

CURRICULUM

1. Programme title:

Leadership in Health

2. Introduction:

2-1 Background:

It is now widely accepted in organizational performance that achieving the mission and making a difference needs more than just technical competence. Skills known as “soft skills” are proved to be crucial for career success and productivity. This degree aims at assisting the students to identify and develop their leadership and communication styles and learn how to use this to achieve their mission. It touches on management skills to achieve efficiency and improve health outcomes. This is taught on the context of managing organizational performance by giving living examples of health organizations in Sudan and other countries.

The degree is based on three approaches:

First; self reflection: managers going through day to day work do not usually stop and reflect on their situations and their personal responses to these situations. Self management is essential for relations management. To manage ourselves effectively we need to know ourselves. The module gives a number of assessment and reflection tools and exercises that help participants to think about their real and ideal selves and implement plans for improvement.

Second; Creation of a learning organization: change is inevitable and learning to manage change is essential for success of health organizations. On other hand people can develop and apply behavioral change to improve. During these training participants will learn to apply tips for behavioral change for improvement at personal and organizational level. Participants will also learn to effectively deal with change as it occurs.

Third; Relation management: skills of teamwork determine the ability to succeed. Good managers must be able to manage people. Knowing others, managing relations and team work are core objectives of this training.

Training of locality health management teams in the problem solving approach is one of the key elements (in addition to leadership and management) of a comprehensive capacity building plan aimed at strengthening the local health system in Sudan. This module is

addressing the problem solving techniques through the District team problem-solving approach. The district team problem-solving (DTPS) is a process in which teams of health workers at district level are guided with rigorously structured sequences of assignments in conducting their own analysis of one or more high priority public health problem/s in their district, devising and then implementing their own solution to the identified problem/s over a defined period, conducting and presenting the results of their own evaluation of their implementation (progress, constraints, service improvements, and health impact).

2-2 Rationale and justification:

Progress in public health in Sudan has been greatly advanced throughout its history by outstanding individuals who fortuitously combined all these qualities. Today, the need for leaders is too great to leave their emergence to chance. Greater emphasis in public health curricula should be placed on management and leadership skills, such as the ability to communicate important values to employees and enlist their commitment; to deal with important changes in the environment; to plan, mobilize, and use resources effectively; and related to the operation of the agency in its larger community role. Although many public health managers display these capabilities, the emphasis in the field on technical competence and professionalism sometimes leads to a neglect of management as a skill in its own right. Management is often assumed to be purely a matter of common sense or innate ability rather than a body of knowledge that can be acquired through training and experience.

Management of bodies providing public health services is a demanding duty requiring, in addition to technical and political acumen, the ability to motivate and lead personnel, to plan and allocate agency resources, and to sense and deal with changes in work environment and to relate the organization to the larger community.

Public Health Institute (PHI) is committed to complete the need for highly professional public health specialists and those working in relevant areas to fulfill these needs. This will be achieved by providing a rich environment and obligated and highly committed staff, trainers & supportive teams. The experts in PHI are well oriented with local situations and settings and will provide their best to deliver and facilitate different components under this program.

3. Objectives:

3.1. General Objective: -

To improve the institutional capacity and system development at all levels of governance, i.e. at national, state and locality level in the Northern states for sustainable financing and development of the health system;

3.2. Specific objectives:-

3.2.1 Research: Knowledge and skills about application of different research methods in identifying the problems of defined district health system.

3.2.2 Services: the trainees should acquired the essential skills and competencies that enable them to manage the health services at locality level

3.2.3 Educational: The students will be introduced to different theories behind management and leadership concepts and how this will enable them to applied that in their jobs.

3.2.3.1 Cognitive: This program will support the culture of team work and helping the participants to appreciate this approach in real case scenarios.

3.2.3.4. Areas of professional development (By the end of training, the trainees should have acquired the following competencies and should be able to function successfully as):

1. Health management expert
2. Communicator
3. Manager
4. Professional

Beside that; students should be able:

1. To understand the best modes to deliver a mix of essential health services at the local levels
2. To build problem solving and solution implementing capacity among district personnel
3. be able to function in a multi-disciplinary, problem-solving team within their district with the ability to:
 - Apply basic data and analysis in the planning, management and control of PHC and other public health services;
 - Define and diagnose health, organizational and operational problems at various levels;
 - Formulate practical solutions for such problems, solutions which can be implemented with existing resources and organizational set-ups;
 - Strengthen supervision in their district under project;
 - Monitor the progress and evaluate the effect of changes resulting from the implementation of their solutions;
4. Developing good team-work and improved managerial skills

5. Learn a "bottom line" approach and focus the on health outcomes or end-results.
6. Learn to assess their leadership skills to auto-determine their major areas of deficiencies (weaknesses) and their strengths.
7. Learn how to develop their own authentic leadership style and will have increased confidence in their ability to lead & make contribution through leadership to their communities.
8. Understand how and when communication tools can be useful in leadership and management
9. Learn how to improve the inter-personal relations with their team by experiencing personal communication styles and develop and use visual communication for good mentoring, consensus-building and action planning
10. Be able to describe what needs to be managed.
11. Be able to describe critical skills needed to be a successful manager.
12. Use behavioral and management skills – delegation, active listening, conflict resolution and time management for effective people management to a greater extent than they did before the training.
13. Learn how to lead through change
14. Learn how to manage an organizational performance

4. Contents:

4.1 The general organization of the programme:

This program is organized in a manner that helps the trainees to apply and transfer the knowledge they gain during the theoretical sessions. This will be based on the following organization:

Phase 1 of the diploma (12 weeks):

- 3 weeks of class room sessions in which the basic concepts about leadership, management and DTPS;
- 9 weeks of field work and assignment based on selected topics of interest; this will include self reading materials;
- 2 weeks of class room sessions in which introduction to project development under this program will be included, in addition to selected topics in leadership will be discussed;
- 4 Weeks of field work and assignment based on select project area; this will include self reading materials;

Phase 2 of the diploma (14 weeks):

- 1 weeks of class room about main management aspects required for phase one of the project;
- 4 week of field work and assignment based on select project area (phase one of the project); this will include self reading materials;
- 1 weeks of class room about main management aspects required for phase two of the project;
- 6 week of field work and assignment based on select project area (phase two of the project); this will include self reading materials;
- 1 weeks of class room about other main leadership and management aspects;
- 1 week for final assignments and submission of final report.

4.2 Detailed contents:

Leadership component under this diploma covers the following:

- The role of self awareness for authentic leadership development. This session will include self assessment and development of personal development plan (my values, my mission and my targets) using my blue print to success tool.
- Elements of leadership development
- Emotional Intelligence
- Communication styles
- Visual communication strategies and digital story telling as a leadership tool
- Presentation skills for managers
- Time management
- Conflict resolution
- Teamwork
- Delegation
- Giving and receiving feedback
- Program management
- Project management

- Introduction to change management
- Managing organizational performance

District team problem solving component under this diploma covers the following:

- Setting up for district team problem solving;
- District team problem solving planning process;
- Implementation of team solution;
- District team problem solving evaluation process;
- Follow-up of results of District team problem solving process;

5. Admission requirements:-

Students for this program should fulfill the following requirements:

- Obtained health related university degree (Bachelor) from recognized university.
- Have at least 1 year working experience in the current working position with ability to continue for additional 1 year.

6. The duration of the programme:

6 months

- Approximately 3 months of in- house training and
- 3 months of (field) self learning, including the student's project

7. The role and responsibilities of trainees:

1. On time submission of required assignments;
2. Work in teams based on the guidelines for each team and achieve the required deliverables on time'
3. Preparation and submission of the final report of the assigned project as required by field supervisors.

8. Methods of teaching and training:

8.1 Problem based learning: The district team problem-solving (DTPS) is a process in which teams of health workers at district level are guided with rigorously structured sequences of assignments in conducting their own analysis of one or more high priority public health problem/s in their district, devising and then implementing their own solution to the identified problem/s over a defined period, conducting and presenting the results of their own evaluation of their implementation (progress, constraints, service improvements, and health impact).

8.2 Presentation of the critical review experience will also take place during the sessions. The group work and presentations will constitute at least 50% of the allocated time of the module.

8.3 Formal class sessions including student seminars.

8.4 Individual assignments will be utilized as another mean of learning in the module.

8.5 Self-directed learning: this will be an important mean of teaching by encouraging the team of student to further explore the possible best practices published in the literature.

- Formal class sessions including presentations;
- Group work and case studies;
- Team assignments through field work;
- Team self evaluation;
- Mentoring;

9. Resources:

9.1 Human Resources

9.1.1 Lecturers: At least 8 lectures specialized in different areas will be required.

9.1.2 Tutors: No need for tutors in this program.

9.1.3 Supervisors: at least 4 field supervisors and 8 mentors will be required

9.2 Physical Resources

9.2.1 Classical library: The student will need to have access to classical library during their theoretical sessions. This will be served by PHI library.

9.2.2 Electronic library: In addition to electronic access for any resources required by the students from PHI E-library, web-based sharing of reading materials will be available for student during the whole duration of the program.

Besides these; the following are needed:

The following resources will be needed:

- Ideally, one large class room should be available for presentation and plenary group discussion with adjustable level of lighting. Another 4 to 5 small rooms should be available for group work.
- Laptop computer or PC.
- Video projector.
- Overhead projector.
- Flip chart.
- White board and markers with different colors.
- The lecturers, audiovisual and printed materials .
- Resources needed for field work: Coordination and supervision of the field work.

10. Methods of students' assessment:

The following strategies will be used to evaluate the performance of each student:

- Individual assignment, where each student will be asked to write a paper to solve a management dilemma. Students should apply the taught conceptual framework in writing the paper. Achieving satisfactory grade in the problem solving assignments is essential (25% of the total).
- Group assignment to develop a project at locality of choice based on agreed plan Evaluation will include the team approach, management skills and achievements. Each member of the group will be given the same mark according to the performance of the whole group. Achieving satisfactory grade in the assessment of the final report of the project is essential (35% of the total marks)
- Achieving satisfactory grade in the final exam (50% of the total marks).
- Assignments submitted after the required time will be penalties.

In particular; the students will be assessed based on the following scheme:

10.1 Phase-one:

10.1.1 The student will be eligible for phase two by achievement of satisfactory achievements in the required assignments.

10.1.2 Methods of continuous evaluation: This will include the feedback from field supervisors based on the required skills from each field work. The notes in the logbook will be highly considered for this purpose.

10.2. Phase-two:

10.2.1 Eligibility for phase-two examination: The student will be eligible for part two by achievement of satisfactory achievements in the required assignments.

10.2.2 Phase-two methods of continuous evaluation:

10.2.1.1 This will include the feedback from field supervisors based on the required skills from each field work. The notes in the logbook will be highly considered for this purpose.

10.2.1.2 Evaluation of group projects will be one of the core evaluation methods in this part.

10.2.3 Written examinations: 3 hours unseen written examination paper will be assessed at the end of the program. Students should achieve satisfactory results in this exam to award the degree.

10.2.4: Practical examinations: Not required (part of projects' evaluation)

10.2.6 Thesis examination: No thesis is required under this assessment plan, the students will be asked to submit final project's report. The report will be evaluated by experts to grade the level of the performance.

10.2.7: End of year examination (EYE): Will not included

10.3.8: Formative assessment: Will not included

11. Methods of programme evaluation:

End of program workshop will be conducted after the results of the final exam. Continuous follow up of our alumni from this program will be reported each year to evaluate the impact of the program. This tracking will include feedback reports from the mentors determined for each cohort. Cohort's evaluation survey will be conducted annually to get the feedback from

managers about different components of the program. This will include the expectations met/not-met, quality of the services, evaluation of materials, evaluation of facilitators and any other comments or suggestions.

11.1: Evaluation of training centers

11.1.1 Capacity of the centers in terms of HR requirements, physical requirements, resources and other capacity aspects.

11.1.2 The ability of the center (PHI) to organize effectively the program and how for the student were satisfactory about that.

11.2: Evaluation of training programme

11.2.1 Both internal and external evaluations will be considered for continuous evaluation of the programme

11.2.2. Reports of the trainers and trainee.

11.2.3 Survey of employers about the performance of the students.

11.2.4 End of projects evaluation.

11.3: Evaluation of trainers

11.3.1 Feedback forms will be continuously distributed to students for their feedback.

12. Degree awarded

Diploma Leadership in Health

13. List of references and other resources:

World Health Organization, 1993, *District Team Problem Solving Guidelines for Maternal and Child Health*, Family Planning and other Public Health Services

Bainbridge J. & Sapirie S.A., *Health Project Management. A manual of procedures for formulating and implementing health projects*. Geneva, World Health Organization, 1974 (WHO Offset Publication No. 12)

Delp, P. et al., Nominal group technique, In: *Systems tools for project planning*, PASITAM, International development Institute, Indiana University, 1977

Folch-Lyon E. et al., Focus group and survey research on family planning in Mexico, *Studies in family planning*, 1981, 12:409-432

Janovsky, K., *The challenge of implementation - district health systems for primary health care*, Geneva,

World Health Organization, 1988 (unpublished WHO document WHO/SHS/DH/88.1/Rev 1)

Sapirie, S.A., Action-oriented health systems research through district health team problem-solving, In: *The role of health systems research*, Nordic School of Public Health, Goteborg, Sweden, 1987

The Mentor's Guide: *Facilitating Effective Learning Relationships*, By Lois J. Zachary. Jossey-Bass, San Francisco, CA 2000

Digital Storytelling: Capturing Lives, Creating Community
by Joe Lambert <http://storycenter.org/book.html>

World Health Organization. (2002). *An Overview of Planning for Emergencies in Hospitals*. World Health Organization - Western Pacific Regional Office. Unpublished document.

Hersche, B. Wenker, O. C. (1997). *Principles of Hospital Disaster Planning*. Unpublished lecture presented by Bruno Hersche at the 10th World Congress of Emergency and Disaster Medicine, September 24 - 27, 1997, Mainz, Germany.