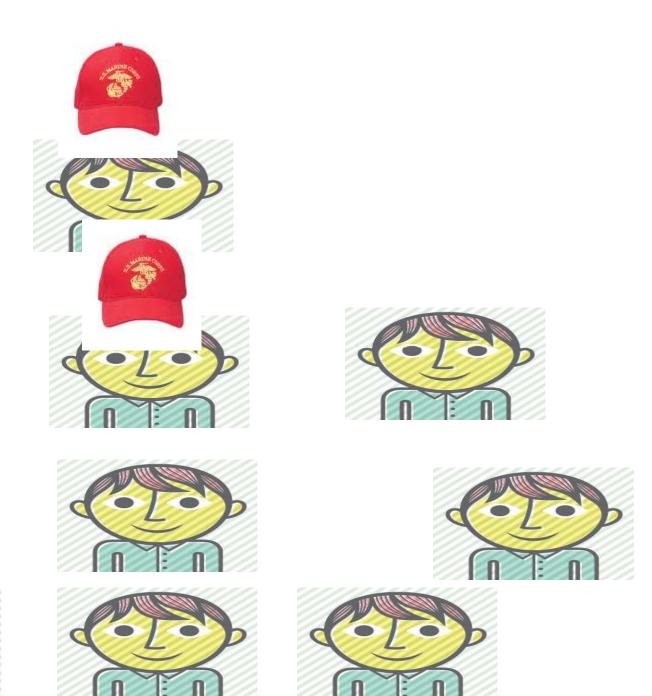
# Training for Programme officers in Planning & Management of NLEP

25<sup>th</sup> June 2021 Dr Sunil Gitte, CLD, Nirman Bhavan , Delhi

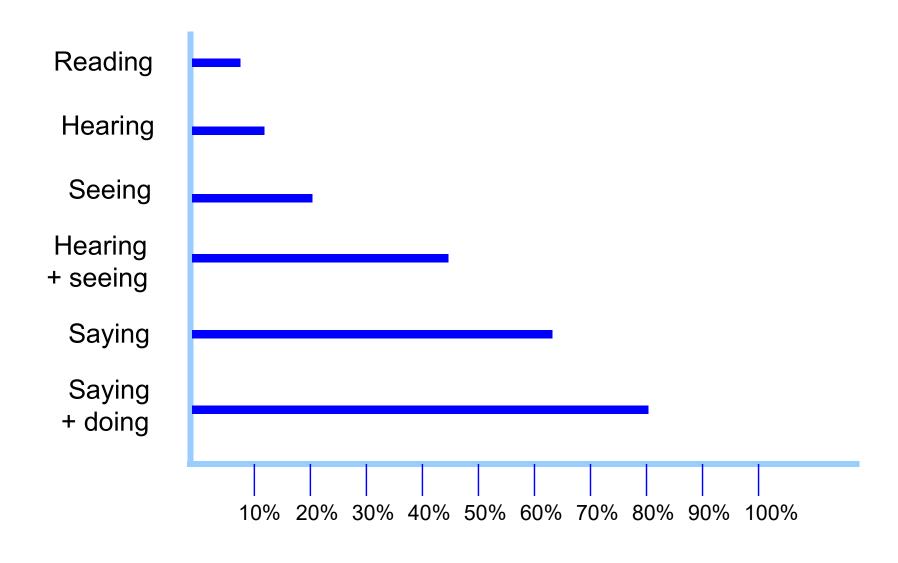


# Objectives

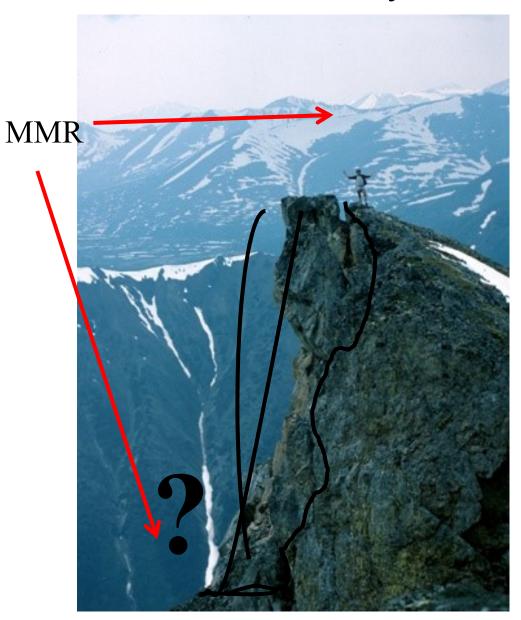
At the end of session the officer should be able to, understand NHM requirement

- Analyze the situation
- Identify the problems
- Formulate their objective and results
- Plan the activities & budget
- Monitoring
- Prepare the Gantt chart
- Prepare the planning document

# Retention of learning



# Situaltional Analysis



# Few Questions?

- How the planning starts?
- Who initiates it?
- When it starts?
- What remains the basis of planning?







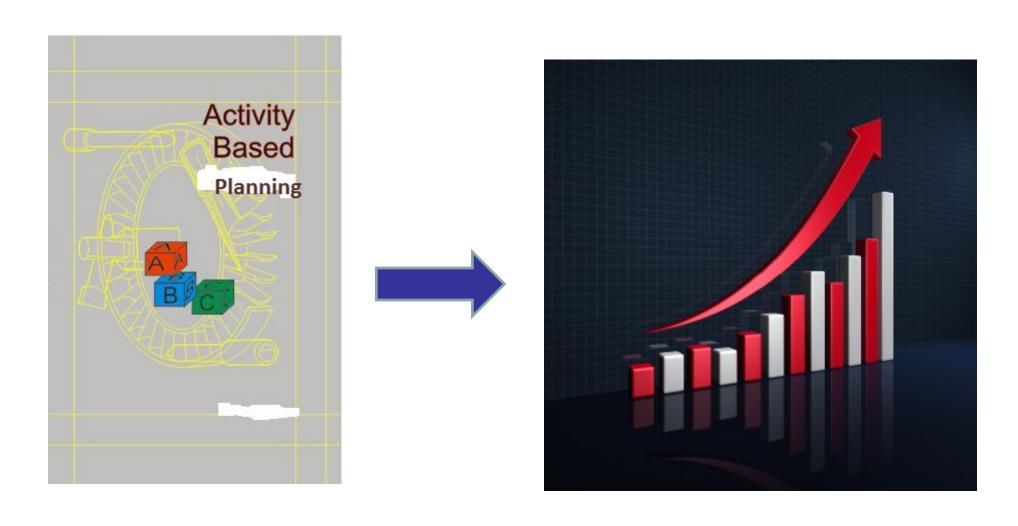
# Why Plan?

- Provides direction
- Links objectives with actions
- Condition for resource allocation
- Condition for proper monitoring & evaluation
- Convince the authorities

# We should ask 6 questions

- What
- Why
- Where
- Who
- When
- How

## For so many years we have been doing things?



## Desired Approach for planning

Activity based

to

Result based

No. of staff to be trained

Staff competency improved

No. of supervision visits to be paid

Staff performance improved

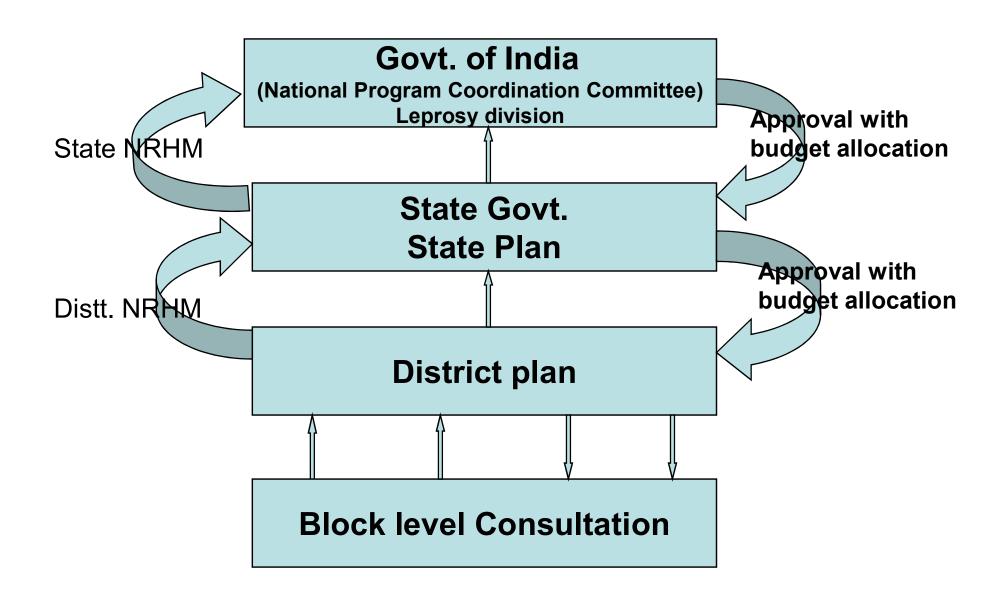
No. of BCPs to be procured

MDT available for the patients

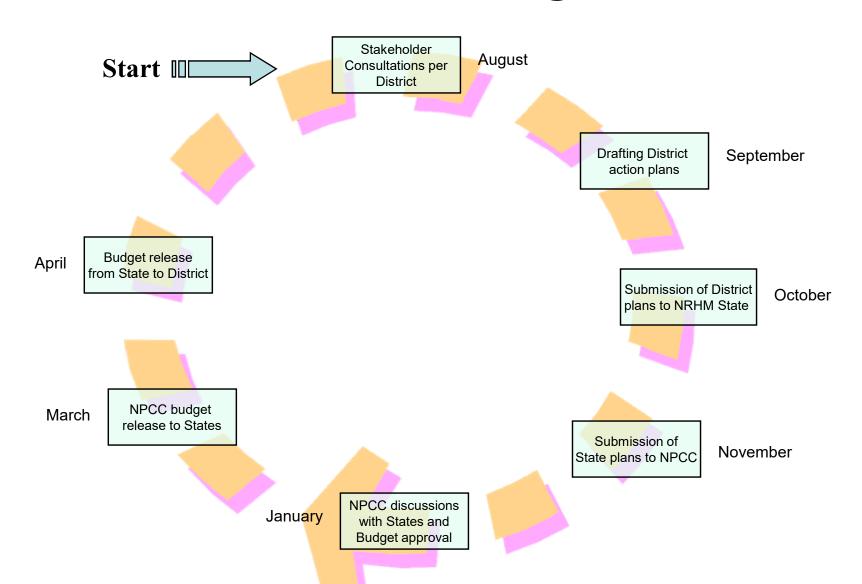
"District health action plan would be the main instrument for planning, Inter-sectoral convergence, implementation & monitoring of the activities under the mission"

**NRHM 2006** 

# Decentralized Planning under NRHM



## **NRHM Annual Planning Process**



# **Planning Cycle**

Situation analysis, objectives

Where are we now? Where do we want to be?





Monitoring Supervision Evaluation

All going as planned?

Are we there?

Strategy, plan of action

How do we go there?
What do we do?





**Work Plan for implementation** 

What do we need?

# **Situation Analysis**

- Geographical information
- Socio-economic and cultural aspect
- Magnitude of health problems analyzing Indicators
- Records & Reports (evaluation)
- Block level consultations
- SWOT Analysis

# **SWOT Analysis**

## Strengths:

Resources & capabilities available with in the programme

#### Weakness:

Problems with in the programme

## Opportunities:

External factors that can be helpful for the programme

#### Threats:

Factors not in the control of the programme and may affect the system adversely

## **Exercise**

- Divide into groups for SWOT analysis
- Group discussions

## Example

#### **Strength**

- -Large work force
- -Good infrastructure
- -Full range services of NLEP in specialized referral center
- -Good coordination with NRHM
- -Adequate mobility
- -Proper MDT management
- -ASHA's involvement in referral and follow up

#### **Weakness**

- -Unified command lacking at state level
- -Late receipt of funds that too insufficient
- -Lack of coordination with medical colleges
- -Non involvement of private practitioners
- -DLO assigned with other programmes
- -Late submission of reports and returns with poor record keeping
- -Weak monitoring and supervision at district level
- -Poor referral system implementation

#### **Opportunity**

- -Local and national level support is good with strong ILEP partners
- -External funding by DFID
- -NRHM support like VHSC and Rogi Kalyan Samiti
- -AWW (ICDS) and SHG members involved
- -Good political commitment
- -PRI support adequate

#### **Threat**

- -Lack of ownership of programme by DM and HO and PHC MOs
- -Poverty and illiteracy
- -Post elimination complacency at all levels
- -Naxalite effect in 20% of area of state Quacks menace

## Identification of Problems, e.g.

No Vehicle or mobility problem.

## **Poor Supervision.**

• High no. of Grade II disability among new cases.

#### **Poor case detection**

Non availability of MCR

#### **Poor DPMR Services**

# Exercise

 Discuss identification of problem from Situation analysis

## **Problem tree**

- Problem tree brings out various factors responsible or related to a particular problem
- It is a tool for clarifying cause-effect relationships between the various problems in leprosy control programme

# **Exercise**

- Divide in the groups
- Construction of problem tree

# Problem to Objective/Result

Poor case detection

Improved detection

Poor DPMR Services

Improved DPMR Services

**Poor Supervision** 

Improved Supervision

# Objectives..

Specific



Measurable



Acceptable & achievable



Realistic & relevant



Time bound

# Exercise

 Discuss various problems and convert them into results/objectives

## **Activities**

e.g.

Procurement of operational guidelines Training of PHCs staff in DPMR & counseling

Disability assessment

Procurement of materials Prednisolone, footwear etc.

Result/Objective: DPMR services improved

## **Exercise**

- Divide into groups
- Groups plan the activities to achieve different results from the already approved budget from GOI – dummy exercise
- Planning the activities to achieve different results

# Work plan for implementation

Activity	Training of MO
Duration & Date	4 days, 15 <sup>th</sup> – 18 <sup>th</sup> April 2010
Responsible person(s)	DLO
Required items	Venue, Learning material, LCD/OHP, Stationery etc.
Budget	Venue, accommodation, stationery, travel, per diem, lunch, learning material, Hiring etc
Funding resource	District Health Society (Leprosy)

# **Budget Calculations**

Accommodation	Rs. 'X' (one day tariff) x No. of days x No. of rooms
Travel (to & fro)	Rs. 'X' (fare) x No. of persons
Per diem/D.A. for trainee	Rs. 'X' (Per Diem of 1 day) x No. of Days x No. of persons
Lunch/tea	Rs. 'X' x no. of Persons
Stationery & Miscellaneous	Rs. 'X' x no. of persons

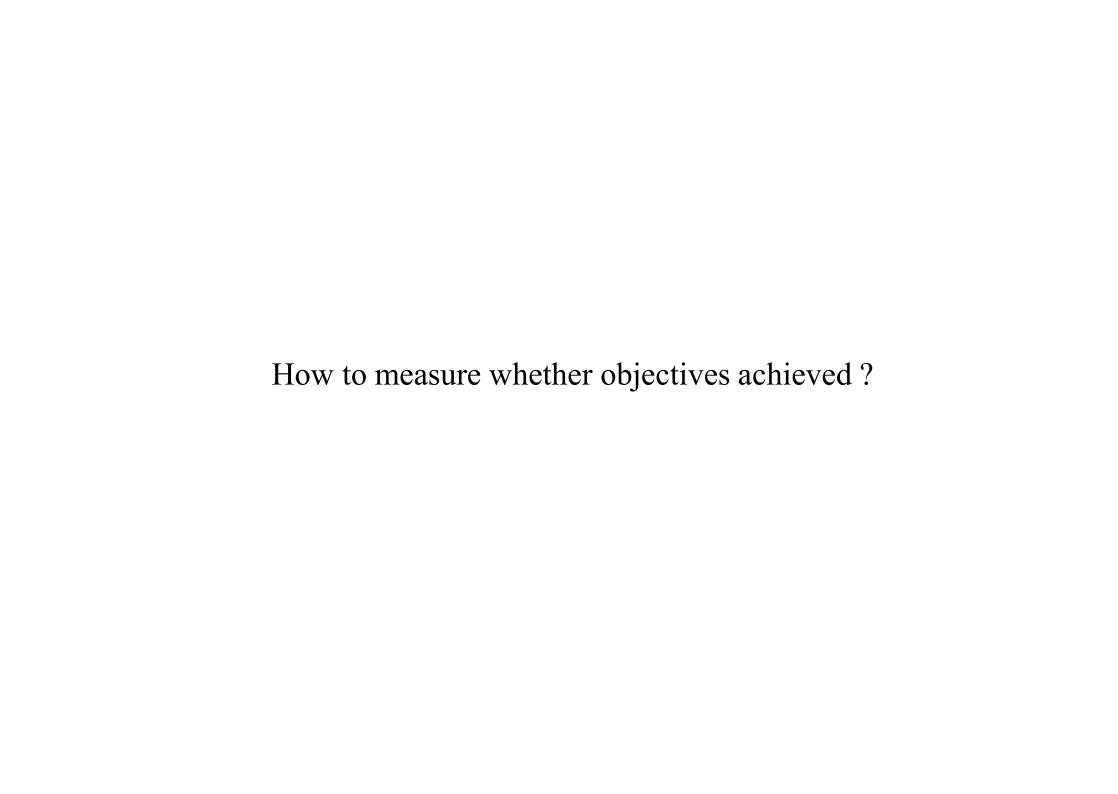
## Example of budget calculation

Activities	Items	Budget	Total
1. Training of Health workers	Venue	Rs 500/ day	500.00
	Travel- Trainer	Rs 100x2x2	400
	Travel- participant  Per diem Lunch Stationary	Rs 60x2x30	3600.00
2. Training of AWW			
2. Procurement of Prednisolone			

# **Activity Plan & Budget**

e.g.

Objective : DPMR services improved						
Activities	Respo- nsible Staff	Dura- tion & Date	Items required/ no.	Budget (details in annex)	Funding source	
Training of MOs	DLO	4 days 15 <sup>th</sup> 18 <sup>th</sup> April 2010	Venue, TA/Da, Lunch, Statio- nary etc.	Rs. 35,000	DHS	
Procur- ement of foot wear	DLO	Qtrly.	100 pairs	Rs. 20,000	DHS	



# Monitoring?



# What is Monitoring?

- Continuous process
- To keep track of the activities
- Activities are proceeding as per the plan
- Corrective actions taken

# What is expected?

- Monitor the implementation of approved Project Implementation Plan (PIP) under NRHM
- Ensure that the activities are carried out within the time frame
- Ensure that the activity wise earmarked budget is utilised.
- Ensure conduction of activities with supporting staff

# Contd.....

- Ensure implementation of activities in an integrated manner under NRHM.
- Monitor whether the programme objective/outcomes are achieved
- Monitor improvement in quality of service

### How to monitor?

- Review meetings
- Collecting reports regularly.
- Field visits and feedbacks
- Progress in terms of reduction in disease burden, and other Indicators

# Indicators





# **Indicators**

- Is a tool to measure change / end result
- It could be rate, ratio or proportion.
- It could be number also.

# Indicator – Rate

Numerator x Multiplier

**Denominator** 

For a specific time or period

## Indicator – Ratio

Relationship between two dis-similar entities

e.g. patient/bed ratio, PB/MB, male/female ratio

# Indicator – Proportion

Numerator – x 100

### Denominator

- Proportion is normally expressed in %
- Proportion could be of more than two entities e.g. proportion of different colors, proportion of cases contributed by different states.

## **Exercise**

- Divide into groups
- Exercise on different indicators per the results (outcome indicators) and activities (process indicators)

# **Activity Schedule (Gantt Chart)**

Act. No.	Activities	Apr - 10	May - 10	Jun - 10	Jul – 10	Aug - 10	Sep - 10	Oct - 10	Nov - 10	Dec - 10	Jan - 11	Feb - 11	Mar - 11
1	Training of MO	-	-	-	-	-							
2	Procurement of footwear			-			-			-			-
3													
4													
5													
6													

## **Exercise**

- Divide into groups
- Exercise on activities and budget
- Exercise on Gantt chart

#### 1. Summary

- Background: Overall Government policy objectives, and links with the Commission's country programme or strategy, commitment of Government to overarching policy objectives of the such as respect of human rights
- 3. Sectoral and problem analysis, including stakeholder analysis
- 4. Project / programme description, objectives, and the strategy to attain them
  - → Including lessons from past experience, and linkage with other donors' activities
  - Description of the intervention (objectives, and strategy to reach them, including project purpose, results and activities and main indicators)
- 5. Assumptions, Risks and Flexibility
- 6. Implementation Arrangements
  - → Physical and non-physical means
  - Organisation and implementation procedures
  - → Timetable, implementation schedule
  - → Estimated cost and financing plan
  - → Special conditions and accompanying measures by Government / partners
  - Monitoring and Evaluation

### 7. Quality factors

- Participation and ownership by beneficiaries
- → Policy support
- → Appropriate technology
- → Socio-cultural aspects
- → Gender equality
- → Environmental protection
- Institutional and management capacities
- → Financial and economic viability

Annex: Logframe (completed or outline, depending on the phase)

# Planning document

Draft table of contents programme document (15-20 pages)

- Executive summary
- Introduction
- Situation analysis
  - Problem description (brief)
  - Main stakeholders
  - Analysis results from workshop
  - Conclusions
- Objectives (purpose / results)
- Activities
  - Schedules with responsible persons & budget
  - Gantt chart
- Implementation arrangements
  - M&E
  - Management
- Annexes
  - Map
  - Detail of budget calculations
  - Glossary
  - References

# Thanks !!!