

(DEEMED TO BE UNIVERSITY)

CBCS

Curriculum for Master of Hospital Administration (MHA)

2019-20

Published by

BLDE

(DEEMED TO BE UNIVERSITY)

Declared as Deemed to be University u/s 3 of UGC Act, 1956

The Constituent College

SHRI B. M. PATIL MEDICAL COLLEGE, HOSPITAL & RESEARCH CENTRE, VIJAYAPURA



BLDE

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SHRI B. M. PATIL MEDICAL COLLEGE, HOSPITAL AND RESEARCH CENTRE BLDE(DU)/REG/MHA/2019-20/1068 August 03, 2019

NOTIFICATION

Sub: Syllabus for Master of Hospital Administration programme with Semester based system

- Ref: 1. Minutes of the meeting of the 2nd Standing Committee of Academic Council of the University held on 13-06-2019.
 - 2. Minutes of the meeting of the 48th BoM of the University held on 18-07-2019.
 - 3. On approval of Hon'ble Vice-Chancellor Order No.490/A, dtd.01-08-2019.

In accordance with the Rule-09 (ii) of the Memorandum of Association (MoA) of the Deemed to be University, the Board of Management (BoM) has approved the Syllabus for **Master of Hospital Administration (MHA)** Programme following Choice Based Credit System (CBCS) with semester scheme in its 48th meeting held on July 18, 2019.

The Syllabus shall be effective from the Academic Session 2019-20 onwards, in the Constituent College of the University viz. Shri B. M. Patil Medical College, Hospital and Research Centre, Vijayapura.

To,
The Dean, Faculty of Medicine and Principal
Shri B. M. Patil Medical College,
Hospital and Research Centre,
Vijayapura

REGISTRAR REGISTRAR BLDE (Deemed to be University) Vljayapura-586103. Karnataka

Copy to:

- The Secretary, UGC, New Delhi
- The Controller of Examinations
- The Dean, Student Affairs
- The Prof. & HoDs of Pre, Para and Clinical Departments
- The Coordinator, IQAC
- PS to the Hon'ble Chancellor
- PS to the Hon'ble Vice-Chancellor

Preamble

The aim of the course is to impart a comprehensive knowledge and skills in the field of administration and management of the hospital.

Vision:

To Create a Discipline devoted to management and Administration in health care institutions

Mission:

- To integrate various multidisciplinary graduates in this post graduate course.
- To serve the society by drawing pool of talent to this course and to develop efficient Hospital administrators.

Objectives:

- To train students in the field of Administration and management.
- To provide scientific approach and optimal tools to improve managerial skills.
- To develop strategic thinking and critical awareness of their management style and consultancy weigh its appropriateness to deal with various professional group skilled and unskilled staff, patient and their families and members of the community.

Eligibility for Admission:

Students who have passed MBBS, BAMS, B.HMS, BDS, B.Sc. or any Bachelor Degree course (Health Sciences, Allied Health Sciences, Nursing, Law, Commerce, Art) of any approved University under UGC, with a minimum of 50% Marks in aggregate are eligible.

Duration: It in a 2-years (4-Semester) Full-Time Post Graduate degree course.

Intake: 04

COURSE OF STUDY:

- 1. The course shall have 2 semesters in First year and 2 semesters in the Second year.
- 2. Theory: Three hours of theory class work for five week days adds up to twenty (JS) hours of theory class work per week which includes didactic lectures, interactive sessions, seminars and tutorials. Course instruction is in English only.
- 3. Practical Training: The students shall spend 4 hours per day i.e. 20 hours per week for practical training. The duration of the training shall be 2 weeks (20 Hours) for Major departments and 1 week (10 hours) for Minor departments. They will prepare a brief report on department visit and present to the faculty. In each semester, students will be assigned to 6 departments; a total of 26 departments shall be covered.

Note: Daily three hours of theory classes and Four hours of practical training at the department for five week days, every week for twenty weeks will ensure Six hundred (585) hours of available training period during each semester. (Refer Table of Teaching Hours)

Electives: Every student should choose either Hospital Management or Health Management as one of the elective subject for specialization. This option should be expressed within one month of the commencement of the IV semester in Second year and the elective subject shall be intimated to the University through the principal. Once an elective subject is selected, no change shall be permitted.

Training, Teaching and Learning Activities:

A candidate pursuing the course shall work in the Department as a full time candidate. No candidate shall be permitted to run a clinic/laboratory/nursing home while studying.

Every candidate shall take part in seminar, group discussions, journal review meetings etc. every candidate shall attend teaching and learning activities during each semester as prescribed by the Department and not absent himself/herself without valid reasons.

A list of teaching and learning activities designed to facilities acquiring of essential knowledge and skills outlined is given below:

Lectures: For all subjects, lectures shall be conducted by the faculty.

Journal Club: Recommended to be held once a week. All the MHA candidates are expected to attend and actively participate in discussion and enter the relevant details in the log book. Further, every candidate must make a presentation from the allotted journal(s), selected articles with special emphasis on Hospital Administration topics.

Subject Seminar: Recommended once a week. All the MHA candidates are expected to attend and actively participate in discussion and enter in the log book the relevant details. Further, every candidate shall present a seminar on selected topics. The presentations would be evaluated using a checklist and would carry weightage for presentations would be evaluated using a checklist and would carry weightage for internal assessment.

Attendance and Monitoring Progress:

Attendance:

A candidate pursuing MHA course shall study for the entire period as full time candidate. No candidate shall join any other course of study or appear for any other examination conducted by this University or any other University in India or abroad during the period of resignation. Each semester shall be considered as a unit for the purpose of calculating attendance.

Every semester shall attend symposia, seminars, conferences, journal review meetings, dissertation review meetings and lectures during each year as prescribed by the Department/College/University and Not absent himself/herself without valid reasons.

Candidate who has put in a minimum of 80% of attendance in the theory and practical assignments separately shall be permitted to appear for University examination at the end of each semester.

Candidate will be allowed to appear the Semester IV examination only if the dissertation submitted is accepted.

Any candidate who fails to complete the course in the manner stated above shall not be permitted to appear for the semester University examinations.

Monitoring Progress of Studies

Log Book: Every candidate shall maintain a log dairy and record his/her participation in the training programs conducted by the Department such as journal reviews, seminars, etc. Special mention shall be made of the scientific presentations in conference by the candidate as well as details of assessment works like writing etc. submitted by the candidate. The work diary shall be scrutinized and certified by the Head of the Department and presented in the University viva-voce examination.

Sessional Examination: Records and marks obtained in sessional tests, seminars, journal club, field activities, and weekly written assignments which shall be maintained by the Head of the Department and shall be made available to the University.

Schedule of Examination

There shall be a University examination at the end of each semester for all four semesters and viva-voce at the end of semester IV (subjects of semester I, II, III, & IV). There shall be a dissertation presentation at the end of semester IV addition to viva voce.

MANAGEMENT OF HOSPITAL SERVICES: (Practical of Fifteen Days)

Objective: To make students familiar and conversant with planning, organization staffing, work scheduling, control of quality and cost of various service department of hospital. The course emphasizes on workflow analysis of records and statistics analysis of utilization of facilities and staff and need for development and growth.

- 1. Dietary Services
- 2. Biomedical Waste Management
- 3. Medical Records Department
- 4. Pharmacy
- 5. Stores and Material Management
- 6. Central Sterile Supply Department
- 7. Laundry & Linen
- 8. House Keeping
- 9. Security
- 10. Emergency Services
- 11. Mortuary
- 12. Out Patient Services
- 13. In Patient Services
- 14. Nursing Services
- 15. Critical Care Services
- 16. Operation Theatre
- 17. Radiology Services
- 18. Laboratory Services
- 19. Public Relations
- 20. Family Welfare Services
- 21. Administration and Personnel management Services
- 22. Accounting and Billing Services
- 23. Biomedical Engineering
- 24. Civil Engineering & Maintenance
- 25. Information Technology Department
- 26. Logistic Services

Details of field visit and field tour:

1. Compulsory visit

- a) Government sector: Sub center, PHC, CHC, Taluka Hospital, District Hospital Referral and Teaching Hospital to understand the distinctive role of each institution.
- b) Private/Voluntary sector: Community health projects/ programs Rehabilitation Programe, Geriatric care program. Hospital small Hospital, Medium size General Hospital, Large Hospital, understand distinctive role and ability to analyse how it fits into total health spectrum.

Optional but desirable areas National Institutions of high repute like NIMIIANS, Bangalore, speech and hearing institution, Mysore, National Nutrition Institute, Hyden-1 bad, CMC

Vellore, JIPMER, Pondicherry, AIIMS New Delhi, PGI Chandigarh) Well organized drug manufacturing unit, laundry, hospital/hotel or commercial, industrial (large will organized) kitchen or food processing industry.

EVALUATION SCHEME:

Eligibility for appearing at the University Examination:

Requirement of attendance shall be 80% If a Student short of attendance in any of the subjects, the candidate shall not be permitted to appear for the entire examination. Every student should complete & submit Synopsis in Second Semester and dissertation in fourth semester to get eligibility for examinations.

Internal Assessment:

First Semester – Theory:

Twenty marks will be assigned for internal assessment of which 10 shall be for Presentations in Area Presentations (practical), Seminars and Journal clubs, and 10 for sessional tests, Attending Conference, Class Attendance in each subject. A minimum of one sessional tests and one preliminary test shall be conducted in each subject and average of my two best marks obtained in the tests shall be taken into consideration for calculation of internal assessment. The average marks shall be reduced to 10 and combined to the marks obtained in seminars similarly reduced to 10.

Second Semester – Theory:

Twenty marks will be assigned for internal assessment of which 10 shall be for presentation in Area Presentations, Lion (Practical), Seminars and Journal Clubs, and 10 for sessional, Attending Conference, Class Attendance in each subject. A minimum of one sessional tests and one preliminary test shall be conducted in each subject and average of any two best marks obtained in the tests shall be taken into consideration for calculation of internal assessment. The average marks shall be reduced to 10 and combined to the marks obtained in seminars similarly reduced to 10.

Third Semester – Theory:

Twenty marks shall be assigned for internal assessment of which 10 shall be for Presentation in Area Presentation (practical), Seminars and Journals clubs, and 10 for sessional tests, Attending Conference, 1 ass Attendance in each subject. A minimum of one sessional tests and one preliminary test shall be conducted in each subject and average of any two best marks obtained in the tests shall be taken into consideration for calculation of internal assessment. The average marks shall be reduced to 10 and combined to the marks obtained in seminars similarly reduced to 10.

Fourth Semester – Theory:

Twenty marks will be assigned for internal assessment of which 10 shall be for presentations in Area Presetations (practical), Seminars and journal club, and 10 for sessional, Attending Conference, Class Attendance in each subject. A minimum of one sessional tests and one preliminary test shall be conducted in each subject and averC1ge of C1ny two best marks obtained in the tests shall be taken into consideration for calculation of internal assessment. The average marks shall be reduced to 10 and combined to the marks obtained in seminars similarly reduced to 10.

Practical Dissertation:

Every candidate shall carry out work on a selected topic under the guidance of a postgraduate teacher recognized for this purpose as a guide by the university. The dissertation shall be directly related to the area of specialization of individual student.

The results of the work shall be written and submitted in the form of a dissertation. The candidate shall start work on the title of the topic along with a plan of the proposed study (Synopsis) from the date of commencement of Fist Semester. The candidate shall submit the synopsis to the Registrar (Academic) of the University in the prescribed Performa for registration from the el ate of commencement of Second Semester as per dates notified by the University. No change in the topic shall be made without the prior approval from the university.

Two set of hard and soft copy (CD) copies if dissertation shall be submitted in printed and bound form, duly certified by the guide and through the Principal, to the Controller of Examinations from time to time, 3 months prior to the final examination on or before the prescribed date notified by the University.

The dissertation shall be evaluated by two examiners (One external and one internal, other than guide) appointed by the University.

The dissertation should be submitted with the following details Introduction, Aim & Objectives, Methodology, Review of Literature, observation and discussions, Conclusions and References. The written text or the project shall be not less than 50 pages and shall not exceed 100 pages. It should be neatly typed in 1.5 –line spacing on one side of A4 size paper and bound properly. The Project report shall be certified by the guide and the head of The department and forwarded to the university.

Guide: Faculty with Five years teaching experience in MHA in a University recognized institution or 10 year administrative experience in a recognized teaching hospital after Masters program in Hospital Administration/ Management — Masters in Hospital Administration — MHA, MSc. In Hospital Administration/ Hospital Management MBA in Hospital Administration/Hospital Management from a University Grant Commission recognized University or Faculty with 3 years of teaching and administrative experience after M.D. in Hospital Administration from a Medical College recognized by Medical Council of India.

A Co-guide may be included if the work requires contribution from other departments. Guide may be changed only with the prior permission from the university with substantiation.

Practical training: Assessment is done for each department posting as Area presentation in a log book prescribed format need to be maintained by each student.

To be eligible to appear for the university examination the student should get minimum 50% marks in internal assessment in both theory and practical assessment.

UNIVERSITY EXAMINATIONS:

There shall be four examinations one each at the end of each semester. Only those candidates who have requisite attendance and satisfactory progress, duly certified by the Head of the Department and also the Head of the Institution will be permitted to appear for the examination. The University shall notify the semester examination accordingly.

CRITERIA FOR PASSING:

In first, second and third semester, for a pass, a candidate shall secure in each subject a minimum of 50% marks in the University Theory Examination and an aggregate of 50% of the total marks for the subject i.e., marks obtained in theory and internal assessment together.

The candidate is allowed to carry over 1^{st} year semester papers in the 2^{nd} year. However, the candidate is required to pass 1^{st} , 2^{nd} & 3^{rd} semester papers before six months of appearing for the 2^{nd} year IV semester examination.

In the fourth semester for a pass, a candidate shall secure a minimum of 40% marks in the University theory examination in each subject 1md an aggregate of 50% of the total marks for the subject, which includes marks obtained in theory, internal assessment (theory) and separately 50% in the viva-voce examination (practical, viva-voce & internal assessment together).

Those candidates who fail in one or more subjects (papers) either in theory or practical, shall appear only in the subjects so failed theory or practical in the subsequent examination.

EXAMINERS:

For all the University examinations, there shall be two examiners (one internal + one external).

The criteria for appointment as examiners shall be:

- 1. Same as Guide above.
- 2. For Hospital Administration/Management related subjects, Professor or Associate or Assistant Professor of Hospital Administration or related allied course.
- 3. For Medical subjects, teachers of Community Medicine not below the rank of Assistant Professor from a Medical college, or a health professional institution.
- 4. For computer application in Health Care, MIS specialists.
- 5. For Research Methodology, Professor in Bio statistics or community Medicine.

Sl. No.	Paper	Subject Code & Title First Semester	Marks
1 MHA-I-1 T	MHA-I-1 T	Principals of Managements and	100
	141111111111	Managerial skills	100
2	MILLATOT	Organization behavior, Principals of	100
2	MHA-I-2T	Communication	100

3 MHA-I-3		Statistics, Research Methodology &	100	
3	MINA-1-3	Quantitative Techniques	(Internals)	
4	Subsidiary Subjects	Basic Human Anatomy and Basic		
4	Substatary Subjects	Physiology		
		Second Semester		
1	MHA-II-1T	Preventive and Social Medicine	100	
1	WIIII II II	(PSM)	100	
2	MHA-II-2 T	Health Finance and Health	100	
		Economics	100	
		Health/Hospital Management		
3	MHA-III-3	Organization (HMO) & Medical	100	
		Ethics		
		Third Semester		
		Health Management Information		
1	MHA-III-1T	system HMIS & Computer	100	
		Applications		
		Principals of Accounting, Cost		
2	MHA-III-2T	Accounting, Management Accounting	100	
		& Material Management		
3	MHA-III-3T	Management of Human Resource and	100	
		Industrial Relations	100	
		Common Pathological Conditions &		
4	Subsidiary Subject	Basic Concept of Pharmacology	100	
		Basics		
		Fourth Semester		
1	MHA-IV-1T	Hospital Planning and Project	100	
-		Management	100	
		Health Management or Hospital		
		Management (Elective Subjects)		
2	MHA-IV-2T	Note: Students should give written	100	
	141111111111111111111111111111111111111	application to the Principal of the	100	
		preference before commencement of		
		fourth semester		
3	MHA-IV-3T	Social Marketing Management &	100	
		Quality Management for Hospitals	100	
4	MHA-IV-4T	Practical and Comprehensive Viva	100	
		Grand Total	1500	

Note 1): Student has to pass subsidiary subject in respective semester to become eligible for the semester exams.

Note 2): Student will undergo training in BLDE (DU) Shri. B. M. Patil Medical College Hospital and attached Urban & Rural Health Centers.

Teaching Hours:

Semesters	Theory Hours	Department Posting Hours	Total Hours
I	285	300	585

II	285	300	585
III	240	345	585
IV	255	330	585
Total	1065	1275	2340

SYLLABUS PART-1

SEMESTER-1

Paper-1

PRINCIPALS OF MANAGEMENT AND MANEGERIAL SKILLS

- 1. History and growth of management sciences Classical, Behavioral and Management sciences.
- 2. Evolution of management theories.
- 3. Traditional management vs. modern health care management, system Approach.
- 4. Planning, Organizing, Directing, Co-ordination, Controlling
- 5. Decision Making
- 6. Motivation and Work group (Team work)
- 7. Management by objectives, and future real it centered Manger
- 8. Analysis of reasons for success and failure
- 9. Challenges to Manager

MANAGEMENT SKILLS:

- 1. Analytical skill and Decision Making models.
- 2. Time Management.
- 3. Delegation (detailed process of delegation) and organizational control.
- 4. Assertiveness.
- 5. Organizational Culture.
- 6. Managing Change, managing Conflict.
- 7. Interpersonal skills.
- 8. Managerial style flexibility.
- 9. Leadership style and theories.
- 10. Presentation skill.
- 11. Conference heading (Exercires, Syndicates, role play and Laboratories).
- 12. Employee Centered Management.
- 13. Management of walking around the hospital.
- 14. Team building, team work and Co-ordination.
- 15. Organization wide planning.
- 16. Sensitive training for self-development, self-analysis and improvement of effectiveness through change in management style, Management orientation.

Sl.No.	Name of the Book	Author's Name
1	Principals & Practice of Management	L. M Prasad- S Chad
2	Essentials of Management	Koontz- Tata McGraw Hill
3	Principals of Management	Peter Drucker

ORGANIZATION BEHAVIOUR AND PRINCIPALS OF COMMUNICATION ORGANIZATIONAL BEHAVIOUR:

- 1. Group Dynamics in their work environment and anthropology, Physiology.
- 2. Leadership style, organizational development, Supervision, Participation, International and Group dynamics, organizational development and training.
- 3. Organizational Environment, Influence of organizational structure and design, organization, work culture, working climate, team building.
- 4. Social Environment, Formal and Informal Organizations.
- 5. Organizational Climate, Conflict management of Change, Stress and Counseling.
- 6. Latest changes and development in Organizational behavior, Organizational Effectiveness and Modern Organizational Structure.

PRINCIPALS OF COMMUNICATION:

- 1. Basic principles of communication.
- 2. Congruity, authenticity, Clarity.
- 3. Role of perception, empathy, formal, informal, upward, downward communication.
- 4. Role of grapevine
- 5. Importance of two-way communication.
- 6. Barriers of communication.
- 7. Communication network and organization wide communication.
- 8. Oral communication, Listening, Participation, Feed-back, Committees, Meetings, Meeting Minutes & Agenda Group Discussions, case study, Interviews.
- 9. Written Communication, Principles of Business Communication, trade enquiry's & replies, Quotation, Orders, Trade references, State Inquiries, Complaints & Adjustments, Colllsections, Import trade, Insurance, bank, Reports, Service/Project reports, Appointments, Circulars, Memos & Warnings, Forms, media/press.
- 10. Administrative communication.
- 11. Special characteristics of health communication.
- 12. Strategies for Managerial communication.
- 13. Counseling in health care & its different methods.

Sl.	NAME OF THE BOOK	AUTHOR
No.		
1	Organizational Behavior	Stephen Robbins
2	Principles & Practice of Management	L. M. Pradad
3	Health Education Effective	V. K. Mahajan
	communication methods	
4	Effective Communication methods	Asha Kaul

STATISTICS, RESEARCH METHODOLOGY & QUANTITATIVE TECHNIQUS

STATISTICS:

- 1. Introduction & Importance of Basic Statics.
- 2. Data Collection, Data Presentation.
- 3. Measure of Central Tendency.
- 4. Measure of Variation, Standard Deviation, Skewness and Kurtosis.
- 5. Completion and Regression Analysis.
- 6. Forecasting and Time Series Analysis, Hypothesis Testing and Chi Square Test.
- 7. Probability statistics, Utility theory, Decision Tree.
- 8. Bio-Statistics.
- 9. SPSS

RESEARCH METODOLOGY:

- 1. Research planning, defining problem, developing hypothesis, testing of hypothesis.
- 2. Research design, various methods of collecting data.
- 3. Developing questionnaire, pilot studies.
- 4. Sampling design. Sampling size, objective process for collection of data.
- 5. Format for presentation, writing dissertation and documentation.

QUANTITATIVE TECHNIQUES:

- 1. Introduction to Operation Research.
- 2. Techniques: Queuing Theory.
- 3. Decision Making Model, Utilization Model, Poisson model.
- 4. Transportation & Assignment Problems.
- 5. Inventory management Techniques, Replacement Analysis.
- 6. Game Theory, PERT, CPM, Simulation.
- 7. Multi objective programming, Dynamic programming.

Sl.	NAME OF THE BOOK	AUTHOR
No		
1	Biostatist & Research Methodology	BK Mahajan C R
2	Research Methodology	Kothari
3	Quantitative Techniques for Management	V. K. Vohra
4	Effective communication methods	Asha Kaul

Subsidiary Subject

Human Body: Basic Anatomy and Physiology_Basic Anatomy

- 1. Introduction to body as a whole.
- 2. The skeleton.
- 3. Basic Anatomical terminology.
- 4. Osteology Upper limb clavicle, scapula, humorous, radius, ulna.
- 5. Lower limb femur, hipbone, sacrum, tibia, fibula.
- 6. Vertebral column.
- 7. Thorax Intercostal space, pleura, bony thoracic cage, ribs, sternum & thoracic vertebrae.
- 8. Head and Neck.
- 9. Lungs Trachea, bronchial tree.
- 10. Heart-Surface anatomy of heart, chambers of the heart, valves of the heart, major blood vessels, pericardium, and coronary arteries.
- 11. Abdomen.
- 12. Blood Vessels (Vein + artery) Anatomy / Course of Vessel.
- 13. Myology Muscles of thorax, muscles of upper limb (arm & fore arm).

Basic Physiology

- 1. Electrolytes and body fluids.
- 2. Blood.
- 3. Circulatory system.
- 4. Lymphatic system.
- 5. The respiratory system.
- 6. Essential nutrients.
- 7. The digestive system.
- 8. The urinary system.
- 9. The skin.
- 10. The nervous system.
- 11. The special senses.
- 12. The endocrine system.
- 13. The reproductive system.
- 14. The joints.

Sl. No.	NAME OF THE BOOK	AUTHOR
1	Human Anatomy	Prof. Samar Mitra
2	Human Anatomy	Prof. A. K. Dutta
3	Text Book of Human Physiology	Dr. C. C. Chetterjee

SEMESTER-2

Paper-1

PREVENTIVE & SOCIAL MEDICINE:

- 1. Concept of health & disease and well being.
- 2. Natural history of disease and role of hospitals to offer various levels of care.
- 3. Prevention aspect of diseases.
- 4. Principles & Dynamics of disease transmission.
- 5. Changing pattern of disease.
- 6. Concept of health indicators.
- 7. Principles of disease Control.
- 8. Types of epidemiological studies.
- 9. Case Control, Cohort Studies, RCI'.
- 10. Classification of Disease, Notification Disease.
- 11. Death Certificate.
- 12. Health as a part of Community Development WHO.
- 13. Interdisciplinary approach of health care, Social & Preventive Medicine.
- 14. Five-year plans and health committees. Health policy: Bore Committee, Jain Committee, Mudaliar Committee, Mukherjee Committee, Srivastava Committee Reports, National Health policy, five year plans.
- 15. Community Diagnosis, Setting Priorities
 - a) Cross infection control
 - b) Sterilization/Disinfections, Hospital waste disposal.
 - c) Medico Social work
 - d) Welfare and Rehabilitation Services
- 16. National Health Programmes.
- 17. Maternal and Child health: Family Welfare.
- 18. Principles of Occupational health, Environmental health.
- 19. Population Policy & Demography.
- 20. Vital Statistics.
- 21. Sub-Center, PHC, CI-IC, District Hospital, IPI-IS Standards.
- 22. WHO & Voluntary Health Agencies.
- 23. Need and Demand for health care, Role of different types of health care institution from grass root level to specialty level.
- 24. Indigenous syste1n of medicine.

25. Comparative International Statistics, International perspective and International health problems.

Sl. No.	NAME OF THE BOOK	AUTHOR
1	Text Book Social & Preventive Medicine	Part & Park
2	National Health Programme	N. Kishore
3	TextBook of Global Health	Anne- Emanuellebrin, Yogan Pillay and Timothy H. Holtz, Oxford Publishers

HEALTH FINANCE & HEALTH ECONOMICS:

HEALTH FINANCE:

- 1. Financing of Health, Investment Management
- 2. Modes of finance-----of Health
- 3. Health Insurance Evolution of Insurance, IRDAL, TPA.
- 4. Time Value of Money Wealth Maximization & Profit Maximization.
- 5. Sources of finance, Raising Fund, Issue of Debenhi res, Shares, Bounds, Convertible and.
- 6. Bonds, Loan from Commercial Bank, Industrial and Development Bank of India.
- 7. Determinations of Capital, Fixed and Working Capital.
- 8. Capital Budgeting, Capitalization of Surplus and other Important Considerations for Asset Management.
- 9. Break Even Analysis.
- 10. Leverage
- 11. Financial feasibility of programs, cost benefit analysis of programs and analysis of outcome.
- 12. Fiscal Policy, Monetary Policy.

HEALTH ECONOMICS:

- 1. Understanding of economics.
- 2. Advance Microeconomic: Consumer and producers theory, principles of equilibrium-uncertainly, rational expectative equilibrium. Nations and their efficiency properties.
- 3. Applied Microeconomics analysis relevant to a wide range decision making and policy formation problems in the public and private sector.
- 4. Macroeconomics theory and policy: Keynesian, Monetary, Neoclassical, reappraisal of Keynesian economics and post Keynesian macroeconomics, believer of major indicator of macroeconomic performance such as unemployment, inflation, productivity and economic growth.
- 5. Cost Benefit Analysis (CBA): Welfare foundation of CBA, Measurement of cost and benefit, risk and discounting.
- 6. National; Income, Circular Flow, Measurement, Difficulties in Measurement Uses.
- 7. Analysis of Demand and supply elasticity of Demand, Elasticity of supply.
- 8. Concept of normal prefect Competition.
- 9. Imperfect Competition Monopoly, Duopoly, Monopolistic Competition.

- 10. Price Fixation.
- 11. Theory of Distribution.
- 12. Principle of substitution.
- $13.\ Marginal\ Productivity,\ Wages,\ rent,\ Interest,\ profit.$
- 14. Business Economic and Health Economics.
- 15. Expenditure on health as investment.

Subsidiary Subject

Common Pathological Conditions and Concept of Pharmacology:

- 1. Basic concepts of pathogenesis of common diseases (of each body system).
- 2. Basic concept of interpretation of investigations reports.
- 3. Cancer
- 4. Cosmetics & Drug Act.
- 5. Clinical Trails & GCP.
- 6. Schedule H, Commonly used Medicine in a Hospital, Narcotic drugs, use and abuse of drugs.
- 7. Dispensing of medicine.
- 8. Pharmacokinetics, Pharmacodynamics'.
- 9. Pharmacy andtherapeutic Committee.
- 10. Drug Formulary, IP, BP.
- 11. Medication Errors, Sentinel Events.
- 12. Drugs store, drug stock/purchase of medicine, oxygen, I/V Fluid, Chemicals etc.

Suggesting Reading:

Reference Text Book

Sl. No.	NAME OF THE BOOK	AUTHOR
1	Essentials of Medical Pharmacology	Dr. K. D. Tripathi
2	Robbins's Textbook of Pathology	Robbins, Cortan, Kumar
3	Text Book of Pharmacology	R. S. Satoskar

Health / Hospital Management Organisation (HMO) & Medical Ethics

HOSPITAL ORGANIZATION:

- 1. Managed Care / Health Orghanization (H.M.O)
- 2. Privatization and healthcare
- 3. Public Private Partnership
- 4. Ward Administration and management
- 5. Performance Evaluation of a Hospital
- 6. Operational and Management control in health care, Management by Objective
- 7. Continuous quality improvement, defining standard and use of advanced qulity management techniques
- 8. Review and Evaluation Continuous review of system, policy, procedure, process of updating, working out index and updating, working out indexes and updating, evaluation of various services
- 9. Productivity study development of productivity standards work standards utilization standards and indices

MEDICAL ETHICS:

- 1. Principle of Medical Ethics
- 2. Improvement of Medical ethics, Institutional ethics Committee
- 3. Malpractice and Negligence, Professional Secrecy, Irrational Drug therapy
- 4. Understanding of patient's right, Autonomy and H1 forn N1 ed Consent
- 5. Beginning and end of life, Right to life, assisted reproductive technology, Care of terminally ill and euthanasia
- 6. Introduction & legal Procedures Court, Affidavit, Evidence, Complaint, Investigation, Oath, Offence, Warrant, Summons, Inquest
- 7. Introduction to India Constitution Preamble, Fundamental Rights
- 8. MLC cases study
- 9. Medico legal problems in relation to health administration
- 10. Consumer protection Act and Hospitals
- 11. Laws related to Medical Procedures Medical Termination of Pregnancy Act 1971 (MTP Act), Prenatal Diagnostic Techniques, Regulation & Prevention of Misuse Act 1994 (PNCT Act), Transplantation of human organs Act 1994, Bio- medical wWaste Handing & Management Rules.
- 12. MCI's Code of Cunduct

SEMESTER-3

Paper 1

Health Management information system SMIS & Computer Applications HEALTH MANAGEMENT INFORMATION SYSTEM (HMIS)

- 1. Objective of HMIS/Need and purpose of MIS.
- 2. Information system present at District level, State level and Country.
- 3. Development of MIS/major functions of MIS.
- 4. Computers of MIS.
- 5. Uses of MIS in district/state Health Management.
- 6. Case studies of MIS in Health Planning, Monitoring and evolution.
- 7. Surveillance of Disease/Forecasting disease our break.
- 8. Medical research
- 9. Network/Information Technology.

COMPUTER APPLICATION

- 10. Introduction to computers-hard ware, software Machine language, binary system.
- 11. Introduction of system in Study, System Analysis and System Designs.
- 12. Design flexibility, scope of up gradation, interphasing.
- 13. Applications of computer.
- 14. Storing and preservation of information/record.
- 15. Optimum utilization of LAN/WAN/MAN system.
- 16. Difference modules used in EDP through ERP system like;
- 17. Registration, OPD, Admission, Discharge, Billing, Emergency, Laboratory, Nursing Station, Operation.
- 18. Theater Stores, Pharmacy, Pay-roll, SAP (Systems, Applications & Products in Data Processing) and Envision system, Management.
- 19. Information System.
- 20. Maintenance of Computer including its accessories.
- 21. Updating on modules on need based
- 22. Application of anti virus system.
- 23. Outpatient/Medical Record/Audition assimilation, classification and analysis of work statistics.
- 24. Financial Accounting, payroll, billing analysis of financial data, financial information system.
- 25. Inventory management and control.
- 26. Drugs and Pharmaceuticals.

- 27. General stores.
- 28. Asset Accounting-maintenance planning.
- 29. Medicaal Research.
- 30. Networking and information Technology.
- 31. Tele Medicine.

Principal of Accounting, Cost Accounting & Management Accounting ACCOUNTING:

- 1. Definition, Accounting cycle, Rules of Debit and Credit, Assets, Liabilities, Networth.
- 2. Operation of Bank Account, Bank Reconciliation.
- 3. Cash and Annual accounting, revenue and Capital Expenditure.
- 4. Preparation of Cash book, Journals, Ledger, Closing Entries.
- 5. Calculation of Depriciation.
- 6. Preparation of Trail Balance, Arithmetic Accountancy, Accounting Accountancy.
- 7. Basic Structure of Income, expenditure and Balance Sheet.
- 8. Preparation of Financial Statement and change against profit and appropriation of profit.

COST ACCOUNTING:

- 1. Meaning, Definition, Significance of Cost Accounting, its relationship with Financial Accounting & Management Accounting.
- 2. Classification of Costs.
- 3. Defining Cost Centers.
- 4. Cost Control.

Management Accounting:

- 1. Basic Principals of Management Accounting, Interpretation of Accounting data.
- 2. Measurement of performance, Managing reporting.
- 3. Objective, Purpose, organization, Scope.
- 4. The organization of a hospital for accounting control and accounting plan.
- 5. Accounting for hospital revenue hospital expenses.
- 6. Departmentalization of income and expenses.
- 7. Chart of Accounts, Account Descriptions, Standard Accounting books and forms.
- 8. Internal Control and Internal Auditing.
- 9. Trust Funds and Investment Accounting, Fund rairing, plan fund accounting.
- 10. Accounting of Specific purpose Funds.
- 11. Hospital rate setting.
- 12. Preparation of Operation Budget, capital Budget and budgetary Control.
- 13. Responsibility Accounting.

Sl. No.	NAME OF THE BOOK	AUTHOR
1	Financial Management	Dr. S. N. Maheshwari
2	Business Finance	Dey & Dutta
3	Principles of Accounting	M. B. Kadkol
4	Financial Management	L. M. Pandey

MATERIAL MANAGEMAENT IN HEALTHCARE:

- 1. Principal, policies and procedure for Material management.
- 2. Nature and Scope of the Material Management.
- 3. Organizing purchases, storage issue, effective utilization of material and asset accounting.
- 4. Classification, codification, Standardization, Simplification.
- 5. Inventory control, Quality control and Value Analysis.
- 6. Store Management: Store organization, receiving and issuing stores, accounting, storage of equipment and storage methods.
- 7. Functions of Purchase Department and Purchase Committee.
- 8. Vendor Analysis and Vendor Development.
- 9. Tender System.
- 10. Purchase Record, Purchase Budget and Control, Quality Control.
- 11. Purchase of high value capital equipments, feasibility study
- 12. Equipment Maintenance Program.
- 13. Asset Accounting, Annual verification of Assets, Aging of Assets.
- 14. Condemning Board, Disposal of Condemned articles-Transportation.

Sl. No.	NAME OF THE BOOK	AUTHOR
1	I-IosEital Store Management	Shakti Gupta & Kant
2	Materials Management	Balakrishnan Sundaram
3	Inventory Control	A. C. Dutta

MANAGEMENT OF HUMAN RESOURSE AND INDUSTRIAL RELATIONS:

MANAGEMENT OF HUMAN RESOURSE IN HEALTH CARE:

- 1. Human Resource Management
- 2. Manpower Planning Process
- 3. Job Analysis and job Description Personal Record
- 4. Recruitment and Selection
- 5. Interview & Orientation
- 6. Job Evaluation
- 7. Appraisal of Performance, Developmental Review and Feedback Encouragement
- 8. Training & Development
- 9. Compensation Policy, Salary and Wage Administration
- 10. Incentive, Bonus, Promotion
- 11. Discipline and Disciplinary Action
- 12. Collective Bargaining 1) Dealing with union
- 13. Management Development, Rejuvenation Occupational health Safety, Hygiene, Employee welfare.

INDUSTRIAL RELATIONS IN HEALTH CARE:

- 1. Definition, Objectives, Conditions essential for good Industrial Relations, Courses of Poor industrial Relations.
- 2. Dispute Relations
- 3. Labor Law: Industrial Dispute Act, Trade Union Act, Factories Act, Shops and
- 4. Establishment Act, Minimum Wage Act, Provided fund Act, Payment of reality Act.
- 5. Kind and formations of contracts: Breach of contracts, Remedies and Damages, Law of Torts, sales of Goods Act, Negotiable Instruments Act, Evidence Act.
- 6. Medical Licensure Law, the doctor-Patient relationships, Medical malpractice, Quality and Standard of Medical Care, Medical Negligence, Medical Consent, Emergency care, Consumer Protection Act.
- 7. Statutory & Non-Statutory measures, Role of labor lawyer, Advisor consultant.

Subsidiary Subject

Common Pathological Conditions & Basic Concept of Pharmacology:

Common Pathological Conditions:

- 1. Basic concepts of pathogenesis of common diseases
- 2. Basic concepts of interpretation of investigations reports

Suggested Reading:

- 1. Robbin's Textbook of Pathology Robbin, Cotran, Kumar
- 2. Textbook of Microbiology Anantanarayan & Paniker

Basic concepts of Pharmacology:

Commonly used medicine in hospital, Narcotic drugs, use and abuse of drugs. Dispensing of medicine, drugs store, drug stock/purchase of medicine, oxygen, I/V Fluid, Chemicals etc.

Suggested readings:

* Textbook of Pharmacology: Dr. K. D. Tripathi

SEMESTER-4

Paper-1

HOSPITAL PLANNING AND PROJECT MANAGEMENT

HOSPITAL PLANNING AND PROJECT MANAGEMENT:

- 1. Role of Hospital in Community, Different types of Health Facilities mid hospital, Regional Planning-a system approach.
- 2. Service Planning- analysis of (Demographic and epidemiological data to assess the health need of community analysis of available facilities).
- 3. Determining the size and type of hospital, potentiality for future development and growth.
- 4. Preparation of master plan, Flexibility in planning provision for future development and growth.
- 5. Statutory requirements for planning.
- 6. Site survey, Infrastructure and facilities planning.
- 7. Architect's Brief.
- 8. Planning of Out-patient Services, Emergency care, Ambulatory Care, ICU, Ward Planning, Blood Bank, Laboratory, Radiology (AERB Guidelines).
- 9. Domiciliary Care-Hainevisits, extended care.
- 10. OT-Zoning and Circulation pattern.
- 11. Hospital Sign.

Sl. No.	NAME OF THE BOOK	AUTHOR'S NAME
1	Hospital Planning &	BM Sakharkar
2	Hospital Planning & Designing	Shakti Kumar

Paper-2 (Elective Subjects)

Hospital Management of Health Management Elective Subject

Following are Elective Subject:

- 1. Hospital Management
- 2. Health Management

Note: The syllabus for the above elective subject shall encompass the first, second, third and fourth semester theory and practical postings.

QUALITY MANGEMENT IN HEALTH CARE:

- 1. Fundamentals of Quality Management, Understanding and skills required for supporting Quality Management in an organization, CQI in healthcare, implementation TQM.
- 2. Quality Management Programme, ISO clause, quality manual, quality of clinical services, Critical Pathways, NABL, NABH, JCI, BIS.
- 3. Understanding of patient and bringing necessary improvement in the process of delivery of services.
- 4. Training and Development of staff, staff attitude. Motivation and Functioning as team, Personnel and Professional value system.
- 5. Quality techniques, Quality of assurance procedure, Demming's Principles, Juran Trilogy, Kaizen, Philip Crosby's Principles, Quality Circles.
- 6. Audit: Defining audit protocol, Audit team, duties and responsibilities of audit team. (Medical Audit, Nursing Audit and Clinical Audit)
- 7. Developing standards- comparing the standards with other institutions, National and International Standards, Review and modification of standards.
- 8. Process of collection of data, comparing with standard and reporting the outcome. General system of Review and Control.
- 9. Death (mortality) review, Review of stillbirth, premature, underweight babies.
- 10. Review of infection.
- 11. Post Operative Complication review, Post Delivery Complication Review, Post Anesthesia Complication Review.
- 12. Antibiotic Audit and their area of Review.
- 13. Discharge status- cured, controlled, aggravated, died.
- 14. Left against medical advice agreement of Preliminary Diagnosis with final diagnosis, Investigations supplements prelhninary and final diagnosis, Percentage of unnecessary and final diagnosis.
- 15. Unusual incidents in hospital/sentinel events.
- 16. Quality indicator/key performance indicators.
- 17. Average length of stay-trend.
- 18. Average waiting time-OPD, Casualty, Investigation, Pharmacy.
- 19. Patient Satisfaction survey.
- 20. Hospital Committee.

Social Marketing Management & Quality Management in Healthcare:

SOCIAL MARKETING MANAGEMENT:

- 1. Theory and concept of Public Relations, Role of public relation staff.
- 2. In service training in communication, public dealing, helpful attitude and behavior, promptness, empathy.
- 3. Basic concept of Marketing Management.
- 4. Marketing Environment, market Segmentation.
- 5. Consumer Behavior.
- 6. Marketing for nonprofit Organization.
- 7. Concept of marketing program.
- 8. Simple market survey for identification of largest group, service need growth potential.
- 9. Product, Product Mix and product life cycle.
- 10. Service Marketing, patient care and communication.
- 11. Pricing of service.
- 12. Customer satisfaction, value and retention.
- 13. Liason with Government Agencies, third party reimbursement and health schemes.
- 14. Social aspects of marketing.
- 15. Disturbance and supply chain management.
- 16. Advertising and Branding.
- 17. Marketing promotional activities.
- 18. Corporate marketing

Reference Text Books:

Sl. No	NAME OF THE BOOK	AUTHOR'S NAME
1	Marketing Management	Philip Kotler
2	Services Marketing	Valarie Zeithaml, Mary Bitner

Practical & Comprehensive Viva:

The syllabus covered in Paper 4 is all the subjects of MHA Semester 1, 2, 3 and 4.

On the recommendation of Fourth Semester, student should write an application addressed to Principal regarding the preference for elective subject. Once accepted, the elective subject cannot be changed.

Scheme of Examinations for all Theory Subjects in All 4 Semesters:

Sl. No.	Semester	Subjects	IA+Theory	Grand Total
1	Semester 1 to Semester 4	All Papers	20+80	1200
2	Semester 4	Practical & Comprehensive Viva	20+80	100

Distribution of Marks Practical and Comprehensive Viva:

Sl.	Internal	Viva	Dissertation	Total Marks
No	Assessment			
1	20	40	40	100

SEMESTER-1

Sl. No.	Paper	Subject	Credit Hours
1	MHA - I- 1T	Principles of Management & Managerial Skill	2
2	MHA - I- 2T	Organization Behavior & Principles of Communication	2
3	MHA - I- 3T	Statistics & Research Methodology and Quantitative Techniques	3
4	Subsidiary Subject	Basic Human Body Anatomy & Basic Human Body Physiology	6
5		Practical (Department & Ward Posting)	13
		Total	26

SEMESTER - 2

Sl. No.	Paper	Subject	Credit Hours
1	MHA - II- 1T	Preventive & Social Medicine (PSM)	4
2	MHA - II- 2T	Health Finance & Health Economics	4
3	MHA - II - 3T	Health/Hospital Management and Medical Ethics	3
4		Practical Department and Ward Posting	13
5		Synopsis	1
		Total	25

SEMESTER - 3

Sl. No.	Paper	Subject	Credit Hours
1	MHA - III- 1T	Health Management Information System	2
1	WITTA - III- II	and Computer Application	2
		Principle of According, Cost	
2	MHA - III- 2T	Accounting, Management Accounting &	3
		Material Management	
3	MHA - III- 3T	Management of Human Resource and	2
3	МПА - III- 31	Industrial Relations	2
4	Subsidiary	Common Pathological Conditions &	4
4	Subject	Basic Concepts of Pharmacology	4
		Practical Department & Ward Posting	12
		Dissertation	2
		Total	25

SEMESTER - 4

Sl. No.	Paper	Subject	Credit Hours	
1	MHA - IV- 1-T	Hospital Planning & Project	1	
1	MITIA - IV - I-I	Management	4	
2	MHA - IV- 2-T	Health Management or Hospital	2	
2	MHA - IV - 2-1	Management (Elective Subject)	2	
3	MHA - IV- 3-T	Social Marketing Management &	4	
3	MITIA - IV - 3-1	Quality Management in Health Care	4	
4		Practical Department & Ward Posting	12	
5		Dissertation	2	
		Total	24	
		Grand Total	100	

Cumulative Grade Point Average (CGPA)

Letter Grades and Grade points equivalent to percentage of Marks and performances

10 Point Grade Scale

Percentage of Marks Obtained	Letter Grade	Grade Point	Performance
91.00 – 100	0	10	Outstanding
80.00 – 89.99	A+	9	Excellent
70.00 - 79.99	A	8	Good
60.00 - 69.99	B+	7	Fair
50.00 - 59.99	В	6	Average
Less than 50	C	0	Fail
Absent	AB	0	Fail

1. Conversion of Grades in to GPA:

GPA = Credits * Grade points / Total Credits

1. **Cumulative Grade point Average (CGPA)** of all 4 semester will be calculated as: Total No. GPA / NO. of semester.