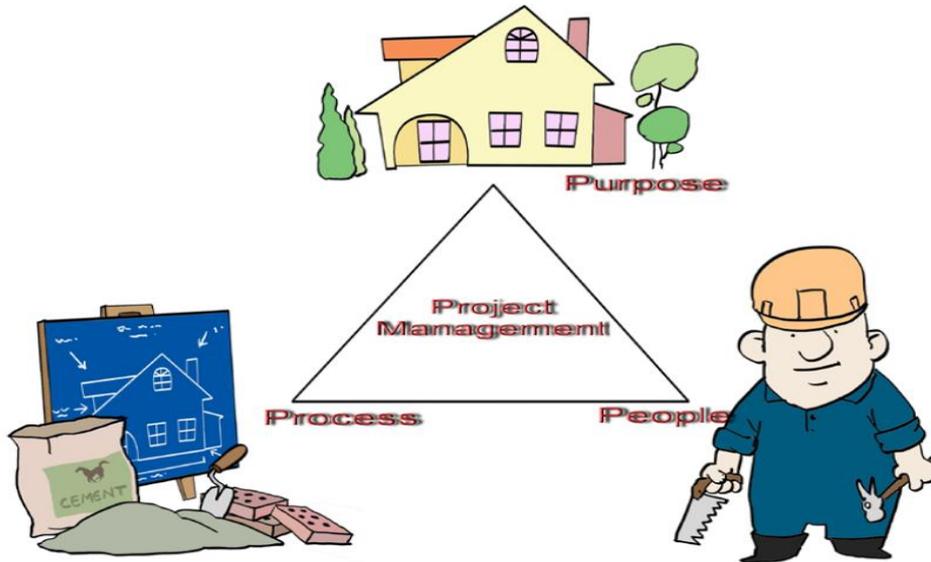
Project Cycle Management :

The project cycle approach provides a structure to ensure that stakeholders are consulted and relevant information is available throughout the life of the project, so that informed decisions can be made at key stages in the life of a project.

Project Cycle Management is an approach to managing projects. It determines particular phases of the Project, and outlines specific actions and approaches to be taken within these phases. The PCM approach provides for planning and review processes throughout a cycle, and allows for multiple project cycles to be supported

PCM aim at to ensure that:

1. Projects respect and contribute to overarching policy objectives of organizations.

2. Projects are relevant to an agreed strategy and to the real problems of target groups / beneficiaries;

3. Projects are feasible, meaning that objectives can be realistically achieved within the constraints of the operating environment and the capabilities of the implementing agencies;

4. Benefits generated by projects are sustainable.

To achieve that PCM

1. Uses the Logical Framework Approach to analyze the problems, work out suitable solutions – i.e. project design, and successfully implement them.

2. Requires the production of good-quality key document(s) in each phase, to ensure structured and well-informed decision-making (integrated approach).

3. Requires consulting and involving key stakeholders as much as possible.

4. Puts emphasis on a clear formulation and focus on one Project Purpose, in terms of Sustainable benefits for the intended target group(s).

5. Incorporates key quality issues into the design from the beginning.

PCM Planning and Management Tools

Project planning and management tools provide the practical mechanisms by which relevance, feasibility and sustainability can be achieved.

Some specific ones include

- Project Charter and Work Breakdown Structure (WBS) (scope)

- Gantt charts, network diagrams, critical path analysis, critical chain scheduling (time)

- Cost estimates and earned value management (cost)

The core tool used within PCM for project planning and management is described **Logical** Framework Approach (LFA). It is developed for projects working in social or development sector. Developed in response to poor planning and monitoring of Development projects The first logical framework developed for USAID at the end of 1960's.

The LFA is an effective technique for enabling stakeholders to identify and analyse problems, and to define objectives and activities which should be undertaken to resolve

Project Cycle Management	Logframe Approach
Defines different phases in the project life with well-defined management activities and decision making procedures	A methodology for planning, managing and evaluating programmes and projects, using tools to enhance participation and transparency and to improve orientation towards objectives

| Project Cycle Management	Logical Framework
The Decision Making and Implementation Process defined by the Organisation	Project Design and Management method and tools

these problems. Using the logframe structure, planners test the design of a proposed project to ensure its relevance, feasibility and sustainability. In addition to its role during programme and project preparation, the LFA is also a key management tool during implementation and evaluation. It provides the basis for the preparation of action plans and the development of a monitoring system, and a framework for evaluation.

PCM and LFA PCM reflects the decision-making and implementation process and *Logical Framework Approach* is methodology applied for planning, managing, evaluating projects.

The Log Frame Approach

The logical framework approach follows a hierarchical results oriented planning structure and methodology which focuses all project planning elements on the achievement of one project purpose. Represented graphically the logframe approach is as follows.
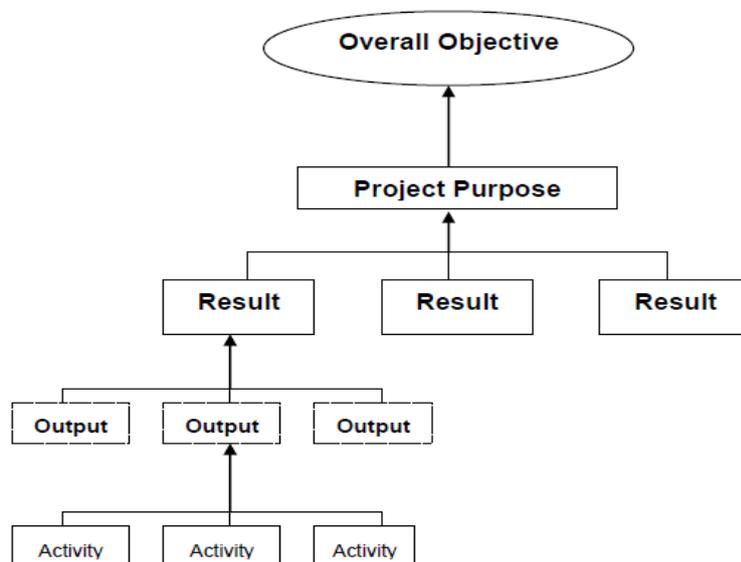
The Approach also tries to build in a close link between the external project environment and the internal project planning elements. The Project elements in LFA are recorded and presented according to a matrix format. This format is called the Project Matrix (PM), or Project Planning Matrix (PPM), and allows for a complete project to be represented in a clear and related manner. The PPM allows for ease of understanding and sets the basis for Project Cycle Management to occur.

The Steps of Log frame

There are seven distinct stages of "steps" in the LFA planning methodology. These are broadly categorised according to two processes: the **Analysis** process, and the **Design/Planning** process.

These stages are carried out progressively during the Identification and Appraisal phases of the project cycle: The Analysis Stage (Context / Situation Analysis), during which the existing situation is analysed to develop a vision of the 'future desired situation' and to select the strategies that will be applied to achieve it. The key idea is that projects / programmes are designed to address problems faced by beneficiaries,

both women and men, as well as to meet their needs and interests. There are four steps to the Analysis Phase:

1. Stakeholder Analysis

2. Problem Analysis (image of reality)

3. Analysis of Objectives (image of an improved situation in the future)

4. Analysis of Strategies (comparison of different options to address a given situation)

2. In the Planning Stage the results of the analysis are transcribed into a practical, operational plan ready to be implemented. In this stage, the log frame is drawn up, and Activities and resources are defined and scheduled. It contains three steps.

    1. Project Planning
    2. Activity Planning
    3. Resource Scheduling

Analysis	Design / Planning
This consists of four distinct steps:	This consists of three steps:
Step 1: Stakeholder Analysis	Step 5: Project Plan (Logframe)
Step 2: Problem Analysis	Step 6: Activity Planning
Step 3: Objectives Analysis	Step 7: Resource Scheduling (budgeting)
Step 4: Strategy Analysis	
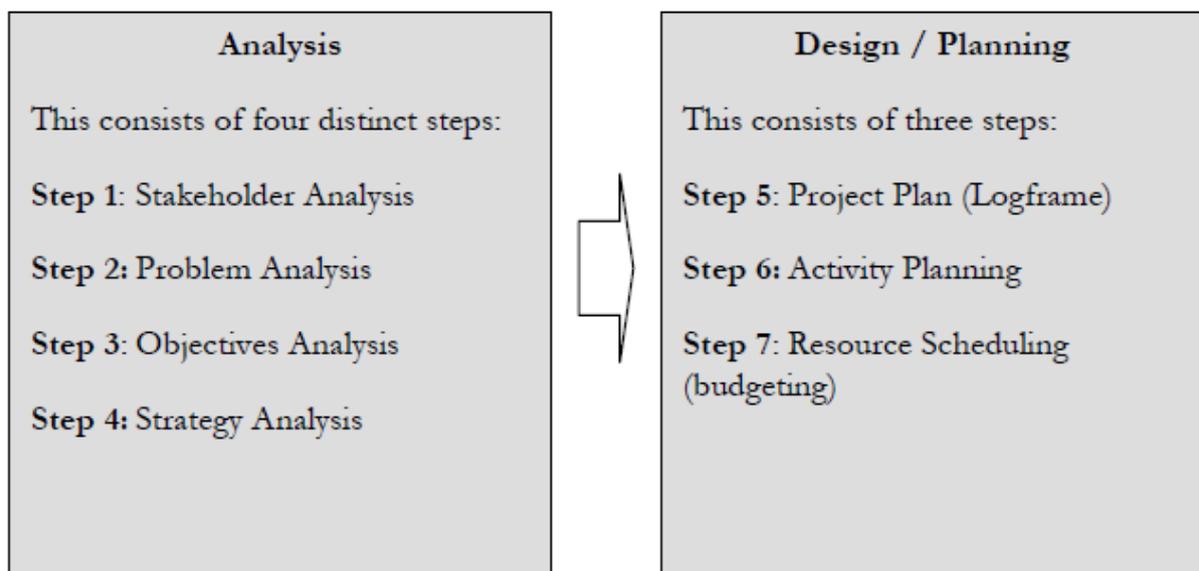
Step 1: Analysing Stakeholders

Logical Framework uses specific terms to identify the different human actors in its planning process and project design.

These are as follows:

- **Stakeholders** are individuals or institutions that may – directly or indirectly, positively or negatively – affect or be affected by the outcomes of projects or programmes.

- **Beneficiaries** are those who benefit in whatever way from the implementation of the project. Here an important distinction may be made between:

  o **Target group(s)** are the group or entity who will be directly positively affected by the project at the Project Purpose level

- **Final beneficiaries** who are those who benefit from the project in the long term at the level of the society or sector at large, e.g. "children" due to increased spending on health and education, "consumers" due to improved agricultural production and marketing.

- **Project partners** are those agencies who implement the projects with the directly.

At a certain point during the analysis process a decision has to be taken on which objectives to adopt for the project, i.e. whose interests and views to give priority. Ideally a consensus should be found between the stakeholders involved - realistically an attempt should be made to achieve a compromise between the different stakeholders" views and interests, although at times it might be more suitable to concentrate on the priorities of core stakeholders rather than on a compromise, "no-body is really committed to".

Stakeholder analysis Frame work

Stakeholder	Characteristics	Interest & expectations	Sensitivity to and respect of cross-cutting issues (Health, Gender Equality, etc.)	Potentials & deficiencies	Implications and conclusions for the project
	Social, Economic Gender Differentiation structure, Organisation status, Attitude	Interests, Objectives... Expectations		Resource endowment Knowledge, Experience... Potential contribution	Possible action required How to deal with the group

**Step 2: The Problem Analysis :**

Problem analysis identifies the negative aspects of an existing situation and establishes the 'cause and effect' relationships between the problems that exist.

It involves three steps:

1. Identification of the stakeholders affected by the proposed project
2. Identification of the major problems faced by beneficiaries
3. Development of a problem tree to establish causes and effects, i.e.

Problem Trees: Problem Trees are used to help analyze a situation and identify a core problem that you want to focus on. The tree has a trunk that represents the core problem, roots that represent the causes of the problem, and branches that represent the effects. As a visual mapping tool, this is ideal for gathering information in a participatory way.
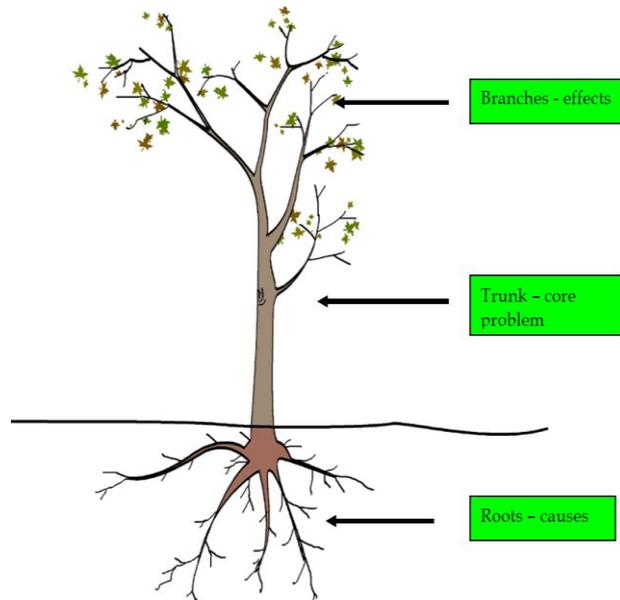
Using problem trees: ... to help analyze a situation ... to identify a key issue to focus on ... to clarify the causes of a problem to allow stakeholders and the community to participate in setting project objectives.


For example, if the focal problem is "*poor nutritional status of babies and infants*", a cause might be "*poor availability of high protein foods*", while an effect might be "*high rates of infection among babies and infants*".
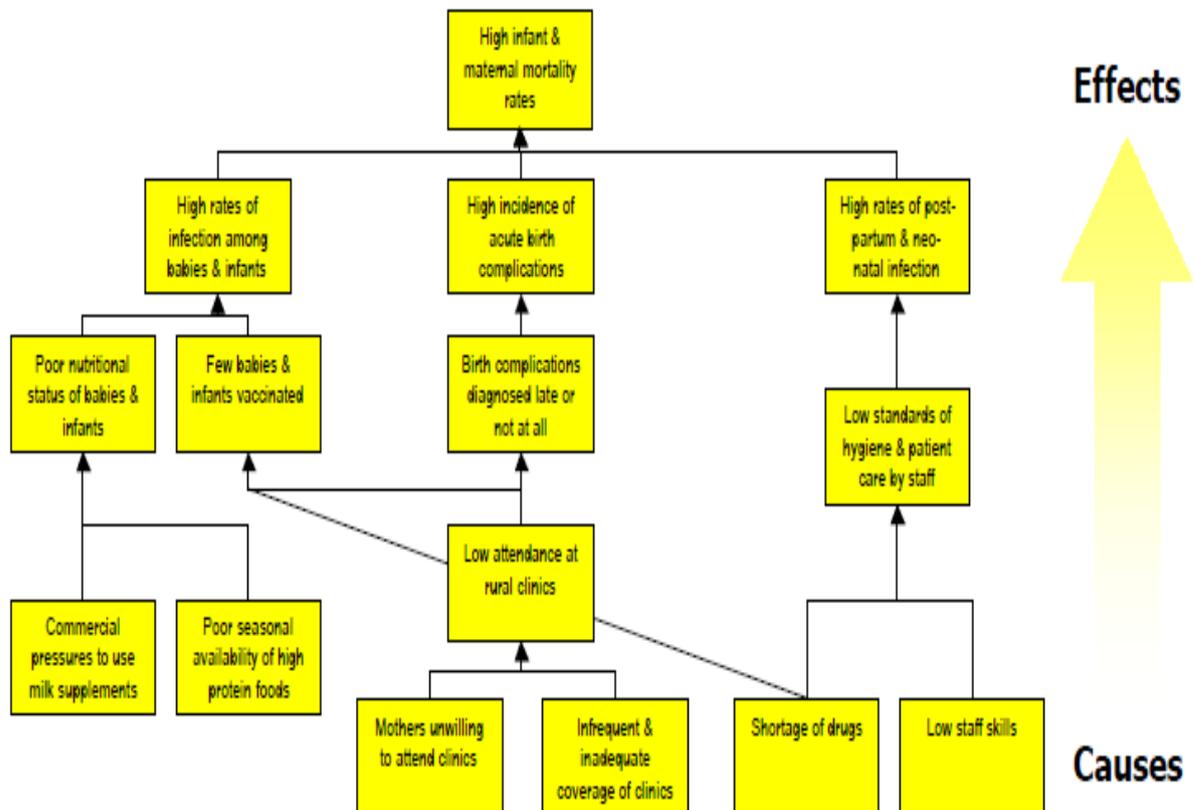
Step 3 : **Objectives Analysis**

While problem analysis presents the negative aspects of an existing situation, analysis of objectives presents the positive aspects of a desired future situation. This involves the reformulation of problems into objectives.

Transforming Problems in to objectives
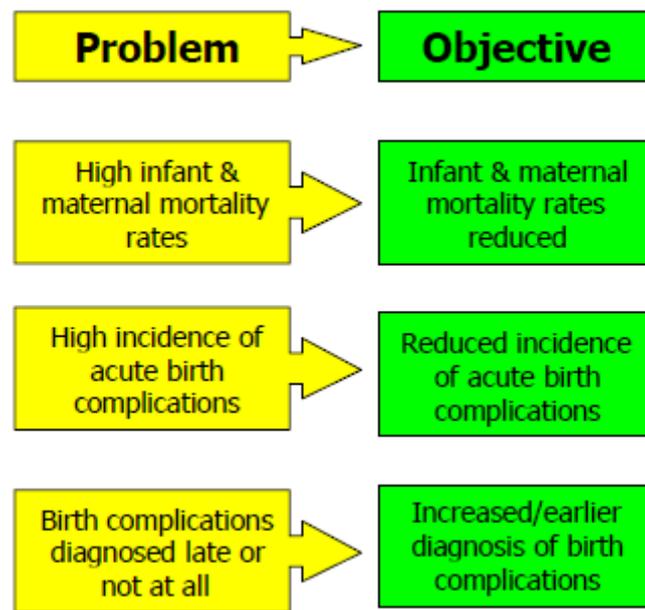
The objective tree can therefore be conceptualised as the positive mirror image of the problem tree, and the 'cause and effect' relationships become 'means to end' relationships. It may be found that there are gaps in the logic of the initial objective tree that were not apparent in the problem tree, therefore the 'means-ends' linkages between objectives should be reviewed and reorganised as necessary. Finally, objectives dealing with a similar topic can be grouped together in clusters, which will provide the basis for Strategy Analysis. Once complete, the objective tree provides a comprehensive picture of the **future desired situation.**

Thus Objectives **Tree** is a tool for identifying the necessary solutions and can be links between these solutions.

Objective Tree
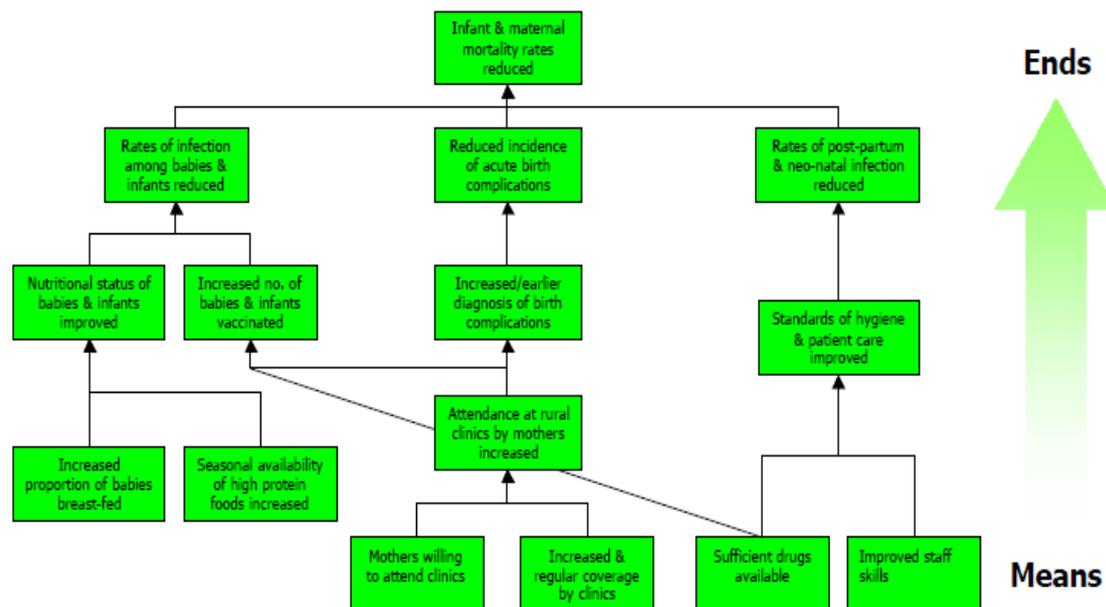
Step 4: The Strategy Analysis

The final step of the Analysis Stage involves selecting the strategy (ies) which will be used to achieve the desired objectives. Analysis of Strategies involves deciding what objectives will be included in the project, and what objectives will remain OUT, and what the Project Purpose and Overall Objectives will be. This step requires:

• Clear criteria for making the choice of strategies,

• The identification of the different possible strategies to achieve the objectives.

This is an important part of the planning process. It emphasizes the need to priorities, and arises from the principle that one project cannot solve all problems. The *Strategy Analysis* allows for consideration of the different ways that a project can address parts of a problem.

Feasibility is an important element of the choice of strategy. Does the project have the means and capacity to address the problem identified? The assessment of feasibility is as important as the choice of the correct strategic choice to solve the problem.

Criteria that can be used to guide a choice include:

Priorities of and attractiveness to target groups, including time perspective of benefits

- Resource availability:
  - funds
  - expertise required / available
- Existing potentials and capacities (of target group/s)
- Relevance for sector / agreed strategy between funder and partner and relevance for contribution to overarching policy objectives

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- Relationship and complementarily with other action.
- Social acceptability
- Contribution to reduction of inequalities (e.g. gender)
- Urgency

Steps for doing strategy analysis :

> Step 1: Identify objectives you do not want to pursue (not desirable or not feasible)
>
> Step 2: Group objectives, to obtain possible strategies or components (clustering)
>
> Step 3: Assess which strategy/ies represents an optimal strategy according to the agreed criteria
>
> Step 4: Determine Overall Objective(s) and Project Purpose.
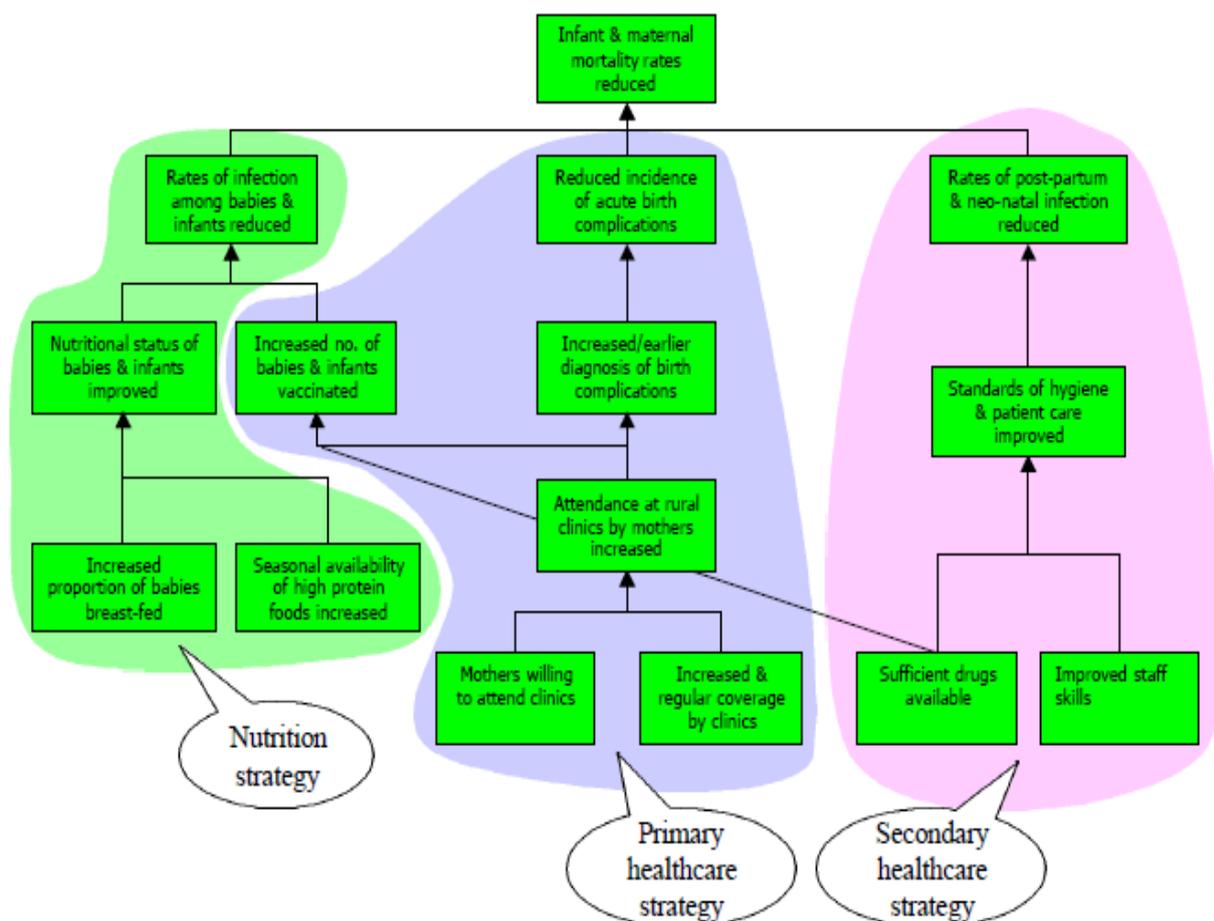
Step 5: The Project Plan (The Log frame Matrix or Project Plan Matrix)

The main document of the LFA is the logical framework matrix. It is a way of presenting the substance of an intervention in a comprehensive form. The project planning elements in LFA are recorded and presented according to LFM or PPM format. This

format is called the Project Matrix (PM), or Project Planning Matrix (PPM), and allows for a complete project to be represented in a clear and related manner. The PPM allows for ease of understanding and sets the basis for Project Cycle Management to occur.

Intervention Logic	Indicators	Means of Verifications	Assumptions
Goal-(Overall Objectives)	Horizontal Logic		
Project Purpose Objectives			
Output/ Outcome / Effect			
Process/ Activities / Strategies	Means	Cost	Preconditions
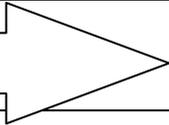
Vertical Logic
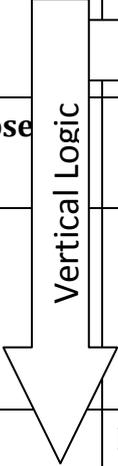
The matrix has four columns and four rows:

- The vertical logic identifies what the project intends to do, clarifies the causal relationships and specifies the important assumptions and risks beyond the project manager's control.

- The horizontal logic relates to the measurement of the effects of, and resources used by the project through the specification of key indicators, and the sources where they will be verified.

Goal: (Overall objectives) : A project goal or overall objectives briefly describes what is expected A goal is the solution to the problems described earlier. Problem statement was limited to those specific problems that could be solved by the project. This is a general development objective that refers to the long term benefits to an entire population, but is outside of the Project control, and is what the Project will contribute to. Normally the overall objective relates and links to a national objective.

Project Objectives (Purposes): Objectives answer the questions of "what behavior or situation do you want to address to meet the goal?", "what change do you want to achieve to attain the goal?" Objectives are a series of specific accomplishments designed to address the stated problems and attain the stated goal.

The clearer the objectives, the easier it is to plan and implement activities that will lead to attainment of these objectives. Writing clear objectives also makes it easier to monitor progress and evaluate the success of projects.

An objective is an **endpoint**, not a **process**. It is description of what will exist at the end of a project. This refers to what the specific objective of the project is, and describes the changed situation the Project should result in if it achieves its results. Objective should define the sustainable benefits for the target group/s. It may reflect a change in the target group's behavior, or the benefits which will accrue to them. There is normally only one project purpose.

How to Read the Logframe
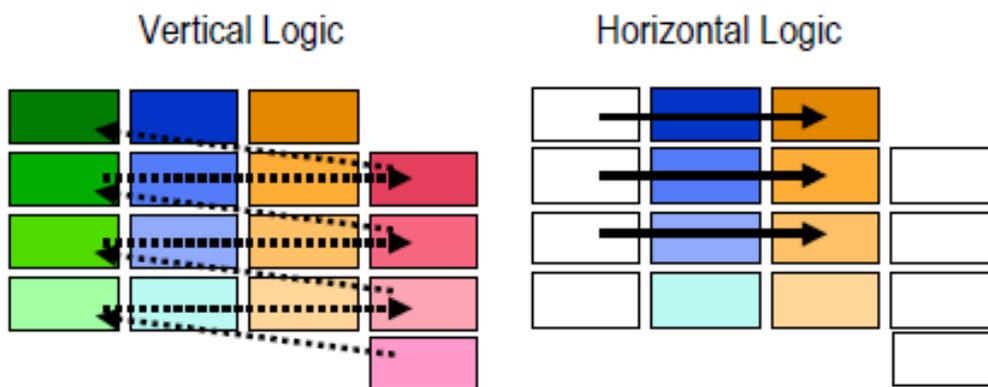
In LFA the objectives should relate directly to the Problem Analysis. Analysis of objectives is a methodological approach employed to:

- LFA is an objectives oriented planning methodology. In order for these objectives to be defined, they should reflect solutions to identified problems
- Describe the situation in the future once the problems have been remedied, with the participation of representative parties;
- Verify the hierarchy of objectives;
- Illustrate the means-ends relationships in a diagram

Objectives should be "SMART".

S	Specific	Is the objective clear in terms of what, how, when, and where the situation will be changed?
M	Measurable	Are the targets measurable (e.g., how much of an increase or how many people)?
A	Achievable	Are the objectives achievable?
R	Realistic	Is the project able to obtain the level of involvement and change reflected in each objective?
T	Time-Bound	Does the objective reflect a time period in which it will be accomplished (e.g., during the first quarter or midpoint or at the end of the project period

Activities and Means

The activities and inputs of a Project describe what is to be done, and what is needed to do this.

Activities

These are the sequential steps necessary to achieve a result. They are the tasks to be carried out according to each result. Each activity needs to be specific and detailed to allow for complete clarity as to what is to be done, and to allow for budgeting. The activities must be numbered in sequence according to the relevant result!

Means

These are the necessary means to undertake the activities. They include personnel, materials, and infrastructure. They describe the resources required for the successful implementation of the project activities. They are also basically a list of items that will need to be budgeted for

Cost

This states the overall cost of the project, and the expected sources. It is *not* a detailed budget!

Budget:

Budget is a document that translates plans into money - money that will need to be spent to get your planned activities done (expenditure) and money that will need to be generated to cover the costs of getting the work done (income). It is an estimate, or informed guess, about what you will need in monetary terms to do your work.

Why budgeting?

- The budget tells you how much money you need to carry out your activities.
- The budget forces you to be rigorous in thinking through the implications of your activity planning. There are times when the realities of the budgeting process force you to rethink your action plans.
- Use properly, the budget tells you **when** you will need certain amount of money to carry out your activities.
- The budget enables you to monitor your income and expenditure and identify any problem.
- The budget is a basis for financial accountability and transparency. When everyone can see how much should have been spent and received, they can ask questions about discrepancies.
- You cannot raise money from donors unless you have a budget. Donors use the budget as a basis for deciding whether what you are asking for is reasonable and well-planned.

Assumptions

It will have become apparent during the Analysis Phase that the project alone cannot achieve all objectives identified in the objective tree. Once a strategy has been selected, objectives not included in the intervention logic and other external factors remain. These will affect the project's implementation and long-term sustainability but lie

outside its control. These conditions must be met if the project is to succeed, and are included as assumptions in the fourth column of the Log frame.

Pre-conditions differ from assumptions in that they must be met before a project can commence. For example, without the implementation of certain policy measures by the partner, the project rationale may be undermined.

The probability and significance of these conditions being met should be estimated as part of assessing the riskiness of the project. Some will be critical to project success, and others of marginal importance.

Objectively Verifiable Indicators (OVIs)

Objectively Verifiable Indicators describe the project's objectives in operationally measurable terms, & provide the basis for performance measurement. The specification of OVIs acts as a check on the viability of objectives and forms the basis of the project monitoring system. Once the indicator has been identified, it should then be developed to include brief details of quantity, quality and time (QQT).

Objectively verifiable means that different persons using the indicator would obtain the same measurements. This is more easily done for quantitative measures than for those that aim to measure qualitative change. It is often useful to include more than one indicator if the single indicator does not provide a full picture of the change expected.

At the same time, the trap of including too many indicators should be avoided, as this will add to the work and the cost of collecting, recording and analysing the data. OVIs often need to be specified in greater detail during implementation when additional information is available and to allow for effective monitoring.

Sources of Verification (SOVs): Means of Verification:

When indicators are formulated, the source of information and means of collection should be specified. This will help to test whether or not the indicator can be realistically measured at the expense of a reasonable amount of time, money and effort. The SOV should specify:

- The **format** in which the information should be made available (e.g. progress reports, project accounts, project records, official statistics etc.)

- **Who** should provide the information

- **How regularly** it should be provided. (E.g. monthly, quarterly, annually etc.).

An Example of a Completed Log frame

	Intervention Logic	Objectively Verifiable Indicators	Sources of Verification	Assumptions
Goal (Over all Objective)	Infant & maternal mortality rates reduced	Mortality rates reduced for under- 1s, under-5s & pregnant & nursing mothers from X to Y by 19xx	Dept of Health statistics, analysed ex-ante, midterm & ex-post	- - - -
Objectives (Project Purpose)	Health status of pregnant & nursing mothers, infants & babies improved	Incidence of post-partum & neonatal infection within health centres reduced from X to Y by 20XX. Rates of infectious diseases (polio, measles, tetanus) among under-5s reduced from X to Y by 19xx Incidence of acute birth complications reduced from X to Y by 19xx	Hospital & clinic records, analysed ex-ante, midterm & ex-post Sample survey of target group conducted & analysed in years 1, 3 & 5	Incidence of infectious diseases in the household reduced.
Output (Results-effect)	1. Functioning primary healthcare service established at district level.	Number of villages provided with regular PHC services increased from X to Y by 19xx Proportion of under-5s vaccinated against polio, measles & tetanus increased from X to Y by 19xx No. birth complications diagnosed & successfully assisted increased from X to Y by 19xx Increased patient satisfaction with quality of services provided	Clinic attendance records, analysed quarterly Clinic vaccination records, analysed quarterly Client satisfaction survey, conducted annually	Mothers willing to attend clinics Household nutrition Improved through increased seasonal availability of high protein foods, & increased proportion of breast-fed babies. Pregnant & nursing mothers able to access cash to pay for treatment.
	2. Quality & efficiency of secondary healthcare improved.	Number of patients treated increased from X to Y by 19xx Average cost of treatment per patient reduced from X to Y by 19xx Increased patient satisfaction with standards of care	Hospital records, analysed quarterly Client satisfaction survey, conducted annually	

	Intervention Logic	Objectively Verifiable Indicators	Sources of Verification	Assumptions
Process (Activities)	1.1 Rehabilitate/replace mobile clinic vehicles & equipment. 1.2 Design & implement mobile clinic programme. 1.3 Recruit & train village birth attendants. 2.1 Rehabilitate staff housing. 2.2 Recruit new staff. 2.3 Design & implement new procedures for: Personnel management Vehicle & equipment maintenance Drug storage & control Financial control & cost recovery 2.4 Design & implement staff training programme for: Patient care Hygiene maintenance Basic accounting Data collection & analysis	Technical Assistance Equipment Medical supplies (See activity schedule)	Lump sum costs Reimbursable (See budget)	Department of Health maintains level of funding at pre-project levels in real terms. Suitably qualified staff willing to work in rural areas.
				Pre-condition: Department of Health Implements Decentralisation Act to enable Provincial Health Office to rationalize staffing levels.

Conclusion :

A project is a temporary efforts of sequential activities designed to accomplish a unique purpose while project management is the process of combining systems, techniques, and knowledge to complete a project within established goals of time, budget and scope. The LFA is a commonly used managerial technique used for developmental projects recommended by the USAIDS. LFA help in increasing the performance and efficiency of the project by logically linking the goal with objectives and activities (vertically) and action with effects (horizontally).

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Modules & Chapters

Post Graduate Certificate Course in Health System and Management

Module 1 : Introduction To Public Health	
1	**Terminologies Used In Health Care System And Management**
2	**Concept Of Health**
3	**Evolution Of Public Health**
4	**Primary Health Care To Millennium Development Goal**
5	**Health Planning In India**
6	**International Health Agencies**
7	**Five Year Plans And 12th Five Year Plan**
Module : 2 : Basics Of Health Systems And Health Care Delivery	
1.A	**Introduction To Health System In India : Health System In India**
1.B	**Introduction To Health System In India : Urban Health System**
1.C	**Introduction To Health System In India : Decentralised Health Administration By Local Self Government**
1.D	**Introduction To Health System In India : Voluntary Health Agencies In India**
2	**Health Policy**
3	**Health Indicators**
4	**Health Legislation**
Module : 3 : Basic Of Management & Planning	
1	**Basics Of Health Management**
2	**Managers : Level, Role & Skills**
3	**Health Planning Process**
4	**Strategic Management/Planning & Operational Planning**
5	**Project Management & Log Frame Analysis**

POST GRADUATE CERTIFICATE COURSE IN HEALTH SYSTEM AND MANAGEMENT

Aim

PGCHSM is aiming to develop comprehensive knowledge and skills in the Health System and Management.

Objective

1. To equip students with an overall perspective on health system
2. To improve leadership skills in public health and create good health managers
3. To inculcate interdisciplinary approach to problem solving skills in public health

About Course

Module 1: Introduction to Public Health
Module 2: Basics of Health System and Health Care Delivery
Module 3: Basic of Management and Planning
Module 4: Organization and Human Resource Management
Module 5: Material Management in Health
Module 6: Monitoring and Evaluation in Health System & Health Economics

Student Speaks

We learned many of the newer knowledge and skills about Health System & Management.

- Dr. Snehal Vaghela

Sessions of Resource Persons who had worked in the field were very interesting. We came to know about field realities and practical solutions.

- Dr. Kanan Desai

Contact sessions were interactive and we got maximum insights and understanding about Health System & Management during these sessions.

- Dr. Jaimin Patel

Assignments were framed in completely different ways. They require more thought process and field understanding than mere book knowledge.

- Dr. Ankit Sheth