

POST GRADUATE DIPLOMA IN HEALTHCARE QUALITY MANAGEMENT

(Dual mode learning programme)

Course Syllabus, Contents & Learning Objectives

CENTRE FOR HOSPITAL MANAGEMENT

School of Health Systems Studies

TATA INSTITUTE OF SOCIAL SCIENCES

**(Deemed to be University since 1964; under Section 3 of the UGC Act,
1956)**

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POST GRADUATE DIPLOMA IN HEALTHCARE QUALITY MANAGEMENT

Background

Public hospitals serve large segment of community especially underprivileged and those who cannot afford private healthcare. Apart from curative care services these are focal points for implementing National Health Programs, which significantly comprises for preventive and health promotion activities. So service provision and core processes in Public Health Institutions are quite distinct from private for profit hospitals. Quality movement in health care is quite late starter if we compare with other industries like aviation, manufacturing and telecom. Public health institution has just now started taking concepts of Quality and in benign stage. The efforts to implement Quality Systems based on NABH and ISO Platforms, but they are majorly borrowed from other industries and sectors and their vocabulary and framework somehow does not match the specific requirements of Public Hospitals. In last ten years especially after advent of NRHM in 2005 the focus was more on increasing coverage and access to public health facilities and program. Schemes like Janani Suraksha Yojna and JSSK are flag ship schemes for government of India that has significantly increased the number of people utilizing public hospitals.

Now governments are looking beyond this numbers to improve the Quality of care. The 12th five-year plan envisages quality scoring and ranking of all health institutions and implementation of Quality Management System. In line with these mandates of 12 five-year plan, MoHFW, Government of India has also released the framework for Quality Assurance in public health facilities. NHSRC, the technical assistance organisation of MoHFW has involved in development of National Quality Assurance Standards for public health facilities. All types of public health facilities fully are focussed on implementing these standards which demands high competency and commitment from care providers of hospitals. On this context there is huge requirement in terms of building capacity and developing skills for measuring quality and implementing quality management system in Public Health Facilities and programs.

Course Objectives

1. To offer platform for working professionals in hospitals to achieve desired knowledge, skills and attitude in the field of healthcare quality management, enhance quality culture and professionalism in hospitals
2. To enhance the skills for improving hospital operational efficiency to achieve quality objectives in hospital
3. To improve the ability of students to develop, implement and measure the hospital performance and also use of quality tools to achieve patients' delight the patients and stakeholders
4. To develop champions in health system, those can lead and nurture the quality improvement programs.

Programme learning outcome

After achieving the course requirements, the candidate able to

1. Gain confidence on improving the healthcare quality and develop clarity over the key concepts of healthcare quality, principles and practices in quality management,
2. Accept quality is basic right of human being and adopt best practices for healthcare quality management systems and set the standards at the level of international quality
3. Handle all kinds of quality related issues and problems by demonstrating professional approach in problem solving skills
4. Implement quality culture and patient safety programmes in the organization and whereby win the confidence of patients and other stakeholders
5. Apply quality management tools for monitoring and improving quality of services in the organisation
6. Discover best assessment methods and try to challenge the past glory and set new level of standardization and benchmarking of services quality
7. Obtain professional qualification and motivation to continuously of quality improvement projects
8. Offer quality care to the patients which will also improve employee job satisfaction, career development opportunities

9. Make public hospitals as preferred destination for healthcare services and ensure competitiveness and contributing the improving national health indicators.

Eligibility to apply

- i. Bachelor's Degree (under 10+2+3 or 10+2+4 or 10+2+2+1 year bridge course pattern of study or any other pattern fulfilling the mandatory requirements of 15 years of formal education), in any discipline has been working public hospitals at least 3 years.
- ii. Medical degrees (Allopathic, Aurvedic, Homeopathy, Dentistry etc), BSc nursing, Post BSc Nursing, paramedical and allied health courses like pharmacy, physiotherapy, occupational therapy have been working at least 3 years in hospitals in the areas of clinical administration or managerial or supervisory position.
- iii. Bachelor's degree like Engineering in any discipline or other degree holders have been working in hospitals at least 3 years in hospitals in the areas of managerial or supervisory position.

Total number of seats is 50 for the said programme

Target Group and Eligibility

Hospital Superintendents, Quality Managers, Matrons, Health Administrators, Hospital Mangers, program managers, Members of Quality Assurance Teams, committees and units, quality assessors, health programme managers, working in health systems areas, etc. working for or have interest in Public Health Facilities or Programs.

Organizational Arrangement

Course is offered in collaboration with National Health Systems Resource Centre (NHSRC) and CHM, SHSS, Tata Institute of Social Sciences. CHM, SHSS usually conducts the contact programme at TISS, Mumbai; however there is a possibility that contact programme may be arranged at NHSRC for Northern and eastern states and TISS for western and southern states for the logistic purposes. Venue can be also

relocated based on number of participants in certain state or region. A Programme Manager will be appointed for running the programme who will take directions and consultation from NHSRC and CHM SHSS as and when it is needed. The Dean SHSS in Consultation with Chairperson CHM will nominate a Faculty Coordinator from TISS side. NHSRC shall nominate a person as Nodal for coordination of course related activities. Resource Persons can be pooled from both the organizations for teaching and training the courses. Further there is a possibility of involving international organizations like WHO shall be explored to enrich the resource pool and practice areas.

Course Structure

This Course would be having semester framework to award Post Graduate Diploma in Healthcare Quality Management. It is two semester course. The first semester comprises of classroom teaching for 17 days covering set of prescribed courses (eight courses (17 credits)) which include basic concepts and terminology of quality, prevalent standards of quality in health care, measuring quality in hospitals, tools for quality improvement, implementing quality management system etc. It will also include the relevant exercise and group work. Further pursue the course shall take online programme of course learning and submit assignments for quality improvement areas in public hospitals and facilities that they have to implement at their workplace. Candidate shall submit assignment/report within six month of allocation. Candidate will take examination through online or during the contact hours. Also the student shall submit project proposal as part of project work.

In the second semester 7 courses (15 credits) and project work (4 credits) are offered. The second semester courses bring greater understanding, application and practical exposure to the students on various advanced levels of subjects and domain knowledge with regard to quality management, measurement, assessment, monitoring, improvement, etc. Also the students shall be getting adequate exposure on certain operational areas which are essential to quality objectives. After completing the second semester successfully the student shall be getting Post Graduate Diploma in Healthcare Quality Management and credential of Quality Champion.

Framework of the Programme

Semester	Activities	Duration	Academic Certificate
First Semester	Examination, Assignment Submission	19 Days class room lecture + five and half Months online learning and practice	PG Diploma in Healthcare Quality Management.
Second Semester	Examination Assignment Submission, and Project	17 Days lecture + five and half months online learning and practice	

Course Credits and Evaluation

Total number of courses offered in the programme is 15 and total credits for the theory courses 32. Project work is given 4 credits. The total credits extended to entire programme is 36. Out of 36 credits, class teaching shall cover 16 credits and the balance 20 credits are achieved through online by field work. The field work includes assignments or case studies or both. Further 4 credits are achieved by doing project work on specific areas. Each course shall be taught for 15 hours (one credit). After successful completion of class room learning the students will undertake examination. The weightage for examination is 30 percent.

Courses, Credits and Evaluation pattern

Semester I					
Course No.	Subject	Credit / Hrs	Course weightage		
			Written Exam	Assignments/ Case studies	Total Marks
HQM1	Overview on Public Health Systems and Policy	2 / 30	30%	70%	100%
HQM2	Healthcare Quality Standards	2 / 30	30%	70%	100%
HQM3	Quality Assessment Methods	2 / 30	30%	70%	100%
HQM4	Quality Management, Tools and Techniques I	3 / 45	30%	70%	100%
HQM5	Hospital Operations planning and Management	2 / 30	30%	70%	100%
HQM6	Statistics for Healthcare Quality	2 / 30	30%	70%	100%
HQM7	Hospital and Patient Safety	2 / 30	30%	70%	100%
HQM8		2 / 30	30%	70%	100%
Semester II					
	Subject	Credit / Hrs	Written Exam	Assignments/ Case studies	Total Marks
HQM9	HQM9 Ethics, Values, Governance, Legal Framework and Patient rights	2 / 30	30%	70%	100%
HQM10	Healthcare performance and quality indicators	2 / 30	30%	70%	100%
HQM11	Quality Management Tools and Techniques II	3 / 45	30%	70%	100%
HQM12	Quality Documentation	2 / 30	30%	70%	100%
HQM13	Healthcare Leadership and Change Management	2 / 30	30%	70%	100%
HQM14	Advanced Statistics for Quality	2 / 30	30%	70%	100%

	Management				
HQM15	Quality Management of Primary Care and National health programs	2 / 30	30%	70%	100%
	Project work (4 credits)				200%

Course Description

HQM1 Overview on Public Health Systems and Policy

1.Course Title	HQM1 Overview on Public Health System and Policy
2. Rationale	<p>Indian public health systems undergone several changes and still dynamic in India, and has witnessed many hurdles in its attempt to affect the lives of the people of this country. Since independence, major public health problems have been addressed through a concerted action of the government. Social development coupled with scientific advances and health care has led to a decrease in the mortality rates and birth rates. However many challenges over the decades are continue to exist in India. Therefore, health system strengthening, human resource development and capacity building and regulation in public health are important areas within the health sector. Contribution to health of a population also derives from social determinants of health like living conditions, nutrition, safe drinking water, sanitation, education, early child development and social security measures. The current policies under NHM and Universal Health Coverage is addressing the specific terms of reference such as human resources, physical facilities and norms, management reforms and regulation, community involvement, drugs and devices, and health financing. However, the efforts are not channelized to achieve health for all systematically. Therefore, it requires stable and well planned approach. This course offers valuable input to the students to understand health system and policies and its implication in broader perspectives while offering health services through public hospitals.</p>
3.Learners' Objectives	<p>On completion of the course the students should be able to</p> <ol style="list-style-type: none"> 1. Understand systems approach to health, its components,

	<p>interactions and core values.</p> <ol style="list-style-type: none"> 2. Gain insights into the dynamics of health policy formulation and implementation: the role of state and other actors involved in policy making with special emphasis on agenda setting. 3. Understand the larger perspective public health systems and policies, its implication, usefulness and the necessity to incorporate on quality management in health care organisations 4. Realize public hospitals are one of units of public health systems and therefore linking with goals and objectives of both health systems and hospitals 5. Developing integrated strategies to achieve the desired indicators and social determinants by incorporating necessary actions at the hospital level through quality management programmes.
<i>4.Course Content</i>	<p>Governance, Structure of Public health system, health policy framework; Concept of health and disease; distribution, determinants and basic measures of health; Concept of prevention; Levels of prevention; Introduction to Primary Health Care, Definition, Principles of Health Services, Community Health, Community Medicine. Political economy of Health, Healthcare System in India, Constitution & health Services at Central and State Levels. NRHM, RCH; National Urban Health Mission; National Health Assurance Mission, Universal Health Coverage, Equity and Equality; Health & Development; Raise revenue to finance health care (taxation, social health insurance, community financing schemes, user charges), advantages and disadvantages of these; assessing health systems performance; Historical growth of public policy in health and medical care in India; Review of important health and related policies: National Health Policy 1983 and 2002, Population Policy 2000, Medical Education Policy 1989, Health Research Policy, Nutrition Policy 1993, National AIDS Control and Prevention Policy 2000, etc.</p>
<i>5.Teaching and Evaluation Method</i>	<p>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room</p>

	<p>lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</p> <p>Evaluation: Online assignment for 70 percent and examination 30 percent during the contact programme.</p>
6. Reading List	
Essential Readings	<p>Buse, Kent, Mays, Nicholas, Walt, Gill, 2012 Making Health Policy, McGraw-Hill Education (UK)</p> <p>M Bhatia & E Mossialos, 'Health Systems in developing countries', in Anthony Hall & James Midgley, <i>Social Policy for Development</i>, Sage, Sage, 2004; M S Grindle (Ed)</p> <p>B Abel-Smith, <i>An Introduction to Health: Policy, Planning, and Financing</i>, Longman (1994).</p>
Suggested Readings	<ol style="list-style-type: none"> 1. Park, Text book of Preventive and Social Medicine, 17th edition. (2006) 2. Strech, Daniel, Hirschberg, Irene, Marckmann, Georg, "Ethics in Public Health and Health Policy Concepts, Methods, Case Studies" Springer Publications 3. WHO (2000). <i>The World Health Report, 2000: Health Systems: Improving Performance</i>, Geneva: WHO, 2002. 4. M Segall, 'District health systems in a neo-liberal world: a review of five key policy areas', <i>International Journal of Health Planning and Management</i>, 18: S5-S26, 2003. 5. World Bank, <i>World Development Report 1993: Investing in Health</i>, Washington DC: The World Bank, 1993

HQM 2 Healthcare Quality Standards

1. Course Title	HQM2 Healthcare Quality Standards
2. Rationale	<p>Accessibility to health is still major issue in health care. Accessibility also includes quality healthcare to the people. In public healthcare facilities, physical access may be possible however, quality of care is always difficult, and therefore, to ensure standardization and uniform care to all which demands an appropriate instruments (Quality standards). Further increased awareness among the patients with regard to quality</p>

	care, the present trends in hospital industry inclusive of medical tourism; increasingly demands for recognition and image building in terms of achievements, certifications, etc. have been forcing to implement healthcare quality standards in Indian Hospitals. This course envisages orienting students on the prevailing quality standards applicable to hospitals.
3.Learners' Objectives	On completion of the course the students should be able to <ol style="list-style-type: none"> 1. Understand the importance, significant contribution and influences of quality standards in improving quality care in hospitals 2. Understand various key quality standards available at national and international which are applicable to the hospitals 3. Ability to participate in the process of establishing and implementing and monitoring quality standards in hospital and public health facilities.
4.Course Content	National Quality Assurance Standards; Indian Public Health Standards Indian Standards (NABH, NABL); ISI, ISO 9000, EMS 14000, ISO 27000, ISO 15189; International (JCI, CAP, NIAHOSM, AABB, LEED).
5.Teaching and Evaluation Method	<i>Teaching methods consists of two modes:</i> 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions. <i>Evaluation:</i> Online assignment for 70 percent and examination 30 percent during the contact programme.
6.Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. National Quality Assurance Standards and Assessors Guidebooks 2. Manuals like IPHS, ISO, NABH, NABL, JCI and others
Suggested Readings	<p>François-André Allaert , 2002, Security Standards for Healthcare Information Systems: A Perspective from the EU ISIS MEDSEC Project <i>Volume 69 of Studies in health technology and informatics</i>, Publisher - IOS Press.</p> <p>Charles Vincent, 2011, Patient Safety, Publisher - John Wiley & Sons</p> <p>The National Roundtable on Health Care Quality, Institute of Medicine</p> <p>Molla S. Donaldson 1999, Measuring the Quality of Health Care, Publisher - National Academies Press</p> <p>Larry Webber, Michael Wallace 2011, Quality Control for Dummies, Publisher John Wiley & Sons</p> <p>A.F. Al-Assaf, June Schmele, 1993, The Textbook of Total Quality in Healthcare, Publisher-CRC Press</p>

HQM3 Quality Assessment and Methods

1.Course Title	HQM12Quality Assessment and Methods
2. Rationale	Quality can be assured with quality control and regular assessments. It is important for a quality manager to be oriented towards the different assessments, audit plans & schedules. This course envisages building a hospital management executive on the auditing skills required by a quality manager of a hospital.
3.Learners' Objectives	Learn about different types of audits in a hospital, audit procedures, audit plans, audit report & assessment criteria for various performance excellence awards.
4.Course Content	<p>Overview of assessment methods of National Quality Assurance Standards; types of Assessments (Internal & External), Planning for Assessments,Assessment Protocols for National Quality Assurance Standards, Checklists for Assessment, score cards, Post Assessment activities and action planning.</p> <p>ISO audit, NABH / JCI audits, internal audits, external audits, audit strategy, audit team, audit plans, QA, QC techniques, QA systems & plan, hospital quality assurance audit, hospital performance audit, performance excellence models, Malcolm Baldrige awards, EFQM framework and other awards; Medical Audits, Death Audits , Prescription Audits.</p>
5.Teaching and Evaluation Method	<p><i>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</i></p> <p><i>Evaluation:</i>Online assignment for 70 percent and examination 30 percent during the contact programme.</p>
6.Reading List	
Essential Readings	<p>1) Guidelines of NQAS, NABH, JCI, ISO, etc.</p> <p>2) Curtis P McLaughlin , Arnold D Kalussy (2006), Continus Quality Managmentin Healthcare, Theory Implementation And Applications 3rd Edition Janes And Bartcett Publishers.</p>

Suggested Readings	<ol style="list-style-type: none"> 1) Stepher W Brown, Anne Marir Nelson , Sheryl J Bronkesh Steven D Wood (1993). Patient Satisfaction Pays, Quality Service for Practice Success. An ASPEN Publication 2) SrUdpa (1994) Quality Circles, Progress through Participation 2nd Edition, Tata Mcmraw Hill Publication. 3) Linda Bridges, Eric D Joseph (1990). Quality Assessment And Assurance For Lomg Term Care Facilities, CARE Communication 4) Leslie Annu Fox, Eric D Joseph, Mark L Joseph (2003) The Quality Assurance Administrator In Action, Janes and Bartcett Publishers. 3) Hubert K Ramprasad (2005) Managing Total Quality, Enhancing Personal And Company Value,Tata Mcgraw Hill Publishing Company Limited 5) Dr.BrettTrusko , Carolyn Pexton, Dr H Jammes Harrington , Pravin Gupta (2007), Improving Healthcare Quality And Cost With Six Sigma . Pearson Edition
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HQM 4 Healthcare Quality Management Tools and Techniques I

1.Course Title	HQM4 Healthcare Quality ManagementTools and Techniques I
2. Rationale	<p>“Modern customers are considered as God. The customers are always right”. Hospitals have strongly recognized the need for the quality of services and also considered quality as one of tools for business development tool. Further the hospitals have been focusing on developing quality culture for improvement and continuous development in the hospital. Therefore, there is concrete need for the students to get appropriate knowledge and skills achieve quality in Healthcare. Thus course provides inputs to the student to learn about method, process, technique and management of quality in health care.</p> <p>Further quality assurance and quality control is now a pseudo mandate to ensure good patient care practices patient satisfaction scenarios. Hence it is important for every hospital manager to have an orientation to basics of quality management. This course offers the platform for the students to achieve hands practice and application of quality tools for improving quality aspects in the hospital and public health facility.</p>
3.Learners’ Objectives	<p>On completion of the course the students should be able to</p> <ol style="list-style-type: none"> 1. Understand the evolution of quality management, Quality gurus, and orientation to Quality management methodologies & learn

	<p>about basic quality tools and its application in hospitals.</p> <ol style="list-style-type: none"> 2. Emphasis the need and benefit of the quality management in health care organizations 3. Understand the different quality parameters and indicators available 4. Establish benchmarking standard for quality improvement in health care organizations 5. Implement various quality concept and establishing quality culture in health care organisations
<i>4.Course Content</i>	<p>Basic definitions of quality: Definition of quality, types of quality, quality design/redesign, History & Evolution of Quality Movement, Need for Quality Management Initiatives in Health Care; Principles of Quality management; quality of conformance, quality of performance, Total quality management; Deming view of relationship between quality and productivity, benefits of improving quality; quality environment – 14 points for managing never ending improvement of the extended process. Quality assurance - Continuous quality improvement, Theories and Principles of Quality Assurance, Deming's Principles, Juran Trilogy, Kaizen, Philip Crosby's Principles; Quality Management process – Planning, organizing, and implementation practices techniques, Implementation Strategies for Quality Programs; Training for quality; Quality management and human attitude; quality culture within the organization; Selection of pilot projects; Quality circles; Quality Initiatives in Indian Health Care Organizations, steps in implementing quality management systems.</p> <p>Introduction to Quality methods and practices: TQM, JIT, benchmarking, Lean, Six Sigma, kaizen, etc. Quality Assurance, Total Quality management, Continuous quality improvement. Quality management tools; fish borne diagram, root cause analysis and other operational tools, Process mapping , value stream mapping, PICK chart, Pareto Analysis.</p>
<i>5.Teaching and Evaluation Method</i>	<p><i>Teaching methods consists of two modes:</i> 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of</p>

	<p>film(s) followed by debates and discussions.</p> <p><i>Evaluation:</i>Online assignment for 70 percent and examination 30 percent during the contact programme.</p>
6.Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. Dain L. Kelly (2007). Applying quality management in healthcare, a system approach, 2nd edition, AUPHA PRESS, Washington, DC. 2. Athina Lazakidou, AndrianiDaskalaki (2012). Quality Assurance In Health Care Service Delivery, Nursing And PersonalisedMedicine : Technologies And Process, US Of American , Medical Information Service Reference.
Suggested Readings	<ol style="list-style-type: none"> 1. Srenivasan, N.S.& V. Narayana.(2005) Managing Quality – Concepts and Tasks, New Age International. 2. Shailendra Nigam.(2005) <i>Total Quality Management (An Integrated Approach)</i>, Excel Books, New Delhi. 3. James R Evans, James W Dean, Jr., <i>Total Quality (Management, Organisation and Stragtegy)</i>,2nd edition, Excel Books, New Delhi. 4. Gupta, P.K. (2004). <i>Insurance and Risk Management</i>, Himalaya Publishing House. 5. K.Parsley.,&P. Corrigan (1999).Quality Improvement in Health Care: Putting Evidence Into Practice. Nelson Thornes 6. Donald E. Lighter, Douglas C. Fair (2000).Principles& Methods Quality Mgmt in Health Care. Jones & Bartlett Learning 7. Joint Commission Resources (2008). Managing Performance Measurement Data in Health Care, Second Edition 8. Dr.BrettTrusko , Carolyn Pexton, Dr H Jammes Harrington , Pravin Gupta (2007), Improving Healthcare Quality And Cost With Six Sigma . Pearson Edition 9. Stepher W Brown , Anne Marir Nelson , Sheryl J Bronkesh Steven D Wood (1993). Patient Satisfaction Pays, Quality Service For Practice Success. An ASPEN Publication 10. SrUdpa (1994)Quality Circles, Progress Through Participation 2nd Edition.TataMcmraw Hill Publication.

	<p>11. Linda Bridges , Eric D Joseph (1990). Quality Assessment And Assurance For Long Term Care Facilities, CARE Communications.</p> <p>12. Leslie Ann Fox, Eric D Joseph, Mark L Joseph(2003) The Quality Assurance Administrator In Action. Jones and Bartlett Publishers.</p> <p>13. Dain L. Kelly (2003). Applying quality management in healthcare, a process for improvement, 2nd edition, AUPHA PRESS, Washington, DC.</p> <p>14. Quality Management In Public Health Facilities, An Implementation Handbook (2011) National Health System Resource Center, Govt. Of India.</p> <p>(Other general readings “The Essential Deming” W. Edwards Deming; “Quality Control Handbook” Dr JM Juran; “Quality Is Free” Philip B. Crosby; “Out of the Crisis” - W. Edwards Deming; “Managerial Breakthrough” Dr JM Juran)</p>
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HQM 5 Hospital Operations planning and Management

1.Course Title	HQM5 Hospital Operations planning and Management
2. Rationale	<p>The healthcare sector is rapidly evolving. Driven by new technologies, changing demographics, economic forces, competition, heightened patient expectations and legislative actions, the delivery of healthcare services in all over the world is being transformed at a breathtaking pace. Areas of significant change include care models, patients’ rights, and access to affordable healthcare. It is expected every hospital must provide healthcare services that are characterized by high standards of quality and efficiency for the patients. At the same time, the patients and their families should feel that they are in an environment which supports the individual patient’s need for comfort and safety. On the other hand hospitals are facing number of challenges today than ever before. In fact hospitals face much more complexities than Industries and they try to address some of the challenges through various methods including accreditation, standardization etc. However learning and developing comprehensive understanding in the field of hospital administration is dream so far. There is a need for strong academic research input in-terms</p>

	<p>of strengthening practice of professionalized management in hospital including policy making and informed decision making. This course offers variety of perspectives to scholars understand the current issues, dynamics and key areas to contribute through their research work.</p>
<p><i>3.Learners' Objectives</i></p>	<ol style="list-style-type: none"> 1. To gain adequate knowledge on key operational areas of hospitals particularly planning and decision making 2. To understand various qualitative and quantitative parameters which are necessary to be looked at regularly by the administration so the staff and professionals' time is devoted to providing patient care in an effective manner. 3. The course highlights the principles and practices involved in the planning, design management and planning consideration of entire projects to achieve the long term benefits 4. It also familiarizes students to cope with modern hospital dynamics and areas for continuous improvement through accreditation and standardization 5. To study the various critical components relating to organising the services and evaluating the services efficiency in terms performance management by measuring cost efficiency and quality assurance 6. After going through the course the scholars shall able to identify the key issues linked and associated with various operational areas and develop the research phenomenon.
<p><i>4.Course Content</i></p>	<p>Unit – 1 Principles of Health services management, Management process, key functions, Hospital as organisation; organisational structure, organisational integration – vertical and horizontal, complexities organisational policies and decision making process</p> <p>Unit - 2 Planning and consideration new projects; renovations, extensions and rehabilitations of existing hospitals; financial planning of projects, equipment planning and procurement (brand selection by market research), Medical Furniture and Consumables; Planning and Procurement of Medical Equipments, Instruments, consumables and non-medial items; Operations and Administration of the Stores; Pricing of the Packages and Services; Fund raising, Finding operator for health-</p>

	<p>care facilities, Working out for better lease options, Property search, Identify better term loans / PE/ JV as per organization needs;</p> <p>Unit-3 Cost, cost centers; cost drivers, cost allocation and apportionment, cost effective plans and cost reduction measures; creating cost consciousness; cost volume profit analysis; ABC/M, value chain analysis, target costing, life cycle costing, productivity analysis, measurement of healthcare quality costs; Analyzing patient's satisfaction and expectation feedback; Costing and packaging/re-packaging services; Market and competitor analysis; Pricing of services; Hospital service promotions; information management; change management-Stakeholder analysis, Communications plans, Setting implementation expectations and Providing useful project updates</p> <p>Unit -4 Preparing Standard operating procedures for various departments; Analyzing capacity utilization pattern of various hospital departments Clinical departments like O.T, ICCU, CSSD, Emergency, OPD, wards Support services like diagnostic services, housekeeping & laundry services etc.; Re -organizing departments; Analyzing capacity utilization of equipment and procurement planning; Implementation of hospital waste management system and procedure; Preparing hospitals forms and recording system (I-card, IPD, OPD record files and forms, consent forms etc); Medical record management: manual & computerized; information management; patient care quality, quality assurance, patient safety, patient rights; key successful performance indicators; performance improvement projects – principles and practice, Lean Six Sigma, and Business Process Re-engineering (BPR), workflow optimization</p> <p>Unit-5 Manpower planning; Recruitment; Designing compensation system; Employee performance evaluation system; identifying training needs and conducting training; employee development, addressing workforce shortage, role development, skill mix, role substitution, job rotation, work restructuring, effective job designing; contracting of services; HRIS; staff patient relations; physician relations</p>
5.Teaching and	Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme

<i>Evaluation Method</i>	<p>(moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</p> <p><i>Evaluation:</i>Online assignment for 70 percent and examination 30 percent during the contact programme.</p>
6.Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. S.L.GOEL, <i>Healthcare Management and Administration</i>, Deep & Deep Publications Pvt. Ltd., New Delhi. 2. Sakharkar BM, <i>Principles of hospitals administration and planning</i>, Jaypee Brothers publications. 3. Francis CM, Mario C de Souza: <i>Hospital Administration</i>, New Delhi, 2000.
Suggested Readings	<ol style="list-style-type: none"> 1. Madhuri Sharma, <i>Essentials for hospital support services and physical infrastructure</i>, Jaypee Brothers Publications. 2. Gerig Thomas, O. (1993). 'Hospital Waste Management', <i>Hospital Management International</i>, International Hospital Federation Yearbook, London 3. McGibomy, J.R. (1969). <i>Principles of Hospital Administration</i>, G.P. Putman's Sons NewYork 4. Mehtar, S. (1992). <i>Hospital Infection Control</i>, Oxford University Press, New York. 5. Owen J.K. (1962). <i>Modern Concept of Hospital Administration</i>, London 6. Standards India (1990). <i>Waste Management by Hospitals: Norms and Values</i>, Vol. 4, Bureau of Indian Standard, New Delhi, India. 7. Duncan, W.J.; 1995; <i>Strategic Management of Health Care Organisation 2nd ed.</i> - Cambridge : Blackwell Publisher. 8. Goel, S.L. and Kumar, R. (Ed.); <i>Hospital Administration and Management - Vol. I, II, III</i> / - New Delhi : Deep and Deep Pub. 9. Indian Society of Health Administration; 1986; <i>Managerial Effectiveness and Organisational Excellence and Organizational Health</i> Bangalore 10. Kovner, A.R. and Neuhauser, D; <i>Health Services Management</i> - Michigan : Health Adm. Press. 11. Long, A.F. and Mercer; 1983; <i>Manpower Planning In Shortell</i> S.M. and Kaluzny, A.D. <i>The National Health Services.- Health Care Management</i> - New York : John Wiley. 12. Rao, M.S.; 1992; <i>Health and Hospital Administration in India</i> -

	<p>New Delhi : Deep and Deep</p> <p>13. Srinivasan, S. (Ed).; <i>Management Process in Health Care</i> - New Delhi : Voluntary Health Association.</p> <p>14. World Health Organisation; 1989; <i>Management for Human Resources for Health</i> Geneva : W.H.O.</p> <p>15. Timmreck, Thomas; 1998; Developing Successful Performance Appraisals 48-57 <i>Health Care Management Review</i> Vol.23(3)</p> <p>16. World Health Organization; 1974; <i>Modern Management methods and the organization of health services</i>.- Geneva : W.H.O.</p> <p>17. Rowland, H.S. & Rowland B.L. (1984). <i>Hospital Administration: A Guide to Departments</i>, Aspen System Corporation, Rockville</p>
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HQM 6 Statistics for Healthcare Quality

1.Course Title	HQM 6 Statistics for Healthcare Quality
2. Rationale	<p>“If you can’t measure, you can’t improve”. Measuring health care quality is a difficult but interesting domain.” Volume of data is generated in health care system. But there is need of building the capacity in terms of analyzing data and interpreting trends. Basic understanding of statics and data processing is indispensable for quality practitioners.</p>
3.Learners’ Objectives	<ol style="list-style-type: none"> 1. To understand the basic vocabulary of statics 2. To develop basic quantitative aptitude for measuring and analyzing performance 3. Understand the concepts distribution and variance 4. To understand basic concepts of descriptive and inferential statistics. 5. To develop basic skill for using Microsoft excels for analyzing and presenting data.
4.Course Content	<p>Key definitions and vocabulary, Types of data and types of measurement scales, Concept of Nominal, Ordinal and Interval scale variables; Presentation of data- frequency distribution, histogram, frequency polygon, pie-diagram, bar, multiple bar charts, stack bar diagram, line diagram; Concept of data summarization: measures of Central Tendency; Concept of dispersion: measures of dispersion- Range, Variance, Standard Deviation, Coefficient of variation; Merits and demerits of different measures of dispersion. Moments Measures of Skewness and Kurtosis. Analysis of nominal and ordinal level data- contingency table, odds ratios. Statistical applications in epidemiology, Biostatistics in public health- Relevance.</p> <p>Basics of set theory, Events: exhaustive, mutually exclusive events, Concept of probability, Introduction to Normal distribution and its</p>

	<p>properties, applications of normal distribution.</p> <p>Introduction to the concept of correlation: Pearson correlation coefficient, and its properties; Spearman ranks correlation coefficient. Concept of linear regression, fitting of regression line to bi-variate data. Concepts in Inductive statistics: Population, sample parameter, and statistic. Sampling distribution of mean and standard error. Concepts of statistical hypothesis, critical region, level of significance, two types of errors and power of test. Testing statistical hypothesis and test of significance. Testing the difference of means and proportions: t-test for small samples and tests based on normal distribution for large samples. Testing the association of attributes and Chi-square goodness of fit. Demonstration and use of statistical softwares – SPSS, MS Excel etc.</p>
5. Teaching and Evaluation Method	<p><i>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</i></p> <p><i>Evaluation:</i> Online assignment for 70 percent and examination 30 percent during the contact programme.</p>
6. Reading List	
Essential Readings	<p>Bhaskarrao, T (2002): Methods of Biostatistics, Paras Publishing, Hyderabad.</p> <p>Dixon, W.J and Massey, F.J. (1983) Introduction to Statistical Analysis, 4th ed., New York, MC Graw Hill, 380-381, 534</p> <p>Dunn O.J, Clark V.A .Basic Statistics A primer for the biomedical sciences. 3rd edition, 2001.</p>
Suggested Readings	<p>K.R.Sundaram, S .N. Dwivedi, V. Sreenivas (2010). Medical Statistics, Principles And Methods, BI Publications, New Delhi</p> <p>B.Burt Gerstman (2008). Basic Biostatistics, Statistics For Public Health Practice, Jones And Bartlett Publication.</p> <p>K. Visweswara Rao (1996). Biostatistics , A Manual Of Statistics Methods For Use In Health, Nutrition And Anthropology, Jaypee Brothers, New Delhi.</p> <p>Dr.T.Bhaskararao (2002). Methods Of Biostatistics, Paras Publication ,</p>

	<p>Bangalore.</p> <p>Richard Mjaeger (1990) Statistics , A Spectator Sport . 2ndEdition , Sage Publications, New Delhi.</p>
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HQM 7 Hospital and Patient Safety

1.Course Title	HQM7 Hospital and Patient Safety
2. Rationale	Safety is an integral part of quality assurance and performance excellence. Safety involves three sections to be explored in terms of hospital fire safety and disaster management, employee safety and patient safety. This course envisages orienting a hospital management executive on the safety practices in a hospital.
3.Learners' Objectives	<p>After completing the course, the students shall able to</p> <ol style="list-style-type: none"> 1. Understand various components of hospital and patient safety 2. Understand safety fundamentals such as building safety, fire safety, disaster management, medical errors and adverse event reporting and other patient safe practices and employee safety <p>Participate safety preparation and ensure presence of safety protocols</p>
4.Course Content	<p>Hospital fire safety, disaster management, employee safety and occupation hazard prevention and OSHAS guidelines, disaster management plan and systems, safe organization systems, drills and performance measures, etc. Medical errors, near mis-errors, error reporting, adverse events, sentinel events, significance of event reporting, patient safety goals, infection control programs, patient rights, safety committees, patient safety systems like code blue, etc emergency management systems, plans, drills & performance measures, etc. Analysis of adverse events, assessmentbehaviorcaregivers, createculture of safety,decisiondisclosure,drugeffectiveenvironment; Err Is Human, ethicalevaluationfactors, improve patient safety, incident reporting, informed consent, employees injury, Institute of Medicine intervention involved IOM report issues, Joint Commission, Kaiser Permanenteleaders, leadershiplearning, Magnetmedical education, medical malpractice, physicians practice, Accreditation of Healthcare</p>

	<p>and patient safety, acute adverse drug events, adverse events Agency for Healthcare AHRQ, American Hospital Association assessment, clinical communication consumers, CPOE, critical care developed dose, elderly ensure evaluation, evidence-based medicine, JCAHO, Institute of Medicine, interventions ISMP issues, Leapfrog Group medical errors, Medicine mental health monitoring, multiple National Patient Safety, nosocomial infections, NPSF nurse staffing,</p>
5. Teaching Method	<p><i>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</i></p> <p><i>Evaluation: Online assignment for 70 percent and examination 30 percent during the contact programme.</i></p>
6. Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. William Charney (2000) Handbook of Modern Hospital Safety, Lewis Publications, London. 2. Barbara J Youngberg (2013). Patient Safety Handbook 2nd Edition. Jones And Bartlett Learning 3. David H Sells Jr (2000) Security In Health Care Environment, An ASPEN Publications 4. Russell I colling , tony w York (2010) hospitals and healthcare security, 5th edition. ELSEVIER publication
Suggested Readings	<ol style="list-style-type: none"> 1. Kimberly A. Galt, Karen A. Paschal 2010 Foundations in Patient Safety for Health Professionals, Publisher: Jones & Bartlett Publishers 2. Judith Healy, Paul Dugdale 2009 Patient Safety First: Responsive Regulation in Health Care, Publisher - Allen & Unwin 3. Eduardo Salas, Karen Frush 2012 Improving Patient Safety Through Teamwork and Team Training, Publisher: Oxford University Press 4. National Council of State Boards of Nursing 2009 Nursing Pathways for Patient Safety, Publisher: Elsevier Health Sciences 5. Committee on Data Standards for Patient Safety, Board on Health Care Services, Institute of Medicine, Editors: Philip Aspden, Janet M. Corrigan, Julie Wolcott, Shari M. Erickson, “Patient Safety: Achieving a New Standard for Care”, 2004 Publisher -

	<p>National Academies Press.</p> <p>6. Walshe, Kieran, Boaden, Ruth 2005 Patient Safety: Research Into Practice, Publisher: McGraw-Hill Education (UK).</p> <p>7. John Sandars, Gary Cook 2009 ABC of Patient Safety Volume 72 of ABC Series, Publisher - John Wiley & Sons</p> <p>8. OSHAS guidelines</p> <p>9. Pat Croskerry, Karen S. Cosby 2009 Patient Safety in Emergency Medicine M - Medicine Series, Publisher - Lippincott Williams & Wilkins</p> <p>10. Barbara J. Youngberg 2010 Principles of Risk Management and Patient Safety Publisher Jones & Bartlett Publishers</p> <p>11. Pascale Carayon 2011 Handbook of Human Factors and Ergonomics in Health Care and Patient Safety, Second Edition, Publisher - CRC Press</p> <p>12. Crossing the Quality Chasm</p> <p>13. To Err is Human</p>
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HQM 8 Research Methodology and Operations Research

1.Course Title	HQM 8 Research Methodology and Operations Research
2. Rationale	<p>Hospital manager requires taking decisions in different situation by different means. They usually depend on the data which have been created within the hospital (data base). Most of the decisions are taken with or without using appropriate tools and techniques; on the other hand they are expected to take action as early as possible so their decision should be faster and sound, hence they need to have right perspectives and ability to take decision based on the scientific methods. This course on Research methodology aims at developing a clear understanding of basics, theory, techniques and applications of research methods. It would equip the hospital managers with a scientific temper. It is designed for creative designing and conducting research which will help them to take right decision.</p>
3.Learners' Objectives	<p>1. familiarise with the methods of developing proposal which may be part of hospital management actions</p>

	<p>2. understand underlying procedures/techniques of Quantitative and Qualitative research methods to ensure reasonable frame work to conduct research</p> <p>3. use the statistical stools for analysis and managerial decision making at a meaningful level</p>
4.Course Content	<p>Part I Quantitative Research</p> <p>Introduction to research, research methods, types of research, positivism, Causation, Feminism; Quantitative and qualitative Research methods; Literature search and Review, variables - concept and variable, Construct, Constitutive and operational definition, Types of variables; conceptual framework; identification of research problems, setting research questions and objectives; establishing research hypothesis; testing of hypothesis; Methods of Measurement - Levels of measurement, Conversion of scales; Tools and Measurements - Interview schedule, Questionnaire, Tests and scales, Rating scales, Projective tests; Reliability and Validity of Instruments; Methods of controlling variance; Sampling design- Purpose of the sample, Types of sampling, Sampling and research design; Data collection and Data Analysis, tools and techniques; Descriptive Statistics, use of statistical tools, various types of statistical analysis, Statistical hypothesis, Test of significance, Parametric and non-parametric tests</p> <p>Part II Qualitative Research</p> <p>Introduction to qualitative research; basic steps in planning, designing and conducting qualitative research; Issues in quality, sampling, triangulation, and field work; Various methods employed in conducting qualitative research - interview, focus groups, observation and structured methods; combining qualitative and quantitative research approaches; Qualitative research data management-field notes, recording, observation, coding, analysing, interpreting data.</p> <p><i>Part III Ethical Issues in conducting a research</i></p> <p>Operations Research:Introduction: Scope and limitations of OR, concepts of OR; Introduction to OR Techniques: Linear Programming. Decision Tree Analysis. Queuing theory. Inventory control models.</p>

	Forecasting; Applications of OR in Hospitals and Health Agencies, Patient scheduling, etc
5. Teaching and Evaluation Method	<p>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</p> <p>Evaluation: Online assignment for 70 percent and examination 30 percent during the contact programme.</p>
6. Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. Mark Balnaves, Peter Caputi 2001 Introduction to Quantitative Research Methods: An Investigative, Publisher SAGE 2. W. Paul Vogt 2007 Quantitative Research Methods for Professional, Publisher Pearson/Allyn and Bacon 3. Joseph A. Maxwell 2012 Qualitative Research Design: An Interactive Approach: An Interactive Approach Applied Social Research Methods Publisher SAGE 4. Gupta C.B. 2008 Optimization Techniques In Operation Research, I. K. International Pvt Ltd
Suggested Readings	<ol style="list-style-type: none"> 1. Gale, M., & Robert, D. (ed). (1997). <i>Context and Method in Qualitative Research</i>. New Delhi: Sage Publication. 2. Bryman, Alan., & Bell, Emma. (2010). <i>Business Research Methods</i>. 2nd ed. Oxford University Press. 3. Creswell, John W . (2009). <i>Research Design: Qualitative, Quantitative, and Mixed Methods Approaches</i> 3rd ed. Los Angeles: Sage Publications Inc 4. Abbas, Tashakkori., & Charles, Teddlie. (2002). <i>Handbook of Mixed Methods in Social and Behavioural Research</i>. Sage Publication Inc. 5. Abbas, Tashakkori., & Charles, Teddlie. (2008). <i>Foundations of mixed methods research: Integrating quantitative and qualitative approaches in the social and behavioural sciences</i>. Sage Publication. 6. Kothari, C.R .(1985). <i>Research Methodology : methods and</i>

	<p><i>techniques</i>. New Delhi:Willey Eastern Ltd.</p> <p>7. Gupta, S. (1999). <i>Research Methodology and Statistical Techniques</i>. New Delhi: Deep & Deep Publications.</p> <p>8. Harry F. Wolcott. (2009). <i>Writing up qualitative</i>. 3rd Ed. Sage Publication.</p> <p>9. Jerry, W.Williams. (2007). <i>Foundations of Qualitative Research interpretative and Critical Approaches</i>. New Delhi:Sage Publication.</p>
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HQM 9 Ethics, Values, Governance, Legal Framework, and Patient rights

1.Course Title	Ethics, Governance and Legal Framework and Patient rights
2. Rationale	Hospital is the most complex organization, which provides wider context of environment setting. The day today functions of hospitals are strongly associated with emergency and other critical decision making. The people work in the organization is carrying with different levels of knowledge, variety of skills, and different attitude. Further the power and influence of organizations, the rapid spread of new technologies and the impact of various socio-economic and political factors, have attracted increase attention to the concept of ethics, governance, and right legal framework being focused on the ethical behavior and the decisions and actions of managers and staff.
3.Learners' Objectives	<ol style="list-style-type: none"> 1. Orient towards the concept of law, types of classifications of law, relevant portion of the general laws and the specific laws applicable to health care, and the ethical aspects of different health care professionals 2. Analysis critically the ethical and governance issues in the organization and contribute the organizational business development within the ethical frame work and adopt to personal career in long term 3. Understand necessity of documentation and confirmation from the patient of view with regard to patients rights, professional

	<p>commitments and obligations to patients.</p> <ol style="list-style-type: none"> 4. Aware of the ethical responsibilities thereby enabling them to identify and resolve ethical issues or conflicts throughout their career. 5. Incorporate the necessary bounding moral and ethical conduct, legal provisions and implementing policies, rules and regulations within the organization efficiently, effectively and ethically 6. Orientation towards statutory requirements and licenses required for hospital operation and quality certification/Accreditation. 7. Able to understand the importance of patient voice, patient rights and maintaining dignity of patients 8. Able to contribute improved satisfaction to the patients by adopting patient rights as matter of practice and culture
4.Course Content	<p>Part I Ethics, Values and Governance</p> <p><i>Unit 1– Introduction to Ethics, Values and Governance</i></p> <p>Concepts of ethics, morality, human rights law, governance and legal aspects, relationship with ethical governance and legal aspects in healthcare, scope of governance, Agency relationships and theories, organisation mission, vision, goals and management structure, compensation of executives, approaches to governance, corporate governance and corporate social responsibilities; values and value systems in healthcare services.</p> <p><i>Unit 2 Organisational Governance and ethics</i></p> <p><i>Ethical issues and management</i> – management and employee relations, ethical decision making criterion, consistency in decision making and implementation, confidentiality, information sharing, marketing strategies, employee safety, welfare, working conditions, positive work environment, work life balance, patient welfare, infection control, management of bio waste; <i>Internal control and review</i> - Management control systems in corporate governance - day to day managerial issues – procurement, influential networking, financial goal, patent and copy infringement, cost recovery, quality of care, standardisation, diversity management, employee privacy issues, Communication systems (email, correspondence, and other personal and professional aspects), medical</p>

	<p>issues and health check up,</p> <p><i>Unit 3 Professional ethics and Governance</i></p> <p>Professional code of ethics - Code of ACHE, Hippocratic oath and Medical council of India ethical code, organisational ethical manual (guidelines for decision making), Ethical theories;</p> <p>Professional values and ethics - Different approaches to ethics and social responsibility; Professions and the public interest; Conflicts of interest and the consequences of unethical behaviour-negligence, malpractice, quality care, cut and commission practice, patient referral system role of ethics committee</p> <p><i>Unit 4 Cliental ethics and Governance</i></p> <p>Equity, access, pricing strategies; doctor's and patient's relationship, guidelines on patient rights and patient safety</p> <p>Part II Legal Framework</p> <p><i>Unit-1 Overview of Essential Law</i> – Provisions of Indian Constitution, Indian Penal Code, Law of Torts, Law of Contract, Law of Evidence, Trust Laws, Commercial Law, Law of Taxation</p> <p><i>Unit-2 Overview of Healthcare Laws:</i> Organ Transplant Act, Medical Termination of Pregnancy Act, Clinical Establishment Act, Regulation of pre-natal diagnostic tests, The Drugs Price Control Order, Rules relating to Blood Bank, International Certificate of Death, Bombay Nursing Home Act, and readings of other laws as per references.</p> <p><i>Unit-3 Overview of Medical Liability:</i> Consumer Protection Act; Concepts of consent; confidentiality; medical negligence and medical malpractices; medico legal cases – procedures to handle medical legal cases, police investigations and court deliberations, death certificates; Court procedures attendance in court, Important cases and special Problems, Liability; Risk Management; Forensic issues – insensitive to forensic procedures, examination of sexual abuse, reporting of forensic information including inadequate medical report of sexual abuse, medical examination of child victims and sexual abuse and court procedures</p> <p><i>Unit-4 Overview of Environmental Laws:</i> Biomedical Waste Management Rules, Environmental Clearance for new Healthcare</p>
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	<p>projects. Hospital licensing - blood bank, radiation safety, pollution board, waste management, etc.</p> <p>Part III Patient Rights</p> <p>Patient rights meaning and definition, patient right guidelines NQAS, WHO, NABH, JCI, and other accreditation bodies, grievances and redressal, discrimination and non-discrimination, hospital accountability, transparency, access to service, information and other guidance, participation in decision making, informed decisions, consent, confidentiality and treatment methods and progress, financial liability, affordability and accountability, seeking emergency services in priority, legal rights and claims, protection from injuries and harmful effect such as radiation, bio medical hazards, hospital acquired infection, etc.</p>
5. Teaching Method	<p><i>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</i></p> <p><i>Evaluation: Online assignment for 70 percent and examination 30 percent during the contact programme.</i></p>
6. Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. Verma S K and Srivastava S C (2002) Legal frame work for healthcare in India 2. George J. Annas, The Rights of Patients The Authoritative ACLU Guide to the Rights of Patients, Third Edition 3. Basu R N and Bose T K (2005) Meco Legal aspects of clinical and Hospital Practice 4. Mason and McCallsmith (2010) Law and Medical Ethics, Oxford University press 5. Antrewns K ed (1989) Ethics in practice: managing the moral corporation, Harvard business school press, Boston
Suggested Readings	<ol style="list-style-type: none"> 1. Amar, J. (1996). <i>Laws and Health Care Providers. A study of Legislation and legal aspects of health care delivery</i>, CHEAT 2. WHO. (1969). <i>International Health Regulations</i> 3. Indian Penal Code, Indian Evidence Act, Law of Contract, Consumer Protection Act, MTP Act, PNDT Act, Organ

	<p>Transplant Act, Mental Health Act, Drugs and Cosmetic Act, Bombay Nursing Home act, Biomedical Waste rules, Ethical principles of Medical Council of India, Homeopathic Medical Council Act, Indian Medical Council Act, Dental Council Act, Pharmacy Act, Environmental Protection Act, Prevention of food and Drugs Act, Epidemic Act, Workmen Compensation Act, HIV Bill, Drugs and Magic Remedy Act, Marriage Registration Act, Clinical Establishment Act, law of contract, companies Law, Medical council Law - Ref: Website – nic.com</p> <p>4. Chaube, R.K. (2000). <i>Consumer Protection and the Medical Profession</i>. Jaypee Publishing: New Delhi.</p> <p>5. Steven, D. Edwards. (1996). <i>Nursing Ethics, A Principle Based Approach</i>. London: Macmillan Press Ltd.</p> <p>6. Hurt Darr (1985) ethics for Health Service Managers, American Hospital Administrators</p> <p>7. Rober D Miller, Rebeka C Hutton (2004) Problems in Health care Law, Jones and Barlett</p>
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HQM10 Healthcare Performance and Quality Indicators

1.Course Title	HQM10 Healthcare Performance and Quality Indicators
2. Rationale	Quality is a journey and Quality management advocates continual improvement. Hence necessary to collect data, data that is relevant, structured and has well defined measures to ensure continual improvement and inculcate evidence based improvement practices. This course envisages building a quality practitioner on approaches to defining healthcare performance measures & its data collection methods.
3.Learners' Objectives	<ol style="list-style-type: none"> 1. Orientation on different type of indicators including clinical and service quality indicators 2. Understanding of process of developing indicators and their implementation at healthcare facilities. 3. Understand to define a clinical criterion, standard & its

	<p>performance improvement approach.</p> <ol style="list-style-type: none"> 4. Understating issues with data quality and reporting 5. Understanding methodology for Benchmarking and monitoring of Indicators
4.Course Content	<p>Classification and Types of hospital indicators (Productivity, Clinical Care, Efficiency and service quality), Structure, process and outcome indicators, Key Performance Indicators, Critical Success factor analysis indicators of NQAS, JCI, NABH, CAP, NICE Foundation, NHS, etc, Run Charts, Benchmarking tools and techniques, Quality Dashboards, Trend Analysis, Evidence based decision making. Balanced Score Card, cost management and its implications, indicator and its role in transparency in healthcare results for all stakeholders, role of information technology and its potential in developing indicators, outcome indicators to offer evaluation of feedback for further performance improvement.</p>
5.Teaching and Evaluation Method	<p><i>Teaching methods consists of two modes:</i> 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</p> <p><i>Evaluation:</i> Online assignment for 70 percent and examination 30 percent during the contact programme.</p>
6.Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. Donald E Lighter (2011) Advanced Performance Improvement In Healthcare, Principles And Methods, Janes And Bartcett Publishers. 2. Christopher J.L Murray, David B Evans(2003) Healthsystem Performance Assessment, World Health Organisation. 3. Bustin, Greg, 2014 Accountability The Key to Driving a High-Performance Culture
Suggested Readings	<p>Blazey, Mark L 2015 Insights to Performance Excellence 2015–2016 Understanding the Integrated Management System and the Baldrige Excellence Framework</p> <p>1Mohanakrishnan. S 2014 The Way to The Practice of Total Quality Management</p> <p>2Improving Your Measurement of Customer Satisfaction</p> <p>Vavra, Terry 1999 G.A Guide to Creating, Conducting, Analyzing, and Reporting Customer Satisfaction Measurement Programs</p>

HQM11 Healthcare Quality Management Tools and Techniques II

1.Course Title	HQM11HealthCare quality management Tools and Techniques II
2. Rationale	Quality Management is ever evolving knowledge domain. A quality champion should be aware of recent developments and advanced tools and techniques for quality management. This would enable them understand the advanced tools and methodizes for quality improvement & Management
3.Learners' Objectives	<p>1. Understand the advanced tools and methodizes for quality improvement & Management</p> <p>2. To learn quality tools used in other industries like manufacturing, aviation etc for quality and safety</p>
4.Course Content	<p>Documenting and defining a process, process defined, the feedback loop, examples of process, documenting a process; Advanced tools stabiling and improving, process with control charts, Cause of variations, control charts; attribute control charts, variables control charts PDCA cycle, X-bar, R charts; out of control charts, diagnosing a process, brainstorming, cause and effect diagram, root case analysis, Pareto chart; specifications, process capacity and capability analysis; Mistake Proofing (Poka Yoke), Rapid Improvement Events, Value stream mapping, DMAIC, Kiazen, 5S, Design of Experiment (DOE),</p> <p>Failure mode effect analysis (FMEA), Analytical Hierarchy Process (AHP), Reliability testing, A5 methodology, Lean, lean six sigma, cost approach and six sigma, lean six sigma and Organisational performance; benchmarking high performing six sigma organisation, lean integration in to DMAIC, application of lean six sigma in hospitals, lean six sigma certification and belt levels; 100 methods of TQM.</p>
5.Teaching and Evaluation Method	<p><i>Teaching methods consists of two modes:</i> 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</p> <p><i>Evaluation:</i>Online assignment for 70 percent and examination 30 percent during the contact programme.</p>

6. Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. Rose, Kenneth H 2014 Project Quality Management Why, What and How, PMP Second Edition 2. Imbler, Ken 2005 Get It Right (e-Book), A Guide to Strategic Quality Systems 3. Baldrige Excellence Builder: Key Questions for Improving Your Organization's Performance - 10 Pack by Baldrige Performance Excellence Program at NIST <p>Executing Lean Improvements in Healthcare: A Practical Guide with Real-World Case Studies by Dennis Delisle</p>
Suggested Readings	<ol style="list-style-type: none"> 1. A Lean Healthcare Guide 2. LA Lean Healthcare Guide 3. Lean Six Sigma Healthcare 4. Measuring Quality Improvement in Healthcare 5. Improving Healthcare with Control Charts 6. Facilitation at a Glance! Third Edition - Bens, Ingrid (2012) 7. Executing Lean Improvements in Healthcare: A Practical Guide with Real-World Case Studies - Dennis Delisle (2015) 8. Blindsided - Blythe, Bruce T.; Noakes-Fry, Kristen (2014) 9. Accelerating Health Care Transformation with Lean and Innovation - Plsek, Paul E. (2013) 10. Lean Healthcare Deployment and Sustainability - Dean, Mark L. (2013) 11. Diagnosing and Changing Organizational Culture - Cameron, Kim S.; Quinn, Robert

HQM 12 Quality Documentation

1. Course Title	HQM8 Quality Documentation
2. Rationale	Knowledge is complete only when theory is integrated with practice. Hence a skill building course on how to implement quality management systems and documentation procedures in a hospital. This course envisages building a hospital management executive on the skills required to prepare quality manual & develop good quality management systems & documentation procedures.
3. Learners' Objectives	<p>After completing the course</p> <ol style="list-style-type: none"> 1. Able to understand the importance, and significant contribution of documentation towards patient care 2. Able to understand the documentation as process which govern

	<p>ethics, governance and legal systems</p> <p>3. Able to develop effective and efficient documentation practice within the hospital</p> <p>4. Able to prove the presence of quality through adequate documentation during the healthcare delivery</p>
4.Course Content	<p>Meaning and definition of Documentation, importance of documentation in hospitals, method of documentation, essentials aspects, and key aspects of documentation, documentation of practice chief complaint, Defining quality policy, preparing quality manual, QA and QC protocols, SOPs, understand priorities in quality manual when hospital has two certifications like ISO & NABH; Documents & records, ISO documentation, accreditation documentation, patient safety manual hospital safety manual, etc; clinical code, complete system review, patient condition, consultation COPD, counseling, diagnosis code, documentation guidelines, inpatient key components, medical decision medical, necessity medical record department, morbidity without treatment, mortality without treatment, operative record management, ensure ethics in documentation, flowchart, documentation of indicators, clinicians communication, confidentiality, medico legal documentation, discharge disclosure, discharge summary Documentation Error, documentation of patient, Documentation Problem documenting, patient duty electronic medical records, employees evaluation, evidence examination and intervention, health recordshealthcare delivery, healthcare malpractice, healthcare organization hearsay, HIPAA Hospital incident report, and methods, service delivery, quality documentation; information to be documented admission, Affected body area, social history, anesthesiaarea or organassessment, brief history of patients.</p>
5.Teaching Method	<p><i>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</i></p> <p><i>Evaluation: Online assignment for 70 percent and examination 30 percent during the contact programme.</i></p>
6.Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. Gabrielle M. Kotoski , Contributors Melinda S. Stegman, Bruce Alan Mann1994 Physician Documentation for Reimbursement, Publisher: Jones & Bartlett Learning 2. Lippincott Williams & Wilkins 2008 Complete Guide to Documentation, Publisher: Lippincott Williams & Wilkins 3. Patricia W. Iyer, Barbara J. Levin, Mary Ann Shea 2006 Medical Legal Aspects of Medical Records, Publisher: Lawyers & Judges Publishing Company 4. Wendy Bircher 2013 Documentation for the Physical Therapist Assistant, Publisher - F.A.

Suggested Readings	<ol style="list-style-type: none"> 1. Jcr, Joint Commission Resources 2012 Comprehensive Accreditation Manual for Critical Access Hospitals, Publisher: Joint Commission Resources 2. Ronald W Scott 2011 Legal, Ethical, and Practical Aspects of Patient Care Documentation: A Guide for Rehabilitation Professionals, Publisher- Jones & Bartlett Publishers 3. Patricia W. Iyer, Barbara J. Levin, Mary Ann Shea 2006 Medical Legal Aspects of Medical Publisher: Lawyers & Judges Publishing Company 4. Ronald W. Scott 2006 Legal Aspects of Documenting Patient Care for Rehabilitation Professionals, Publisher: Jones & Bartlett Learning
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HQM 13 Healthcare Leadership and Change Management

1.Course Title	HQM13Healthcare Leadership and Change Management
2. Rationale	Public health organisations are usually loaded with many challenges and responsibilities. This requires strong and firm approach to handle them. On the other hand, the leadership present in the hospitals are not trained enough to handle these issues. Due to inadequate leadership, it is seen the service quality simply lacking. Also hospitals ability to achieve the better resources utilization, efficiency and effectiveness is lacking due to inadequate presence of leadership in the hospitals. Professional leadership training provides adequate confidence level to face the challenges and bring necessary changes in the hospital. This course offers valuable insights to candidates to develop the leadership skills.
3.Learners' Objectives	<p>After completing the students able to</p> <ol style="list-style-type: none"> 1. Obtain leadership skills and abilities to achieve Organisational mission, goals and objectives and also influence governing structures. 2. Bring necessary changes in healthcare settings, develop the organisation towards patient friendly and effective and efficient use of resources 3. Organize teams, team management and team building and also motivate teams and improvequality through team based initiatives 4. Establish quality policies and initiatives anddemonstrate the use of quality improvementmethodologies

	5. Adopt necessary quality improvement tools and prepare the workforce to achieve the same.
4.Course Content	Meaning and Definition of Leadership, leader versus manager, Leadership qualities, theories of leadership, Leadership and change; Leaders role in change management and quality improvement; Critical Systems thinking – systems thinking, systems theory, systems thinking mindset, benefits of systems thinking; leadership styles; The Systemic Leadership Approach – systematic leadership, systematic leadership is an activity, capacity versus capability, role of leadership versus role of authorities, task of systematic leadership; Leadership and Ethics – new realities ethics, new realities bring different value tension; Adaptive Leadership and Strategy Formation
5.Teaching and Evaluation Method	<i>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</i> <i>Evaluation:</i> Online assignment for 70 percent and examination 30 percent during the contact programme.
6.Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. Annabel Beerel 2009 Leadership and Change Management, SAGE 2. Nancy Borkowski(2011)Organisation Behaviour, Theory And Design In Health Care. Janes And Bartcett Publishers. 3. Jean Hartley, John Benington 2010 Leadership for Healthcare, Policy Press 4. Neil Gopee, Jo Galloway 2013 Leadership and Management in Healthcare, SAGE
Suggested Readings	<ol style="list-style-type: none"> 1Palmer, Brien 2003Making Change Work, Practical Tools for Overcoming Human Resistance to Change 2Austin Ross, Frederick J Werizel And Joseph W Mitlyseg (2002)Leadership For The Future, Core Competencies In Healthcare, AUPHA Publication 3Merrill, Peter 2008 Innovation Generation (e-Book)Creating an Innovation Process and an Innovative Culture

HQM14 Advanced Statistics for Quality Management

1.Course Title	HQM 14 Advanced Statistics for Quality Management
2. Rationale	Leaders in Quality should have advanced skills to analyze information and use it for quality improvement. One of the major challenges in improvement sciences is attribution of causality for certain phenomenon. Understanding of analytical statistical tool can make critical difference in

	our approach to improving health care quality.
<i>3.Learners' Objectives</i>	<ol style="list-style-type: none"> 1. Understand basic concepts of Inferential Statistics 2. Applicability of statistical tools in hospital operations and quality improvement 3. Skills for using statistical packages- SPSS/Minitab/SAS
<i>4.Course Content</i>	Analysis of Variance and Covariance, Concept of dependent and independent variables; Introduction to Multivariate Analysis; Concept of multi-variate regression; logistic regression; Multiple and Partial correlation coefficients; Multilevel Analysis and its application; forecasting; Non Parametric test; Fisher's exact test, Use of SPSS for data analysis.
<i>5.Teaching and Evaluation Method</i>	<p><i>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</i></p> <p><i>Evaluation:</i>Online assignment for 70 percent and examination 30 percent during the contact programme.</p>
<i>6.Reading List</i>	
Essential Readings	<ol style="list-style-type: none"> 1. Denis Anthony 1999 Understanding Advanced Statistics: A Guide for Nurses and Health Care Researchers, Churchill Livingstone 2. Ian Scott, Deborah Mazhindu 2014 Statistics for Healthcare Professionals: An Introduction 3. James E. Veney, John F. Kros, David A. Rosentha 2009 IStatistics for Health Care Professionals: Working With Excel, Volume 9 of Public Health/Epidemiology and Biostatistics, John Wiley & Sons
Suggested Readings	<ol style="list-style-type: none"> 1. George Argyrous (2000) Statistics For Social And Health Research With A Guide To SPSS. SAGE PUBLICATION , New Delhi 2. David Brwers(2002)Medical Statistics From SCRATCH John WilkeyAns Sons ,Ltd. 3. Marcello Pagano, KimberleeGauverau (2000) Principles Of Biostatistics, 2nd Edition, Brooks Cole, Canada

HQM 15 Quality Management in Primary Care and National Health programs

1.Course Title	HQM15Quality Management in Primary Care and National Health Programs
2. Rationale	<p>“Health for all” includes provision of quality preventive and promotive health services to the community apart from hospital based curative care. These services are majorly provided by Pubic Health System through national health programsand chain of primary health centers and sub health centers. Though much information and operational know how have been evolved for quality management of hospital based curative services, quality management in Preventive and promotive care is still a nascent knowledge domain. This course will enable quality practitioners develop quality management systems for Primary care and National health programs.</p>
3.Learners’ Objectives	<ol style="list-style-type: none"> 1. Understand the scope and processes under National health programs 2. Develop skills to see preventive and promotive care processes with a quality practitioner perspective 3. Applying quality tools and methodologies for Quality improvement in Primary care 4. Monitoring and supportive supervision of large scale national health programs 5. Convergence and coordination in National Health Programs 6. Develop skills for Strategic Planning and Prioritization for Public Health Programs 7. Understanding of process of developing and analyzing public health indicators
4.Course Content	<p>Scope and Key process of National Health Programmes Communicable Diseases</p> <ol style="list-style-type: none"> 1. National Vector Borne Diseases Control Programme (NVBDCP) 2. Revised National Tuberculosis Control Programme 3. National Leprosy Eradication Programme 4. National AIDS Control Programme 5. Universal Immunization Programme 6. Integrated Disease Surveillance Programme <p>Programmes for Non Communicable Diseases</p> <ol style="list-style-type: none"> 1. National Mental Health Program 2. National Program for Control and treatment of Occupational

	<p>Diseases</p> <ol style="list-style-type: none"> 3. National Program for Control of Blindness 4. National program for control of diabetes, cardiovascular disease and stroke 5. National program for prevention and control of deafness <p>National Health Policies</p> <ol style="list-style-type: none"> 1. National Health Policy 2015 2. National Population Policy 2000 3. National AIDS control and Prevention Policy 4. National Blood Policy 5. National Policy for empowerment of Women 2001 6. National Charter for Children <p>Process mapping for primary care, daily management at sub center, public health program design and deployment, indicators for public health programs, quality assessment of national health programs, community focused programs management, process improvement in resource constrain settings applying quality tools in primary care settings, benchmarking for primary care, quality assurance processes in Public health laboratories, quality management of community health workers and outreach programs.</p>
5. Teaching Method	<p><i>Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.</i></p> <p><i>Evaluation:</i> Online assignment for 70 percent and examination 30 percent during the contact programme.</p>
6. Reading List	
Essential Readings	<ol style="list-style-type: none"> 1. Operational Guidelines for National health programs 2. Assessors guidebook for PHC & CHCs
Suggested Readings	<ol style="list-style-type: none"> 3. The Public Health Quality Improvement Handbook – ASQ
<p>Scope and Key process of National Health Programmes Communicable Diseases</p> <ol style="list-style-type: none"> 7. National Vector Borne Diseases Control Programme (NVBDCP) 8. Revised National Tuberculosis Control Programme 9. National Leprosy Eradication Programme 10. National AIDS Control Programme 11. Universal Immunization Programme 12. Integrated Disease Surveillance Programme <p>Programmes for Non Communicable Diseases</p> <ol style="list-style-type: none"> 6. National Mental Health Program 7. National Program for Control and treatment of Occupational Diseases 	

8. National Program for Control of Blindness
9. National program for control of diabetes, cardiovascular disease and stroke
10. National program for prevention and control of deafness

National Health Policies

7. National Health Policy 2015
8. National Population Policy 2000
9. National AIDS control and Prevention Policy
10. National Blood Policy
11. National Policy for empowerment of Women 2001
12. National Charter for Children

Process mapping for primary care, daily management at sub center, public health program design and deployment, indicators for public health programs, quality assessment of national health programs, community focused programs management, process improvement in resource constrain settings applying quality tools in primary care settings, benchmarking for primary care, quality assurance processes in Public health laboratories, quality management of community health workers and outreach programs.

Teaching methods consists of two modes: 1. Intensive self- reading, establish discussion with course teachers through online programme (moodle), feedback from the course teacher on online assignment while away from the class room. 2. During the contact programme: class room lectures, individual and group based case analyses, collective viewing of film(s) followed by debates and discussions.

*Evaluation:*Online assignment for 70 percent and examination 30 percent during the contact programme.

Project Work

Project should be any practical implementation of Quality management related learning from the course in a hospital (at their work place). Students are expected to select a topic for project work from the list of topics or based on their experience and interest. Further the topic selected by the student shall be approved by the guide and project coordinator. The primary objective of the project is to enhance student ability to recognize the problems and find the solution for such problem based on the scientific methods which they learn during the class. Further detailed guidelines (the objective, rationale, sample list of topics, guides, methods of doing the project, relationship with guide, supervision, submission deadlines, evaluation, etc.) will be provided during the contact classes. The project work shall be evaluated in two phases. The first phase is expected to cover up to data analysis which carries 2 credits. The second phase shall cover the submission of final project report which carries 2 credits. There is clear timeline between these two phases and the student shall be

notified in this regard. Each student shall work under two guides one from the faculty of the institute and one from the field as co guide