OPERATIONAL GUIDELINE for PHC (N) Management Under Public-Private Partnership (PPP)



Mission Directorate
National Health Mission
Department of Health & Family Welfare
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I. Background and Context:

Public-Private Partnership (PPP) has emerged as one of the important strategies for health sector reforms in Odisha. Initiatives have been taken by National Health Mission (NHM), Health & FW Deptt. Odisha to undertake different PPPs in meeting the growing needs for health services including RMNCH+A and other National Health Programmes. Government of Odisha has embraced Public Private Partnership (PPP) as one of the major strategy in health sector. The need for PPP in healthcare has arisen from the need to augment the availability of healthcare services, enhance accessibility of intended beneficiaries and enable various models for enriching the quality of healthcare.

Health care service delivery in remote & inaccessible area remains a challenge due to shortage of health service providers and inadequate health infrastructure. NHM has taken concerted efforts to involve non state entities to manage Primary Health Centers in such remote areas. The basic transaction here is to shifting of the management and operation of the identified Primary Health Centers to NGOs/Trust/Corporate Sectors under Public Private Partnership.

This operational guideline has been designed which contains the details of roles, responsibilities, rules and regulation including financial regulation, quality monitoring and regulation, governance etc. It is hoped that the guidelines will help the public and private sectors in planning for operationalising the PHC (N) to provide basic primary health care services in Odisha.

II. Strategy of implementation:

- The State Government shall contract out the physical infrastructure of the PHC(N) to the Agency along with the existing equipments, instruments, furniture, etc available in the PHC(N) and an inventory of the same would be made jointly by the representative of CDMO of the concerned District and the Agency. The conditions of the building/equipment handed over will be duly recorded.
- 2. The Doctors and other paramedical staff appointed by the Government in the PHC (N) to be managed under PPP will be redeployed to nearby PHCs/CHC by the concerned CDMO. The NGO in consultation with District Health Authority will select and engage required manpower both medical & paramedical staff for the said PHC (N) for operation.
- 3. The ANMs already working in the sub centre under the PHC(N) will continue to work but will report to PHC (N) managed by NGO/Corporate.
- 4. Outreach activities at the sub centres level will be undertaken & coordinated by NGOs/Corporate by involving ANMs/AWWs and ASHAs.

III. Scope of work:

The NGO undertaking the management of PHC (N) will facilitate the following activities:

- 1. Provide curative, preventive and promotive services at the PHC (N).
- 2. General OPD services and service during emergency.
- 3. Inpatient service (IPD) along with bed facilities.
- 4. Minor operation theatre facility.
- 5. Promote & conduct safe institutional delivery services for pregnant women.
- 6. Family planning sevices.
- 7. General pathological tests service.
- 8. Referral services to the secondary health care institutions in case of emergency.
- 9. Promote comprehensive client centered integrated Public Health Communication strategy to bring about a change in knowledge, attitude and behaviour practices in the population.
- 10. Full participation in all the National Disease Control Programmes.
- 11. Functional of RKS and regular statutory meetings.
- 12. Ensure availability of drugs and other consumables as per State Government Drug Policy and free distribution to the patients. The Govt. will make necessary arrangement for supply of free drugs to the PHC(N) as per the norm.
- 13. Act as a catalyst in effective planning and delivery of services in the PHC sector.
- 14. Proper Bio-medical Waste Management.
- 15. Regular statutory reporting i.e HMIS, IDSP etc.

IV. Objectives of the partnership in PHC(N) Management:

- NGO/Corporate to provide preventive, promotive, and curative health services by managing PHC (N).
- Improving quality, accessibility, availability, acceptability and efficiency.
- Exchange of skills and expertise between public and private sector.
- Mobilization of additional resources for better health services.
- Strengthening the existing health system by improving the management.
- Widening the range of services and number of service providers.
- Clearly defined sharing of risks.
- Community ownership for health services.

V. Selection criteria of PHC(N)s for management:

- Based on the vulnerability assessment (most vulnerable, inaccessible, hard to reach areas) the PHC (N)s selected for management in PPP mode.
- Even many PHCs will not fall strictly within the above criteria but still require management, in that case the District NGO Committee recommendation may be considerable.

VI. General terms & conditions:

- 1. The Agency has to deposit as 5% contribution of the total programme cost with the RKS of the PHC(N). In case, the RKS has not been constituted in the PHC (N), the amount shall be deposited with ZSS of the district, which will be transferred to PHC (N) bank account later on once the RKS of PHC(N) is constituted.
- 2. The Agency shall open and maintain a separate saving bank account in respect of the grants released for the project.
- 3. The Agency has to submit the monthly progress report on the functioning PHC (N) to Block MO I/c, CDMO at district level and NHM at State level in HMIS format.
- 4. The amount of grant should be utilised only for the purpose for which it is sanctioned and the unspent balance of the grants shall be refunded after the close of the financial year.
- 5. The Agency will submit quarterly statement of expenditure (SoE) and progress report to the district with a copy to NHM. At the end of the project year, the Agency shall furnish annual report of the project along with audited reports.
- 6. The Agency will give a certificate of undertaking during the application and also along with MoU that the organisation has not been blacklisted by Government or any Govt. Agencies.

VII. Key deliverables in PHC(N) Management Project:

- 1. There should not be vacancy of average 60 days of any position in a year.
- 2. Minimum 6 hrs functional in a day and emergency services on call.
- 3. Minimum average of 40 patients in general OPD per day.
- 4. Provisioning of six bed facility.
- 5. Meet the conditionalities to upgrade as Promising Delivery Point then Delivery Point.
- 6. Functional of RKS and regular statutory meetings conducted.
- 7. Display of citizen charter.
- 8. General pathological tests service.
- 9. Minimum 48 hrs stay mother after delivery.
- 10. FP services are available and provided.
- 11. Functional as DOTS centre.
- 12. Screening & diagnosis of suspected leprosy cases.
- 13. Detection of visual impairment and their referral.
- 14. Diagnosis of Malaria cases, microscopic confirmation and treatment centre.
 - 15. Regularly Health Sector meeting organised, if it is a Health Sector.
 - 16. Regularly ASHA sector meeting organised, if it is a Sector.
 - 17. Regularly monthly meeting attended by the MO at Block CHC.
 - 18. Proper Bio-medical Waste Management.
 - 19. Regular statutory reporting i.e HMIS, IDSP etc.

VIII. Grant-in-Aid for PHC(N) Management:

Annual budget shall be provided as per the provision in the approved NHM PIP. The NGO contributes 5% of the programme cost. There is not Govt. grant-in-aid provision for PHC(N)s management by the Corporate Sectors, as they suppose to manage out of their CSR fund.

VIII. Duration of the project:

The duration of the project shall be initially for one year. However, the project may be extended another term subject to the satisfactory performance of Agency in PHC(N) management and recommendation of the District NGO Committee as well as fund provision by MoH&FW, GoI.

X. Human Resources for the PHC(N):

| SI. | Category of Staff (to be | No of | Eligibility Qualification |
|-----|------------------------------|-------|---|
| No. | selected as per Govt. | post. | |
| | eligibility norms) | | |
| 1. | Medical Officer (Allopathic) | 1 | Any MBBS Doctor |
| 2 | Ayush Medical Officer | 1 | Must be a BHMS/BAMS and have valid registration certificate from Odisha Homeopathy & Ayurvedic Medical Council. |
| 2. | Pharmacist | 1 | Minimum technical qualification in related field. |
| 3. | ANM or Staff Nurse | 1 | ANM / Staff Nurse- Minimum technical qualification in related field. |
| 4. | Lab Technician | 1 | Minimum technical qualification in related field. |
| 5. | Attendant -cum-Sweeper | 1 | NA |
| 6. | Project Coordinator | 1 | M.A. (in Social Sciences) |

XI. Signing of MoU:

The Memorandum of Understanding (MoU) signed at district level between Zilla Swasthya Samiti represented by the Collector & DM / CDMO on the one part and the NGO/Corporate Sector represented by their President /Secretary / Managing Director / General Manager on the other.

XII. Monitoring Mechanism:

(a) Internal Monitoring:

- Periodically assessment on deliverables through objective based reporting format.

- Audit of both physical & financial progress of the project by Concurrent Auditor engaged at District level on routine basis.
- Annual audit report and annual activity report to be submitted by NGOs to the district.
- Review of the PPP programmes at district level in the presence of CDMO, preferably in a fixed day.
- 'State Integrated Monitoring Team' (SIMT) of NHM, Odisha and District/Block level Health Officials shall visit to the projects from time to time.
- State level review meeting of projects under the chairpersonship of MD.

(b) External Monitoring:

 Within first three years of the project external independent evaluating Agencies engaged to conduct Mid-term and Final evaluation after completion of one year and three years of the project respectively.

XIII. Procedures of selection of partners and approval:

1. NGO Proposals:

- Open advertisement, receipt of the proposals/applications by districts, desk appraisal and field appraisal by a district level committee.
- Recommendation of the District NGO Committee Chaired by the Collector & DM after making assessment on the proposal and filed assessment reports.
- Scrutinisation of the recommendation of the Dist. NGO Committee by the Scrutiny Committee at State level.
- Decision on approval by the State NGO Committee chaired by Principal Secretary to Govt., H&FW Department.

2. Corporate Sector Proposals:

- Proposals directly submitted to the Collector / CDMO
- The District NGO Committee Chaired by the Collector & DM examines and recommends the proposal to NHM. Odisha.
- The State NGO Committee of Health & FW Deptt. under the Chairpersonship
 of Principal Secretary, H&FW, Odisha examines the proposal and
 recommends to Empowered Committee on Infrastructure (ECI) through P&C
 Deptt., GoO for necessary approval..
- Final approval obtained from the Empowered Committee on Infrastructure (ECI).

TERMS OF REFERENCE (ToR) OF THE STAFF OF PHC (N) MANAGED PROJECT

1. Medical Officer (Allopathic):

Reporting authority: MO I/C, Block CHC

Job Description:

- a) Diagnosis and treatment of patients coming to OPD and IPD.
- b) To conduct minor surgery, ANC, normal delivery, PNC etc in the hospital.
- c) In case of any complication, immediate referral to the higher health institutions.
- d) Prescription of medicines from the available essential drug list.
- e) Ensure the services of Reproductive Maternal Newborn Child Health and Adolescent Health (RMNCH+A), Communicable Diseases and Non-Communicable Disease services in the hospital.
- f) Supervision of day to day hospital activities & management so as to ensure quality assurance and client satisfaction care of the patients.
- g) Supervision on proper maintenance and update of records and reports with availability at the Hospital.
- h) Facilitate in functioning of Rogi Kalyan Samiti at PHC(N).
- i) General administration of the PHC(N), staff management etc.
- j) Supervise out-reach activities under the jurisdiction of the PHC(N).
- k) Keep close coordination with Block MO I/c, BPMU and other key line department functionaries for smooth operation of the Hospital and regularly attend block level monthly meetings.
- I) Verify reports & returns generated every month and their analysis before submission to CHC/District.
- m) Conduct verification/ audit of the stock allotted/procured for Hospital and forward the indent to CHC/District for supply from time to time.
- n) Ensure proper use and management of bio-medical waste.
- O) Any other tasks assigned by the CDMO/MO I/c from time to time.

2. AYUSH Medical Officer:

Reporting authority: MO, PHC (N)

Job Description:

- a) Diagnosis & treatment of patients from own system of medicines (Ayurvedic/Homeopathic) and dispensing of such drugs.
- b) To conduct/assist normal delivery after obtaining of SAB training.
- c) To support the Medical Officer in day to day operation and management of Hospital.
- d) To conduct field visit and provide handholding support to the field level health functionaries for their skill & knowledge up-gradation.
- e) Provide support in delivery of RMNCH+A, Communicable Deiseases and Non-Communicable Disease services.
- f) Assist to Project Coordinator in preparation of reports & returns of the PHC(N) and their analysis to take corrective measures.

- g) In absence of Medical Officer to take care over all activities of hospital.
- h) Any other tasks assigned by the CDMO/MO I/c/MO from time to time.

3. Pharmacist:

Reporting authority: MO, PHC (N)

Job Description:

- > Dispensing of medicines to patients as per the prescription of Medical Officer.
- ➤ Maintain physical stock relating to equipments, assets, drugs, consumables and stationeries etc and their records.
- Responsible for indenting of stocks from time to time.
- > To assist the Medical Officer in OT for minor surgeries etc.
- > Dressing to injured patients, administration of injection etc.
- ➤ To support in organizing of health camps in the operational area of project and assist Medical Officer in camp activities.
- Assist Project Coordinator in preparation of periodical reports & returns.
- Any other tasks assigned by the MO I/c/MO from time to time.

4. Laboratory Technician:

Reporting authority: MO, PHC (N)

Job Description:

- > Examination of all kind of general pathological tests as per the prescription of Medical Officer
- Microscopic examination of malaria slides of the catchment area brought by field workers.
- ➤ To assist in organizing of health camps in the operational area of project and assist Medical Officer in camp activities.
- After multi-skilling, lab tests relating to non-communicable diseases are to be conducted.
- Related records and stocks shall be maintained properly and will assist in preparation of periodical reports & returns.
- Any other tasks assigned by the MO I/c/MO from time to time.

5. ANM / Staff Nurse:

Reporting authority: MO, PHC (N)

Job Description:

- Counseling on RMNCH+A services to the patients.
- Conduct ANC, PNC and family planning services.
- > Assist Medical Officer during normal delivery; also conduct delivery after trained on SAB.
- ➤ To counsel the couples of reproductive age for use of contraceptives and Tubectomy / vasectomy.
- Administer injection to the patients as per the prescription by MO.
- Conduct out-reach activities in the PHC(N) areas.

- > Overall assistance in clinical activities to Medical Officer and pharmacist.
- > To assist Medical Officer in camp activities in the operational areas of the project.
- Maintenance of RMNCH+A related records/registers and assist Project Coordinator in preparation of periodical reports & returns.
- > Facilitate patients to avail Govt. Schemes/entitlements i.e JSY/Sterilization etc.
- Any other tasks assigned by the MO I/c/MO from time to time.

6. Attendant / Sweeper:

Reporting authority: MO, PHC (N)

Job Description:

- > To attend the dressing of patients who had been administered with minor surgery.
- > To attend the in-patients of hospital for saline, vitamin & other injections.
- > To follow the instruction of clinical staffs as & when delivered.
- To dispatch the hospital reports in nearby CHC and to keep the filing of documents in appropriate files as peer instruction of MO or other staffs.
- > To arrange refreshments for guests or hospital staffs whenever is asked by medical officer.
- > To sweep, mop and maintain the cleanliness of hospital campus daily.
- To dump the waste of ward, O. T. etc. in pit and to make measures for its decomposition.
- > To follow the instruction of medical officer and other staff
- To assist Medical Officer in camp activities.

8. Project Coordinator:

Reporting authority: Chief Functionary of the NGO

Job Description:

- Overall supervision of Project activities
- > Supervision of hospital activities & to see the hygiene and sanitation facility of premise. Quality assurance and client satisfaction care of the patients.
- > To maintain data base for the project.
- ➤ To document the performance hospital (No. of patients in OPD, Prescription of medicines in slip, ANC, Institutional delivery, PNC, family planning measures etc. undertaken in the catchments area, and other reports of hospital as per govt. format).
- > To co-ordinate with CHC/PHC and District Health Administration and to provide information as and when required.
- ➤ Keep close coordination with the ANMs of the Sub Centres under the jurisdiction of the PHC(N).
- Ensure timely preparation of HMIS and validation at CHC level in coordination with the BPMU.
- Time to time reporting of the performance of hospital as per the format of government/ NHM
- > Attend the regular review meetings at sector/block/district level.
- > To monitor the day to day activities of project staff
- To coordinate the outreach & IEC/BCC activities in the project area