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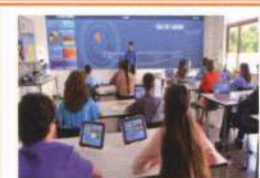
Special Issue, Volume- I
Challenges of Higher Education in India to Compete with
Global Level

July 2021

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On

**CHALLENGES OF HIGHER EDUCATION IN INDIA TO COMPETE WITH
GLOBAL LEVEL**

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Need and challenges of management education in Primary Health Care System in India

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Abstract

The primary health care system in India is extensive, reaching almost every part of the country. It has over 24,855 PHCs and 1,57,541 Sub-centres spread across 718 districts. This system consumes a large amount of resources and is the system that provides primary care services, including preventive programmes. There has been little systematic effort on a large scale to meet the training needs of the PHC system for management training. The system is primarily managed by doctors, some of whom have only a smattering of public health training. Given the lack of management training for doctors, this paper argues that it is critical that the doctors put in charge of the system receive reasonable management skills and training. The paper argues that significant efforts will be required to prepare doctors for management positions in the PHC system. This will necessitate significant investments in training as well as a link between training and field practise, it says. Even under international-supported projects, the efforts made thus far have been insufficient and of poor quality, it adds. India needs to develop a separate health management cadre that will be trained in public health and health management, according to an Indian government paper. The paper also examines available documents from newer health projects to see if there are any indications that such training will take place in the future.

Keywords: Primary Health Management, Human Resource, Needs and Challenges, HR Health Management Training

Introduction

The fundamental problem shared by all economic systems is that human wants are unlimited, while resources to satisfy them are limited and predefined. Management theories revolve around this concept, seeking a plausible and feasible solution. Human resource management policies and methods are at the heart of any long-term solution to healthcare system performance. India's healthcare industry is expected to grow 17 percent per year to reach US \$90 billion by 2021. Between 2011-2020 the sector grew at a 17 percent annual rate, comparable to the sectoral growth rates of other emerging economies such as China, Brazil, USA, UK and Mexico. India has made remarkable strides in the healthcare sector, increasing life expectancy from 55 to 63 years and cutting infant mortality in half. Few institutions in the country currently offer courses to meet the country's growing demand for healthcare professionals. There is a large supply-demand gap for trained healthcare managers/administrators to work for hospitals, pharmaceutical companies, health insurance and third-party administration. Even in the government sector, there are promising opportunities under the National Rural Health Mission (NRHM), where the government intends to appoint healthcare administrators.

This paper investigates the available avenues in the field of Health Management/Administration, bolstered by the fact that no adequate data is currently available to assess the current state of affairs. The paper attempts to analyse the current demand and equivalent supply and training programme for health management professionals, bridge the gap between the two segments and provide a comprehensive picture overall.

Methodology

Data was collected on existing courses in Health Management education in the related fields. This information was obtained using a systematic, predefined approach. The data was then used to create a database of health management courses across India.

1) The first search strategy involved using information found on the internet through the Google search engine. The study was restricted to courses offered in India and, if applicable, collaborations between Indian and foreign institutes. Findings of the study were published in the Journal of Health.

2) Three strategies were used to collect data on existing courses in Health Management education and related fields.

3) They included contacting Indian experts in the field of health management and administration, as well as reaching out to local officials.

Objectives of the Study

- To study management education in primary health care centres in India

- To study for a Management training programme in primary health care centres in India

Review of Literature

The government health sector controls a significant amount of training infrastructure, including apex institutions, medical colleges, state training institutions, and regional training institutions.

India's public health association should work out a proposal for promoting training in management and epidemiologist, says an expert. The Indian Institute of Health Management Research, Jaipur, was founded by Prof. Rameshwar Sharma. Dr. Sharma is a well-known health educator and the founder of the institute.

Dr. Sundar Lal "Management training is the need of the hour and it can be introduced at undergraduate level" He concludes by saying that the continuing education system at all levels should increasingly focus on health management training. The situation has not changed very much, as evident in the Indian Journal of Community Medicine.

Result and Discussion

(I) Management training is lacking:

There are no professionally trained managers at any level of the PHC system. The majority of doctors in charge of clinical facilities such as CHCs, rural hospitals, and district hospitals are MBBS or clinical specialists with no management training. Management has received very little attention in the undergraduate curriculum established by the Medical Council of India (MCI). Community medicine is only a minor component of the Graduate Medical Education Regulation of 2020. The aim is to understand the principles of health economics, health administration and health education in relation to the community. There is a lack of management training in the basic medical and para-medical training curriculum. Large organisations in the primary health sector, such as District Health Organizations and State Health Departments, are managed by doctors who are only trained to provide direct clinical services.

(II) Why is management not regarded as a critical component of the Primary Health Care system?

India's Medical Council of India (MCI) and the government have yet to take significant steps to incorporate management disciplines into medical education. The earliest scientific management is only about 100 years old, and systematic management education in India dates back about 55 years. "Management" has only recently become an important field of study in the industrial world. Until a few decades ago, most medical establishments in the public and private sectors were small and could be managed informally, much like a small family business. In the private sector, the majority of doctors work solely on an outpatient basis. This also meant that the clinic or hospital's owner-doctor could easily manage it. Each clinical unit operates almost as an independent entity with little control by hospital authorities, even in large hospitals. Nursing and other support services are provided and controlled by hospital authorities. Only inputs provided in "Health education" as part of primary health training to middle-level PHC officers.

(III) Efforts to improve management training in the PHC system.

There have been scattered and small efforts in the public system in recent years to increase health management training. Because India is a large country with 13 major states and many small states, there may be other public-sector efforts at the state level that we are unaware of. There have been significant efforts in the private sector to establish institutions and programmes in health management which we have not reviewed here. In the late 1980s, the National Institute of Health and Family Welfare (NIHFW) developed management training modules for PHC doctors, district level health officers, and other categories of staff. Such efforts are encouraging, but we will have to wait and see if these initiatives succeed in professionalising the hospital management scene in India.

(IV) Management training efforts under externally aided projects:

India has been involved in a number of management training efforts over the years, including "Area Projects," India Population Projects (IPP), and other special projects supported by bilateral and multilateral donors. The pioneering effort employed an intriguing methodology of learning from the field, developing management training materials based on these experiences, and then conducting training alongside system development. This fascinating experience came to an end prematurely due to the country's declaration of an internal emergency and related problems with the FP program. USAID and ODA have been supporting efforts to strengthen District Health Management in Maharashtra since the early 2020s. USAID has supported a large project known as the State Innovations in Family Planning Program, which was launched in the late 1990s in UP. The program aims to improve district level health management by creating a teambased approach to problem solving.

(V) Issues with current primary health management programmes:

A review of existing programmes for improving management training in primary health care reveals a number of issues that limit their effectiveness. Most programmes are too short to truly develop doctors'

skills and competencies in managing the PHC system. The majority of programmes last 1-2 weeks, while IIM's MBA equivalent programme has three terms per year. Short-term courses in the health department can provide some orientation and appreciation of management concepts and techniques, but can not be expected to develop skills or attitudes. The 4 month Management Education Programme is a condensed version of this programme at our institute (MEP) In addition to formal exams, there are quizzes, tests, term papers, and reports for evaluation.

(VI) Examine current and future health and family welfare projects:

Eleven percent of a total budget of 309 million dollars is devoted to training, with the majority of it appearing to be technical training at lower levels. The World Bank-funded Reproductive and Child Health (RCH) project has no provision for significant improvement of management skills at various levels. There is no clear mention of management improvement efforts in the Government of India's document. The analysis of Maharashtra training for medical officers, district level officers, and state level officers. The RCH project is an example of a recent externally assisted project to demonstrate how projects focusing on specific components of service improvement tend to overlook overall management capacity development in the PHC system.

(VII) Management Training Options Suggestions

The only currently available and practical alternative for management training for lower level health managers such as medical officers of PHCs and superintendents of CHCs would be state training institutions such as State Institutes of Health and Family Welfare. District level managers require training at regional health management institutions, such as some university management or public administration departments. India needs more management training for higher level health managers such as Directors of Health Services, Health, Secretaries and Superintendents of medical college hospitals. Management training should be made a requirement for advancement to important management positions in the health care system. The training period is 4-6 months for PHC (Public Health Centres) and up to 6 months for PSM (Physician-Paediatric Consultants Hospitals).

Conclusion

The health sector appears to be significantly undermanaged and has not received as much attention as other economic activities such as industry and manufacturing. Health and other social services are still regarded as 'welfare activities, rather than commercial ones. Because profit is not an objective in the government sector, measuring the performance of health organisations becomes extremely difficult. It is past time for Primary Health Care to be recognised as an important activity that contributes to economic growth. India's modern medical sector is still reliant on traditional informal management systems. To be more effective, management training must be integrated into the development of the health organisation and supported by a separate public health management cadre within the health system. India needs to develop management training for the health sector, with a focus on primary health care and rural health, both of which are underserved even in medicine.

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