



**PRAVARA INSTITUTE OF MEDICAL SCIENCES  
(DEEMED TO BE UNIVERSITY)**

**Loni, Tal. Rahata, Dist. Ahmednagar 413736  
NAAC Re-accredited with 'A' Grade**

**SYLLABUS**

**Post Doctoral Fellowship in Health Policy, Planning & Health Economics  
(Dept. of Community Medicine)  
(Dr. Balasaheb Vikhe Patil Rural Medical College)  
(Academic Council Meeting Dated 28<sup>th</sup> October 2021)**

**TITLE: POST DOCTORAL FELLOWSHIP IN HEALTH POLICY, PLANNING  
& HEALTH ECONOMICS**

**PREAMBLE:**

Health and health care development has not been a priority of the Indian state. This is reflected in two significant facts. One, the low level of investment and allocation of resources to the health sector over the years – about one percent of GDP with clear declining trends over the last decade. And second the uncontrolled and very rapid development of an unregulated private health sector, especially in the last two decades. The functioning of health sector in India was on the basis of five year plan till 1983 when first ever National health policy had come into existence.

In line with National Health Policy 2002, the National Rural Health Mission (NRHM) was launched on 12th April 2005 with the objective of providing accessible, affordable and quality healthcare to the rural population. It sought to re-invigorate the system of health care delivery through a comprehensive outlook. It seeks to bring about architectural correction in the Health Systems by adopting the following main approaches- Increasing involvement of communities in planning, management of healthcare facilities, improved programme management, flexible financing and provision of untied grants, decentralized planning and augmentation of human resources. Subsequently NRHM is now changed to National Health Mission (NHM). Recently GOI has announced national health policy 2017. Seventeen Sustainable Development Goals by United Nations (2017-2030) are influencing various nations to prioritize their needs and budget allocations for overall development of country.

However, we need to achieve many targets as compared to developed world, this may be possible for need bases, realistic, strategic, effective, and efficient policy and planning. This course will generate the human resource who will able to prepare an effective and efficient health policy and plans so as to achieve goals and targets set by the country.

Post Doctoral Fellowship in  
Health Policy, Planning and Health Economics

**Duration of Course:** One year certificate course

**Objectives of Course:** At the end of course participant should be able to draft health policy, do health care planning and economic evaluation

**Course content:**

- **Health Policy**

Sr. No.	Topics
1	National Health Policy 2017; Determinants of NHP
2	Public Health Systems and its Issues
3	Legal and Ethical aspects of public health and health services
4	Policies of improving health status of the population
5	Policy for strengthening health care at hospital and health centres
6	Quality and performance improvement concepts to address organizational performance issues
7	Critically review of health policies existing in India
8	Methods of communicating health policy issues
9	Policy writing skills for building partnerships
10	Monitoring and evaluation tools for analyzing the effectiveness of health policy
11	Systems thinking for resolving organizational problems

- **Health Planning**

Sr. No.	Topics
1	Factors contributing health planning (Social, behavioural, environmental, and biological)
2	Evaluation of public health programme (Goal, Objectives, Activities, Outcomes)
3	Planning Cycle
4	Development of health plan to enhance community participation
5	Principles of strategic planning and marketing to public health
6	Work scheduling and job responsibilities for health workers
7	Reporting and Assessment of evaluation of public health programme

- **Health Economics**

Sr. No.	Topics
1	Determinants of health care costing and budget allocation
2	Critical review of National Health & district health accounts
3	Community health care financing proposal
4	Budget programming and cost analysis
5	Health expenditure evaluation of the service
6	Cost reduction of health care services
7	Application of cost/expenditure evaluation analysis

Unit	Topic	Period	Hours of learning	Credits
<b>First Semester</b>				
I	Health Policy	3.0 months	105(theory 15+SDL / visits/ assignments-90)	4
II	Health Planning	2.5 months	105(theory 15+SDL / visits/ assignments-90)	4
<b>Second Semester</b>				
III	Health Economics	2.5 months	105(theory 15+SDL / visits/ assignments-90)	4
IV	Project (s) & postings	3.5 months	90	3
	Total	11.5 months	405	15

**\*Logbook will be maintained by fellow giving details of lectures/seminars/projects/Postings/visits to different institutions.**

**Teaching Strategies:** The one-year course is organized into two teaching Semesters. A total 200 working days will be available for teaching, learning and evaluation in one year. Considering the TLE contact of six hours per day, the total TLE contact hours will be 405 hours. It is further divided as 45 teaching hours i.e. 360 hours will be devoted for classroom sessions and 360 hours will be assigned for outside the classroom sessions (Practical training, field visits, project work and placements).

One credit will be equal to 15 hours of theory and 30 hours of practical/field visit/project work. Thus there will be 15 credits for this course.

**Assessment procedure:** one project work and viva voce

**Fee structure:** 10000/- (Ten thousands only) INR

**Eligibility criteria Indian student/Foreign students:** Master's degree in any health discipline (Medicine, Dental, Nursing, Physiotherapy from recognized Indian university or an equivalent qualification of foreign university recognized by UGC. Preference will be to In-service at PIMS-DU.

**Intake capacity:** Maximum 4 per year

**Eligibility Criteria of course coordinator/mentor/teaching staff:**

Sr. No.	Name of the faculty	Qualification	Experience
1.	AVM(Retd) Dr.Rajvir Bhalwar	MD Community Medicine, PhD	40 Yrs.
2.	Dr. D. B. Phalke	MD Community Medicine	30 Yrs.
3.	Dr. Mandar Baviskar	MD Community Medicine	5 Yrs

**Exam scheme and results:**

Eligibility: Attending 75% of theory & practical sessions and completion of project is MANDATORY for appearing for examination.

Pattern:

Sr. No.	head	maximum marks	minimum marks
1	Project presentation	100	50
2	viva on health policy, planning and economic evaluation	100	50
<ul style="list-style-type: none"> <li>Criteria for passing-minimum 50 % marks in each head</li> </ul>			

**Details of syllabus and reference books:**

## HEALTH POLICY

### 1. Introduction:

- Definition, health policy context, social context.

### 2. Determinants of policies

- The socio-economic situation, demography, mortality and morbidity, nutrition, water and sanitation, access to health care , health care delivery and resources , health needs and challenges

### 3. Developing Policies

- Mission, vision,
- Guiding principles, strategic approaches & models
- Health as a universal human right, equity, gender and poverty focus
- Efficiency and sustainability, accountability, decentralization, primary health care, partnerships
- Policy objectives

#### **4. Areas and types:**

- Organizational policy (central level, operational levels)
- The tier system of health care delivery
- Health services
- Human resources
- Health care financing
- Infrastructure, Technology, Pharmaceuticals and medical supplies
- Health information system
- Governance and leadership
- Health research and development,
- Evidence based policy

#### **5. Monitoring and evaluation**

- The basic monitoring framework
- Performance evaluation and reviews

#### **6. Ethical issues**

- Legislation ,regulation of service provision ,technical standards
- Licensing, ethical standards and research, peer review boards

#### **7. Various health and related policies in India.**

#### **8. Way forward**

- Assumptions ,risks, institutional arrangements ,capacity building funding and resources

#### **References:**

- WHO Regional Office for the Western Pacific, Health Policy Development. – A handbook for pacific Island practitioners, 2006
- Maxcy –Rosenau- Last, Public health and preventive Medicine- Health care planning, organization and evaluation, 15<sup>th</sup> Edition, pp 1215-1280
- Michel Graffin. How to develop a policy.
- Page, Stephen. Establishing a System of Polices and Procedures.
- Westerville, Ohio: Process Improvement Publishing, 2002.
- Heather Gardner ( edit) Health policy development, implementation and evaluation in Australia, Churchill Livingstone , 1991
- Epidemiology and management for health care for all by Dr.P.V.Sathe

- National health policy 2017 document,GOI
- Sustainable development goals by UN
- National health programs by Dr.J.Kishore

### **HEALTH PLANNING**

- Introduction: Definition, concepts and notions
- Pre-requisite for planning
- Determinants of planning
- Strategic planning
- Planning process
- Need assessment including stakeholder analysis
- Health resources
- Formulating objectives and prioritization
- Work schedules and job responsibilities
- Implementation strategies
- Supervision, monitoring
- Evaluation techniques
- Use of evaluation for further improvement.

### **References:**

- Planning and assessing health workers activities- PHC map Module 3, Aga Khan foundation-
- Maxcy –Rosenau- Last, Public health and preventive Medicine- Health care planning, organization and evaluation, 15<sup>th</sup> Edition, pp 1215-1280
- RogerDetels et al. Oxford book of public health, Chapter III, 3<sup>rd</sup> Ed.
- Epidemiology and management for health care for all by Dr.P.V.Sathe
- National health policy 2017 document,GOI
- Sustainable development goals by UN
- National health programs by Dr.J.Kishore

### **HEALTH ECONOMICS**

#### **Introduction –**

- Health financing – background, need, definitions , concepts and protecting poor

**Organisation and funding of health care services**

- Macro and Micro-economics & health
- NRHM and health financing mechanism
- PPP in health , health tourism
- Community health Insurance in India
- Resource allocation & budgeting

**The costs of health care**

- Health expenditure in India – National Health Account

**The benefits of health care: outputs and outcomes****Evaluating health care interventions from an economic perspective****The role of health economics in decision-making****Considering the way forward****References:**

- Phillips, Ceri. Health economics : an introduction for health professionals
- World health REPORT- Health system financing- the path to universal coverage, WHO 2010
- Text book of public health & community Medicine- AFMC & WHO – 2007
- Cost analysis , PHC map Module 8, Aga Khan foundation-
- Epidemiology and management for health care for all by Dr. P. V. Sathe
- National health policy 2017 document, GOI
- Sustainable development goals by UN
- National health programs by Dr. J. Kishore

**Expenditure statement for one academic year  
for fellowship in health policy, Planning and Economics  
Under Department of Community Medicine, RMC, PIMS DU  
Loni**

Income	Expenditure
Fees @ 10,000/- rs per candidate per year	a) Honararium for resource persons 5000/- Rs per candidate/year
	b) Administrative expenditure by University including examination 5000/- Rs per candidate
<p>*Note: 1) Special leave @ 7 days /term ( 15 days for one year) will be sanctioned by institute for training in other institutions 2) Fellow will bear all expenditure towards registration, stay and travel for deputations</p>	



## 9. Evaluation:-

Term end examination will be arranged and conducted by Dept. of Community Medicine, Dr. Balasaheb Vikhe Patil Rural Medical College and declare the result.

### Examination Scheme

Paper – I: Post Doctoral Fellowship in Health Policy, Planning & Health Economics – I

Paper – II: Recent advances in Post Doctoral Fellowship in Health Policy, Planning & Health Economics

### Theory Examination:- (2 Paper of 100 marks each)

2 LAQ x 20 Marks = 40 Marks

6 SAQ x 10 Marks = 60 Marks

### Practical Examination:-

One Long Case / Long experiments = 50 Marks

Three Short Cases (3 x 30) = 90 Marks

Viva Voce / Oral / OSPE / Spottes = 60 Marks

### Minimum Passing:-

- i) Minimum 50% in Theory papers (Each paper minimum is 40%)
- ii) Minimum 50% in Practical / Clinical & Viva Voce
- iii) Overall 50% Theory & Practical/Clinical

### Award of class:-

50% to 59.5% = II<sup>nd</sup> class

60 to 74.5% = I<sup>st</sup> Class

Above 75% = I<sup>st</sup> Class with Distinction

### Attempts:-

- A student shall clear the Examination only within three attempts or within 4 years of admission.
- Result / Issue of Mark Sheet – Head of Institute & HOD will jointly issue the Mark Sheet.

### Certification:-

A) Title – Post Doctoral Fellowship in Health Policy, Planning & Health Economics.

B) A fellowship is awarded upon successful completion of the prescribed study program, which will state that i) Candidate has completed the prescribed course of Post Doctoral Fellowship in Health Policy, Planning & Health Economics. ii) Candidate has completed prescribed clinical experience. iii) Candidate has passed the prescribed examination.



- C) Certificate will be issued with the signatures of concern Dean, Dr. Balasaheb Vikhe Patil Rural Medical College & Vice-Chancellor, Pravara Institute of Medical Sciences (Deemed to be University).
- D) Certificates to be prepared by concern College.

**XIV. Mandatory Fullfilment:-**

- 1) To participate in UG teaching / PG teaching.
- 2) Presentation of 6 assignments.
- 3) One Research Methodology Workshop.
- 4) Participation / Presentation with minimum One Research article in Seminars/Conferences/workshop etc.
- 5) One Research Paper in Indian / Scopas / UGC Care list journal.

