

Nursing Leadership and Management Program
under
International Public Health Management Development Program
(IPHMDP)

(ITEC) Scheme

FY 2025-2026

A proposal from the Department of Community Medicine and School of Public Health, Post Graduate Institute of Medical Education and Research (PGIMER) Chandigarh

A.Context and Need for intervention

Achieving Universal Health Coverage (UHC) by 2030 requires positioning qualified and skilled public health professionals, especially from developing countries and continents (India and other developing nations alike), who can plan, implement, and monitor public health initiatives to improve health care performance delivery system. It is also documented that Sustainable Development Goals (SDG) cannot be achieved without addressing the availability and distribution of trained public health professionals across diverse background. The available literature has also cited that health initiatives in developing countries often fail because of a lack of managerial and leadership competence among health work-force.

Nursing is a dynamic and challenging profession. Over the past few decades, nurse practitioners have gradually adopted higher responsibilities, from just being a doctor's assistant to an integral member of the life-saving team of the hospital. Further, they need to coordinate and communicate with their team for better patient care. The nursing profession's management and leadership skills are of utmost importance for assuming these critical and ever-changing roles in a demanding healthcare environment. Nurse leaders bridge the gap between policy and practice by ensuring the quality of care in hospital and health care systems.

The available literature has pointed out the disappointing fact that there are no formal management and leadership trainings in government organizations for nursing professionals before taking up senior management positions. Most of the existing courses for nursing professionals are theoretical, extensively elaborative, and does not comprehensively cover various aspects of a manager and a leader in a single program. Thus, there is a need to devise programmes, which will impart the managerial, and leadership skills required to effectively manage the existing and emerging public health challenges and in-turn enhance the capacity

of the public health managerial workforce. Further, there is a need to demonstrate various successful public health nursing models from diverse states of India, which has resulted in better patient care and are being effectively used for containment of diseases and promoting health. In addition, the latest trends in nursing education, primarily competency based nursing education (CBNE), is not being practiced despite its inclusion in nursing curriculum of various countries. The nurse practitioners should be equipped with the necessary skills to navigate nuanced public health issues and challenges faced by their countries. In this way, they will be able to make effective decisions for improving effectiveness and efficiency of health care delivery system in their countries.

This 2-week capacity-building program on nursing leadership and management will provide a better understanding of the good health care practices by nursing practitioners of ITEC nations through case-based approach, peer-to-peer learning and hands-on experience sharing which would ensure its replication in their respective countries. It will also focus on developing a critical thinking and applied problem-solving skills among the global delegates for warranting their eventual adaptation in their country for effectively managing the existing and emerging public health challenges for overall strengthening of health systems.

B. Prior experience of conducting the program

Department of Community Medicine and School of Public Health, Post Graduate Institute of Medical Education and Research, India has been conducting several health management training programs for national and international participants for over four decades. It has conducted more than 1000 training programs/ workshop/seminars, which are supported by national and international agencies.

C. Program Goal

Enhance the skills and competencies of nursing professionals with respect to leadership and management, particularly on team building, health communication, change management, stress management, supply-chain management, quality management, budgeting and financial reporting, self-awareness and emotional intelligence, infection control practices along with demonstration of good public health nursing models of India.

D. Program Objectives

- Apply diverse management skills learned during the program in their day-to-day practice to improve their organization's efficiency and effectiveness.

- Demonstrate leadership skills in the organization and transfer them to their peers and junior colleagues to create an organizational culture for delivering quality healthcare.
- Integrate knowledge, skills, and attitudes regarding leadership and management in providing professional nursing care in diverse healthcare environments.

E. Key Highlights of the Program

The key highlights of the program are;

- *Judicial mix of learning methods* through traditional formal learning methods (lecture, power point presentations, group discussions, role plays) and informal learning methods (case studies, exercises, videos, real case scenarios, and field visits).
- *Application based learning* in which the participants will prepare an action plan during the program to be implemented within 3 months of completion of program.
- *Facilitation of experience based learning* by an elite panel of leaders and experts
- *Cross-cultural learning* through sharing of best practices of public health nursing in community and clinical settings through integration with Indian culture and tourism and presenting exposure to local ethnicity and cuisine along with hosting a cultural event with gala dinner.

The main goal of the program is to ensure that the learning during the program are translated to implementation at workplace in real life settings.

F. Target Audience

This course is designed for nursing practioners who have at-least 3 year experience in clinical/ public health practice.

The program capacity is 50 participants only.

G. Program Content

- Nursing Administration, Management and Leadership Skills: What is it and why is it important?
- Functions and Roles of Nursing Administrator/ Manager covering (POSDCORB (Planning, Organizing, Staffing, Directing, Coordinating, Reporting, budgeting etc.) Importance of Nursing Administration and Leadership
- Essential Soft skills in nursing practices like Team building, Change management and Stress Management, Developing Self-Awareness and Building Emotional Intelligence, Johari Window, Motivation, Problem solving and Conflict Management, Decision making, Time Management

- Ensuring Quality Management ,patient safety and Patient satisfaction in hospitals including Quality improvement (Regular application of PDSA Framework and other tools- Fishbone diagram, lean management, Pareto principle, control chart etc.), Standards of Accreditation
- Effective Communication in nursing practice covering Principles of effective Interpersonal communication (IPC), Media management, Staff counselling
- Nursing and financial management: making the connection covering Preparation of Budget with financial justification, Nursing Audit
- Action Plan Development for their country based on the learning during the program.
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The total duration of the program shall be 2 weeks (including local field visits, Yoga and meditation session in early mornings and cultural night)

H. Program Schedule for FY 2025-26

26th November -5th December 2025

I. Program Outcomes

At Participants level

1. Better patient care
2. Learn the application of various techniques for planning and successfully managing projects.
3. Develop performance indicators, analyze data and quality reporting.
4. Design and use program budget, manage financial reporting systems to apply to organizations.
5. Develop in-depth understanding of effective communication and change management strategies.
6. Create innovative strategies within the organization to improve its efficiency.

At Organizational level

1. Health care managers can be effectively designated to senior leadership and management positions.
2. Improved managerial capabilities for dealing with public health management challenges.
3. Enhanced decision making in routine and crisis situation faced by organizations.

4. Overall increased performance and productivity of organizations in attaining top-ranked position.

J. Program evaluation and follow-up



During the program, the participants will be evaluated (short term evaluation) on the basis of increase in their knowledge in various areas of public health policy and management taught during the program. For this purpose, a pre and post-test questionnaire shall be designed covering different components of public health management. In addition, it shall be assessed based upon the participant's feedback about the program. The long term impact of the program shall be assessed based upon the activity accomplished after 3 months post-completion viz. a viz. those planned during the program.

We will submit a detailed Scientific Report of the program along with Utilization certificate within a span of two months post-completion of program.

K. Program utility for ITEC participants

ITEC scheme will make it more affordable for the participants who have the ability but not resources to fund their education. Further, this collaboration will boost cultural (Chandigarh being a beautiful cultural destination) and medical tourism (PGIMER is an institute of excellence with all medical superspeciality) besides promoting aviation sector. In addition, participants will learn from other's experience and expertise in health management of respective countries, which is of utmost importance in emerging area of health management. Summarily, it will help in establishing relations of mutual concern and inter-dependence which is the ultimate goal of ITEC Scheme. We are also open to any modifications in the program as per need of international participants or requirements under ITEC Scheme.

L. Schedule

<div><div>ITEC</div><div><u>PROGRAM SCHEDULE</u></div><div></div></div>			
NURSING LEADERSHIP AND MANAGEMENT International Public Health Management Development Program (IPHMDP) Under Indian Technical & Economic cooperation (ITEC) , MEA , India			
Day & Date	Time	Topic of Presentation	Resource Persons
Day 1 (Wed)	09:00-09:30 AM	REGISTRATION	
	09:30-11:00 AM	INAUGURAL SESSION AND HIGH TEA	

	11:00-11:30 AM	Tea Break	
	11:30-11:45 AM	Energiser	
	11:40- 01: 15 PM	Nursing Administration and Management Skills: What is it and why is it important?	Faculty
	01:15-02:00 PM	Lunch Break	
	02:00-02:15 PM	Game/ energiser	Participants
	02:15-03:00 PM	Participant Forum	Participants
	03:00-04:30 PM	Nursing Leadership Skills: What is it and why is it important?	Faculty
	04:30-05:00 PM	Discussion and Feedback	Participants
Day 2 (Thur)	09:00-09:30 AM	Recap Session	Participants
	09:30-11:00 AM	Problem solving and Conflict Management	
	11:00-11:30 AM	Tea Break	
	11:30-11:45 AM	Energiser	
	11:40- 01: 15 PM	Team building	Faculty
	01:15-02:00 PM	Lunch Break	
	02:00-02:15 PM	Game/ energiser	Participants
	02:15-03:00 PM	Participant Forum	Participants
	03:00-04:30 PM	Motivation and Morale	
	04:30-05:00 PM	Discussion and Feedback	Participants
Day 3 (Fri)	09:00--05:00 PM	Study Tour to PGIMER- Infection control (any ward RICU), quality control/PDSA (NICU), BMW disposal (Hospital Admin);(NINE); Telemedicine (Telemedicine centre); Health promoting clinic (Behaviour therapy room)	
Day 4 (Sat)	09:00-09:30 AM	Recap Session	Participants
	09:30-11:00 AM	Effective Communication	Faculty
	11:00-11:30 AM	Tea Break	
	11:30-11:45 AM	Energiser	
	11:40- 01: 15 PM	Developing self-awareness and EI	Faculty
	01:15-02:00 PM	Lunch Break	
	02:00-02:15 PM	Game/ energiser	Participants
	02:15-03:00 PM	Participant Forum	Participants
	03:00-04:30 PM	Stress and Time management	Faculty
	04:30-05:00 PM	Discussion and Feedback	Participants
Day 5 (Sun)	09:00-09:30 AM	Recap Session	Participants
	09:30-11:00 AM	Change management	Faculty
	11:00-11:30 AM	Tea Break	
	11:30-11:45 AM	Energiser	
	11:40- 01: 15 PM	Crisis management	Faculty
	01:15-02:00 PM	Lunch Break	
	02:00-02:15 PM	Game/ energiser	Participants
	02:15-03:00 PM	Participant Forum	Participants
	03:00-04:30 PM	Human factor engineering	Faculty
	04:30-05:00 PM	Discussion and Feedback	Participants

Day 6 (Mon)	09:00--05:00 PM	Action plan Preparation and case study development	
Day 7 (Tue)	09:00--05:00 PM	Study Tour to Tricity- Chandigarh Sec-49 (HWC); Lakshya and Kayakalp (Sec-6 Panchkula/ Sector 16 Chandigarh)	
Day 8 (wed)	09:00-09:30 AM	Recap Session	Participants
	09:30-11:00 AM	Ethical and Legal aspects	Faculty
	11:00-11:30 AM	Tea Break	
	11:30-11:45 AM	Energiser	
	11:40- 01: 15 PM	Decision making	Faculty
	01:15-02:00 PM	Lunch Break	
	02:00-02:15 PM	Game/ energiser	Participants
	02:15-03:00 PM	Participant Forum	Participants
	03:00-04:30 PM	Case study Development	
	04:30-05:00 PM	Discussion and Feedback	Participants
Day 9 (Thur)	09:00--05:00 PM	Study Tour to NABH accredited hospital(Sector 16 GH/ Fortis); Midwifery unit (GMC Patiala)	
Day 10 (Fri)	09:00-09:30 AM	Recap Session	Participants
	09:30-11:00 AM	ACTION PLAN PRESENTATION	
	11:00-11:30 AM	Tea Break	
	11:30-11:45 AM	Energiser	
	11:40- 01: 15 PM	Participant Forum/ post test	Participants
	01:15-02:00 PM	Lunch Break	
	02:00-02:15 PM	Game/ energiser	Participants
	02:15-03:30 PM	VALEDICTORY CEREMONY	

Annexure ‘1’

Organizational Capacity

The Postgraduate Institute of Medical Education and Research (PGIMER) is based in Chandigarh and was established in 1962 by then Prime Minister of India, Pt. Jawahar Lal Nehru. It was declared as an “Institute of National Importance” by an Act of Parliament of India on 1st April 1967 and is currently an autonomous body functioning directly under the Ministry of Health and Family Welfare, Government of India. PGIMER has almost all specialities and super-specialities departments. PGIMER has completed over 1000 research projects and more than 500 research articles are published every year in national and international indexed journals.

The Department of Community Medicine was instituted in 1977 with the purpose of developing effective models of health service delivery for rural communities and for providing community health orientation to public health professionals. To address emerging challenges in public health education and research, the Department was upgraded to School of Public Health (SPH) in the Tenth Five Year Plan of India (2002-06). It has a WHO supported Learning Resource Centre within the premises. SPH also offers regular PhD, MD,

Post Graduate Diploma in Public Health Management (PGDPHM), and Master of Public Health (MPH), along with various short-term courses in areas of epidemiology, health management, health promotion, communicable and non-communicable diseases. SPH is also involved in several research projects in collaboration with national and international organizations and state governments. Each year nearly 45 training programs are conducted with an average attendance of 30 participants per course. Department also works in coordination with several leading national and international agencies such as DBT, ICMR, WHO, UNICEF, UNFPA, DFID, MOH&FW, and MOE&F that financially support research and training projects covering most public health areas.

Annexure-‘2’

Executive Summary of Last IPHMDP physical course at PGIMER, Chandigarh

Achieving universal health coverage by 2030 requires positioning qualified and skilled public health professionals, especially from developing countries and continents (India and other developing nations alike), who can plan, implement and monitor national health programmes and public health initiatives in order to improve performance of health care delivery system. Further, it is documented that Sustainable Development Goals (SDG) cannot be achieved without addressing availability and distribution of trained public health management officials. The available literature has cited that health initiatives in developing countries often fail because of lack of managerial competence not merely due to lack of technical expertise

In this context, an International Public Health Management Development Program (IPHMDP) was conceptualized in 2016 by Department of Community Medicine and School of Public Health which aims at enhancing the skills and competencies of middle and senior level program managers for strengthening efficiency of organizations in resource limited settings in the past 7 years, 1300+ participants from 96+ countries participated which showed an ever-increasing enthusiasm among global participants.

The current program conducted by Department of Community Medicine & School of Public Health, PGIMER that hosted 50 delegates from Nepal. It is 'one of a kind' public health management program in the country which endeavors to boost skills and competencies of program managers for addressing local public health challenges and increase competency of organizations. The modules covered during this comprehensive program were about strengthening the health care system -learnings from India, management and leadership approaches in health care settings, communication and advocacy, making strategic and operational plans- applications, monitoring and evaluation of programs and tools and artificial intelligence and its application in healthcare. In order to ensure the application of learning during the program, every participant has submitted an 'Action Plan' after completion of the program, in which they prioritised the areas (from the program) of implementation in their respective organization. The participants of this cohort will be followed up till 3 months for submission of their action plan implementation report. The best report shall further receive a 'Certificate of Appreciation' from the organisers.

The key highlights of the program were; its design which focused on learning through a mix of traditional formal learning methods (lecture, power point presentations, case studies) and informal learning methods (role plays, exercises, real case scenarios, and management games); its concept wherein focus was on application based learning in which the participants prepared an action plan during the program for their organization (to be implemented within 3 months); and facilitation by an elite panel of experts and facilitators from lead academic and management institutes of the country. During the training, the participants had opportunity to meet leaders working in the field of Public Health

‘IPHMDP Contests’ was also organized during the program wherein various awards pertaining to different activities viz. best dressed participant of the day, most active

participant of the day, e-IPHMDP i.e. active participant on social media, best logo representing the program, voracious reader, best cultural performer and best action plan were bestowed to the participants during the 'valedictory ceremony' of the program. Few participants with extra ordinary leadership abilities were honored with special titles such as emerging leader award, best team player award and humble leader award. The active participation by delegates was ensured by presentation of the reflection of key concepts/teaching of previous day, participation in IPHMDP contest, management games/ energisers during lunch and evening sessions, and delegating responsibility to them for organizing cultural event during gala dinner

Beside academics, we provided a platform for 'cross-cultural learning' through sharing of best practices by the participants during the program, presenting books on leadership and along with hosting a cultural event with gala dinner, where they got a chance to informally interact with each other which actually helped in peer learning and developing network for future endeavours. Every day, few participants were also given opportunity to assume leadership position. Yoga and bhangra sessions in early mornings were most liked aspect of the program for depicting Indian culture and energizing them for the program.

The participants enjoyed the excellent 'Hi-Touch' hospitality of our team including the fact that the cuisine served during the program (breakfast, lunch and tea/snacks in between) were carefully designed keeping in view the profile of participants. We also ensured to provide best resource material to participants, which will help them to design similar program in their country. All the activities during the program were actively uploaded on the IPHMDP Facebook page and Twitter page with appropriate hash tags social media (eg. #ITECNetwork, #MEA_INDIA #MOHFW_INDIA, #IPHMDP, #INDIAINNEPAL, #PGIMER etc.). A parallel email account and WhatsApp group was also maintained by the organizers to keep the participants updated (on daily basis) and to provide them assistance during the program.

During the program, the participants appreciated the overall quality of training along with the field tour, where they were exposed to the Indian Health System along with its few best practices. They felt that it was a wonderful experience with a blend of learning, through various teaching methods which they can apply in their organization. They revealed that the program was well planned, organized, managed and full of knowledge which can be truly implemented in field settings and across different organizations. They expressed their willingness to scale up the program in their respective organizations and countries. The general proceedings and events were widely covered by the audio-visual and social media