

# NRHM based Internship training in Homeopathy

## Project to Sensitise Future Practitioners of Homeopathy – Internship training – for Human Resource needs of National Rural Health Mission

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### **Preamble**

National Rural Health Mission is a flagship program of Government of India that has made sterling contribution for improving the health indicators across the country. As in any program implementation, human resource crunch is a major roadblock for the further development of this program.

The major focus area of NRHM is comprehensive community healthcare. In this direction, it is aligned to the vision of Millennium Development Goals. The MDG makes a case for eight international development goals that all 192 United Nations member states and at least 23 international organizations have consented to achieve by the year 2015.

Community health is an evolving and dynamic sector in healthcare domain that aims to protect, promote and revitalise people's mental, physical and social well-being. It underlines prevention rather than cure through collective actions to address the fundamental causes of disease and foster conditions and contexts in which communities or population groups can lead healthy lives.

The International Conference on Primary Health Care that was organised at *Alma-Ata* in 1978 underlined the importance of primary health care as effective means of achieving comprehensive worldwide health. In the meanwhile, Homeopathy has emerged as viable option for the health policy planners to position its services in the community health context. Recent efforts to deploy homeopathy in epidemic situations like Chkungunya and H1N1 have showcased the resolve of health policy makers to trust homeopathy in community health care.

Further, requirement for skilled and reliable human resources to sustain the results achieved under NRHM enjoin the homeopathy professionals to shoulder greater responsibility as healthcare providers. To match this emerging trend, the homeopathic undergraduate curriculum in India has already laid sufficient emphasis on the community orientation of homeopathic practice. However, the implementation of these lofty ideals needs to be strengthened. In this regard, a radical restructuring of the rural postings of BHMS internship is suggested to assess the impact of homeopathy in community health. Therefore, a structured internship program for rural based community orientation for the future practitioners of homeopathy is substantiated.

### **Purpose**

The purpose of this orientation is to provide a structured process that will help newly qualified homeopathic doctors who are in the internship phase of their training to function effectively in their future roles, with an overall aim of fostering individual, organizational, and community effectiveness in improving community health through homeopathy in the context of NRHM.

### **Objectives**

*At the end of the posting, the learners will be able to –*

- List the Millennium Development Goals
- Describe the components of National Rural Health Mission
- Explain the role of homeopathy in NRHM
- Discuss how community development affect changes in the lifestyles and epidemiologic transition of disease pattern
- Describe health promotion aspects for prevention of chronic diseases
- Determine the socio-cultural factors that may influence the prognosis of specific diseases
- Demonstrate patient education skills as part of the management of patient's problem.
- Demonstrate relevant, effective communication skills when talking to the patient, patient's family and other medical staff
- Identify verbal and non-verbal behaviour when communicating with the patients, their family and the medical staff

**Procedure:**

- The procedure is aimed at introducing the interns to rural community, its people, their health care needs, and the details of functioning as a rural community based team. This training includes the following activities –
- Acquisition of *human relation skills* to interact and communicate with rural population
- Improving *clinical decision skills* in the form of taking cases, analysing them in the context of socio-environmental factors and providing therapeutic / management solutions
- Developing *health education skills* so as to educate the population on disease prevention and health promotion, including nutrition and lifestyle counselling
- It has to be remembered that the learners will have some understanding of skills listed above during their course of study. The attempt in this project is to connect those understandings to the rural health concerns.

**Location:**

The program may be organised at the Rural Peripheral Centres of recognised Homeopathy Medical College / Primary Health Centre / Community Health Centre / Rural Health Centres of recognised Community Based Organisations / Non Governmental Organisation that have capacity and infrastructure for homeopathy based training.

**Evaluation:**

A 360° evaluation – continuous and end-of-the-posting, including self-, peer-, supervisor- and external-evaluation, as per the evaluation parameters prepared for the purpose.

**Outcomes:**

*At the end of the posting, the internee would –*

- Have become sensitive to community health needs and identify him/herself with such healthcare delivery
- Apply the principles of homeopathy for the individual and epidemic morbid expressions in the community
- Develop team spirit for the promotion of community health
- Make proactive efforts to actively assist community health efforts under NRHM

**Annexure – 1****Course Content**

- United Nations' Document on Millennium Development Goals
- Charter of NRHM, with specific reference to the component 'Mainstreaming AYUSH into NRHM': [http://mohfw.nic.in/NRHM/Documents/Mission\\_Document.pdf](http://mohfw.nic.in/NRHM/Documents/Mission_Document.pdf)
- Role of Homeopathy in Community Health: [www.homeopathyeducation.blogspot.com](http://www.homeopathyeducation.blogspot.com)
- <http://indianmedicine.nic.in/>
- <http://mohfw.nic.in/NRHM.htm>
- [http://www.cchindia.com/community\\_medicine.htm](http://www.cchindia.com/community_medicine.htm)

**Annexure – 2****Internship Training for Rural Orientation****Checklist 1 – Evaluation of Clinical work in OPD / Mobile Unit**

Name of the student:

Name of faculty / observer:

Date:

Sl no	Items for observation	Poor	Below avr	Average	Good	V. good
		0	1	2	3	4
1	Regularity of attendance and Punctuality					
2	Interview Skills					
3	Interaction with colleagues and supportive staff					
4	Maintenance of case records					
5	Presentation of cases					

	during rounds					
6	Investigations work up					
7	Bedside manners					
8	Rapport with patients					
9	Counselling patients' relatives					
10	Overall quality of ward work					
Total score						

### Annexure – 3

#### Internship Training for Rural Orientation

##### Checklist 2 – Evaluation of work in Community

Name of the student:

Name of faculty / observer:

Date:

Sl no	Items for observation	Poor	Below avr	Average	Good	V. good
		0	1	2	3	4
1	Preparedness to involve in community					
2	Reverence for local traditions / culture					
3	Receptivity for local health needs					
4	Communication with the population and leadership					
5	Conveying health values to target groups					
6	Motivating population to volunteer for improving hygiene and sanitation					
7	Organising population for health education and screening					
8	Explaining social welfare schemes of government for community empowerment					
9	Correlating clinical knowledge to provide innovative solutions in community context					
10	Providing leadership in community health care					
Total score						

### Annexure – 4

#### Internship Training for Rural Orientation

##### Checklist 3 – Evaluation of Clinical presentation

Name of the student:

Name of faculty / observer:

Date:

Sl no	Items for observation during presentation	Poor	Below avr	Average	Good	V. good
		0	1	2	3	4
1	Completeness of history					
2	Whether all relevant points elicited					
3	Clarity of presentation					
4	Logical order					
5	Listing all positive and negative observations					
6	Accuracy of general physical examination					
7	Correct eliciting of all physical signs					
8	Proper interpretation of physical signs					
9	Diagnosis – basing on history and findings					
10	Investigations ordered – complete					
11	Investigations ordered – relevant					
12	Proper interpretation of investigations					
13	Defending the diagnosis					
14	Justification for differential diagnosis					
15	Any other observation					
Total score						

**Annexure – 5****Internship Training for Rural Orientation****Checklist 4 – Assessment of Academic Activities**

Date	Activity performed	Remarks of coordinator	Signature of coordinator
	Submission of the clinically recorded forms		
	Group discussions		
	Clinical presentation		
	IEC material prepared		
	Interaction with AWW, ASHA, School teacher, etc		
	Any other		

**Annexure – 6****Internship Training for Rural Orientation****Checklist 5 – Learner Self Evaluation Form**

Name of the student:

Name of Coordinator:

The following is a list of skills & knowledge imparted to you during training.

Please mark with (√) against each point in the appropriate box, whether you have 'improved', 'slightly improved' or 'not improved'

SI No.	Learning points	Improved	Slightly improved	Not improved
1.	List the Millennium Development Goals			
2.	Describe the components of National Rural Health Mission			
3.	Explain the role of homeopathy in NRHM			
4.	Discuss how community development affect changes in the lifestyles and epidemiologic transition of disease pattern			
5.	Describe health promotion aspects for prevention of chronic diseases			
6.	Determine the socio-cultural factors that may influence the prognosis of specific diseases			
7.	Demonstrate patient education skills as part of the management of patient's problem.			
8.	Demonstrate relevant,			

	effective communication skills when talking to the patient, patient's family and other medical staff			
9.	Identify verbal and non-verbal behaviour when communicating with the patients, their family and the medical staff			

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