

MOU with States as Financing and Performance Tool : Addressing Public health and Health Management Challenges

Dr. Ravi Narayan,
Dr. Dileep Mavalankar,
Mrs. Anuradha Gupta,
Dr. Manoj Nesari,
Dr. Shyam Prasad

12th Plan: Some Guiding Principles

- **Principles of “Subsidiarity” and “stewardship”**
- **Regulation of Public Health, drugs, food, etc through Public health act**
- **Fundamental framework of 10 essential public health functions suggested by WHO**
- **Develop public health work force**
- **Integrate vertical program under public health leadership & integrate AYUSH**
- **Address social determinant of health and strengthen convergence.**

Objective of the MOU system
is to strengthen Public Health
System to deliver results

Change the planning from input
oriented to outcome oriented

MOUs developed for Management of Public Sector Enterprise (PSE)

- Now being adapted to social sectors management
- It provides a framework for providing autonomy and flexibility while ensuring accountability for results

MoU as instrument to enhance equity, quality, effectiveness and accountability

- Negotiated agreement
- Shared vision
- Mutual obligations
- Indicators of performance
- Results based financing & Performance bonus
- Encourage for state innovations
- Transparent and objective administration
- Providing management autonomy

Shared vision should include

- Obligatory parameters – such as Public Health approach, Implementation of national health and ISM policy 2002,
- Integration & universalization
- Convergence of Health,
 - (AYUSH, WCD, water sanitation etc...)
- Scope for state's vision and goals ...to be incorporated..

Indicators and measurement systems

- Indicators – qualitative indicators and quantitative indicators
- Indicators have to be SMART (specific, measurable, attainable, result-oriented, tangible)
- Policy, structural, system indicators
- Program indicators
- Output and outcome Indicators
- Reliable measurement systems

MOU – how to operationalize

- As MOU system is new, it will need lot of awareness creation, capacity building
- First year indicators could be based on plan, process, structures and measurement based on qualitative indicators - trust the states
- Develop detailed monitoring systems and objective output oriented indicators
- 3rd year onwards Performance based funds release...

Strategies for Strengthening Public Health Management Systems at State level – Urgent imperative

- **State Health Policy and Public Health Act** to standardize and regulate the public health framework and standards for the state.
- Developing and deploying **public health cadre**
- **Training of public health managers** at all levels and strengthening public health competency.
- **Decentralization** of responsibilities by involving local bodies including **panchayats/ municipalities**
- **Systematizing community participation** in planning ,action and monitoring to enhance community involvement
- Integrating public health and primary health care systems both in the context of medical pluralism (**AYUSH Integration**) and intersectoral challenges of public health.(**Convergence with other ministries and development programmes.**

Strengthen Public Health

- Policy, Act, Regulation for PH needed
- PH Management Structures need to be enhanced at – state, district, block and PHC –
- Public health Management Career pathways – move to Public health Cadre
- HR management improvement

Training for Public Health Officers/Managers at all levels

- For all staff (including nurses, ANM's, AWW etc)

→ Short term modular training, CME,
→ Distance learning.

- For doctor managers

Short term modular training

PGDPHM- One Year

MPH, MHA, - one to two years

- State school of public health

SIHFW + SHSRC + Other local institutions.

Systems for functionality and sustainability of PH infrastructure

- Infrastructure – maintenance and functionality – output, quality of work
- Ambulances – utilization & monitoring
- Drugs and supplies
 - Sample indicators – establishment of EDL, Std Treatment guidelines, supply chain management, autonomous corporation, free supply of EDL at PHC...strengthening drug regulatory mechanism (health & ayush) in state.... - indicators

Contd.....

- Diagnostics, Equipment - technology
- Infection control and cleanliness
- HMIS – reliability and coverage
 - Standards and architecture, integration across systems.....capacity building etc...

Building / strengthening Institutions

- Training institutions
- SIHFWs,
- Dist training center / dist knowledge center
- Nursing and midwifery colleges,
- Medical and para-medical colleges
- ASHA training system

HR Management – key to success

- Recruitment processes – clinical staff & PH managers – PH cadre / careers paths
- Rational Deployment – P&T policy
- Career progression
- Reevaluation of staffing norms – based on workload not type of center
- Performance monitoring
- Fair remuneration and rewards – hard are allowance.... Family stations....
- Sustainability of HR contracted under NRHM

IEC/BCC / IPC

- Comprehensive plan for Communication at state and national level
- Adequate budget and professional staffing
- Structure and Systems to implement IEC – from central, state, district, ... block....
- Measurement of impact & cost effectiveness

Strengthen partnerships

- Devolution - PRI / RKS/
- Communitization – VHSC
- Convergence – water, sanitation, education, WCD.....Ayush

- NPPP/ CBO/NGO

Mainstreaming AYUSH towards effective integration

- Horizontal and vertical integration –
- AYUSH staff eligible for PH education / training & positions
- Education: MBBS should have AYUSH sensitization
- Practice (in national health programs) and Infrastructure – dispensaries, hospitals.....
- HR (using AYUSH docs in national health system and programs)
- Encourage regulatory councils coordinate and integrate ISM&H at Policy practice and teaching₁₈

Thanks