

NATIONAL POSTGRADUATE MEDICAL COLLEGE OF NIGERIA



POSTGRADUATE DIPLOMA CURRICULUM
FOR HEALTH SYSTEM MANAGEMENT

FACULTY OF PUBLIC HEALTH AND
COMMUNITY MEDICINE

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**FACULTY OF PUBLIC HEALTH AND COMMUNITY MEDICINE
NATIONAL POSTGRADUATE MEDICAL COLLEGE OF NIGERIA
(NPMCN)**

**TRAINING CURRICULUM
FOR POSTGRADUATE DIPLOMA**

IN

HEALTH SYSTEM MANAGEMENT

2022

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1.0 INTRODUCTION

The National Postgraduate Medical College of Nigeria (NPMCN) was established by the National Postgraduate Medical College Decree No. 67 of 24th September, 1979, now Cap N59 Laws of the Federation 2004. The Faculty of Public Health and Community Medicine, one of the faculties under the National Postgraduate Medical College is responsible for training of specialist public health physicians in Nigeria with skills and competences to practice public health in Nigeria and beyond. Such training has often required very rigorous procedures and involving Primary, Part 1 and Part 2 examinations and spanning a period of at least six years. Since then the College has trained many doctors in the field of public health. Despite this laudable effort there still remains a need for more manpower specialists in public health to take care of the ever challenging health issues in Nigeria.

The NPMCN has encouraged the establishment of a postgraduate diploma program in Faculty of Public Health and Community Medicine (FPHCM) to fill-in this manpower gap and also provide knowledge and competences in certain subspecialties of public health to doctors in other specialties of medical practice. Therefore, this curriculum is a guide to the training of these doctors in Health System Management (HSM) subspecialty of Public Health and Community Medicine (PHCM).

1.1 MISSION

The mission of the Faculty of Public Health and Community Medicine, National Postgraduate Medical College is to promote the highest level of academic and professional training of doctors in Public Health and Community Medicine in line with the best global standards.

1.2 VISION

To develop human resource for health that meets international standards utilizing global best training standard in the subspecialty of Health System Management.

1.3 Objectives of the Faculty of Public Health and Community Medicine in Health System Management)

The educational objectives are to:

- i. Strengthen accredited training institutions to ensure that trainees are exposed to the best academic and professional training.
- ii. Ensure and maintain highest standards for learning and practice of **Health System Management** for continued academic development.
- iii. Evaluate and certify trainees in **Health System Management** using phased, reliable and valid assessment methods.
- iv. Promote academic excellence and professionalism through the inculcation of attitudes of honesty and accountability, with sincerity and precision in academic and professional thoughts, words and actions.

1.4 AIM AND GOAL OF THE POSTGRADUATE DIPLOMA PROGRAMME

The aim of the Postgraduate Diploma in Health System Management is to develop human resource for health that meets international standards utilizing global best training practices in the sub-specialty of Health System Management. This curriculum defines what is to be learned and how best it should be learned. Formal learning revolves around four key components: learner, facilitator, curriculum, and

milieu. Curriculum, being only one of four distinct components, must be considered holistically, rather than in isolation. The responsibility for understanding the content, context and processes of the curriculum, accepting to learn, adapting positively to the prevailing milieu and recognizing learning opportunities is that of the doctor who is the most important component of this formal education process.

The trainers/facilitators responsibility is to support learning by appreciating the objectives of the curriculum, ensuring an optimum learning environment and creating learning opportunities. The students have the challenge of managing their educational programme, while the trainers have the challenge of verifying that the learning that occurs is in the right direction (congruence with the academic and professional expectations of the faculty and college). Both trainees and their trainers have obligations to monitor and evaluate progress in learning, using self, peer, as well as formative and summative evaluations. In the light of advances in medical knowledge and technology and the demands for quality assurance and cost-effectiveness, as well as the increasing need for thinking and practice to be based on sound management, epidemiological, clinical, laboratory and reviewed documented evidence, standards in training and evaluation will necessarily change with time thus necessitating periodic review of the curriculum and assessment methods.

2.0 GENERAL OVERVIEW OF POSTGRADUATE DIPLOMA IN HEALTH SYSTEM MANAGEMENT

The Postgraduate Diploma program training system involves the trainees, the community, other health professionals in the health team, the trainers, within the training institutions, the assessors (examiners), the Faculty and the College. The learning and practice approaches will be population and client centered within a community-oriented milieu. Ethical considerations demand that trainees should acquire professional Public Health competence through principled practice and generation of goodwill, at the individual, institutional and community levels. A field experience Logbook will be used to document exposure and proficiency.

3.0 SPECIFIC PRACTICE AND LEARNING DIRECTIONS

The specific practice, learning and evaluation directions are defined by group consensus and require collective compliance with the following concepts:

- i. The Faculty's consensus national Community Medicine approach is the Population System Approach, that is, a health system approach to population health that entails a broad knowledge of the community in developing an approach which encompasses all components of the health system as well as stakeholders and establishes priorities for action.
- ii. Expertise in assessing and synthesizing information on health status and health service utilization data, in identifying desired outcomes and developing evidence-based strategies to reach these outcomes.
- iii. Competence in making a community diagnosis, which is a quantitative and qualitative description of the health of citizens and the factors that influence their health. It identifies problems, proposes areas for improvement and stimulates action.
- iv. Application of management and epidemiological methodology, that is, empirical, inductive, and refutable reasoning in addressing health issues. Management relies on and respects only empirical findings.
- iv. Competence in identification and resolving management challenges in health system

4.0 SPECIFIC OBJECTIVES OF THE POSTGRADUATE DIPLOMA PROGRAM

At the end of the postgraduate diploma program, the trainees should have acquired enough scientific knowledge, skills, and practical experience to be able to:

- i. Appreciate health system and Public Health implementation and interventions
- ii. Demonstrate adequate pre-requisite knowledge of the four (4) basic Public Health subspecialties (Epidemiology; Biostatistics; Environmental Health and Health promotion/education).
- iii. Identify and proffer solutions by applying appropriate measures of management at the primary, secondary and tertiary levels to health challenges of public health importance.
- iv. Work effectively as a member of health team at all levels

5.0 LEARNING OUTCOMES

A graduate of the Postgraduate Diploma in Health System Management should be able to:

- i. Quantitatively and qualitatively assess the population's health and health needs, including managing, analyzing, interpreting, and communicating information that relates to the determinants and status of health and well-being and allows development of effective action.
- ii. Develop what is required to influence the development of policies, implement strategies to put the policies into effect and assess the impact of policies on health.
- iii. Lead teams and individuals, build alliances, develop capacity, work in partnership with other practitioners and agencies and effectively use the media to improve health and well-being.
- iv. Promote the health of populations by influencing lifestyle and socio-economic, physical, and cultural environment through methods of health promotion and health education, directed towards populations, communities, and individuals.
- v. Protect the public's health from communicable and environmental hazards by application of a range of methods including hazard identification, risk assessment and the promotion and implementation of appropriate interventions.
- vi. Support clinical governance, quality improvement, patient safety, equity of service provision and prioritization of health and social care services.
- vii. Collect, generate, synthesize, appraise, analyze, interpret and communicate epidemiologic intelligence that measures the health status, risks, needs and health outcomes of defined populations.
- viii. Conduct quality Research in Health System Management

6.0 ADMISSION REQUIREMENT

To be eligible for admission into the program, the candidate must have met the following conditions

- i. Have MBBS or BDS degree
- ii. Full registration with MDCN
- iii. Pass the examination/aptitude test designed to screen candidates for such purpose

7.0 COURSE DURATION

The duration for the programme shall be a minimum of 12 months (divided into two semesters that comprises

- i. Four weeks intensive in-persons contact
- ii. Online (virtual) delivery of contents and presentations

8.0 FORMAT OF TRAINING

On admission, all trainees will be exposed to some of the subspecialties of Public Health. Exposures are through didactic learning in the form of lectures, seminars and tutorials using the hybrid method (Physical and Virtual) as well as practical/field exposures to relevant health units and institution they could acquire knowledge and skills of health system management. Details of the courses are as contained in the modules to be covered during the program.

9.0 COURSE REQUIREMENT

A minimum of **48** Credit Units, from lectures / tutorials, seminars, field activities and project is required for graduation.

9.1 COURSE CREDIT UNITS

- i. One hour lecture/tutorial weekly for each semester (15 weeks) is 15hours equals 1 credit unit
- ii. Three hours of seminar weekly for each semester (15 weeks) is 45hrs equals 1 credit unit
- iii. Daily posting to a minimum of 8 hours exposure for skills/competencies acquisition within maximum of 5 days a week for 4 weeks in each semester equals 4 credit units.
- iv. Candidates are required to earn at least 48 credit units, to qualify for graduation.

10.0 COURSE CONTENT

S/N	MODULE	COURSE CODE	CREDIT UNIT	TOPICS	Weighted (%) of course coverage
	Principles of Epidemiology	HSM 811	2	Definition of terms and basic concepts in Epidemiology: Epidemiology; transmission of Communicable and non-communicable disease; Epidemiologic triad; basic study designs; summarizing data and data collection	10
1	Health Policy	HSM 813	2	The role of the health sector in national development, Public policy-making processes, , The policy environment, Health decision-making	15
		HSM 815	2	Historical perspective of health in national development plans in Nigeria. The national health policy of Nigeria. Levels of health care - nature, general characteristics and inter-relationship; constitutional responsibilities for health care in Nigeria	
		HSM 817	1	Comparative international appraisal of health policy in developed and developing countries. Contemporary policy issue	
2	Fundamentals of Health Economics	HSM 819	2	Health economics – definition, basic concepts, scope, uses. The health sector with the macro economy, Microeconomic principles – demand and supply, methods of pricing; concepts of marginal analysis and opportunity cost, etc.	15
		HSM 821	1	Economic evaluation of health programmes – concept of economic efficiency; types of economic evaluation measurement and valuation of costs and consequences.	
3	Health Planning and Management	HSM 823	2	The management process in the context of health care: historical perspectives, modern management concepts, principles and functional elements.	15

	t – general principles, techniques and tools	HSM 825	2	Health planning –historical perspectives; uses and scope; planning approaches and processes; strategic planning techniques; action planning techniques; quantitative techniques in health planning; plan implementation and evaluation, feedback mechanisms and re-programming	
		HSM 827	1	The organization of health services: organization, structure and design.	
		HSM 829	1	Interpersonal and organizational communication in health management; conducting meetings, etc.	
		HSM 831	1	Evaluation of health services – basic concepts & general principles, types of evaluation:- input, process output and outcome	
		HSM 833	1	Quality assurance in health care	
		HSM 835	1	Health management information systems	
		HSM 837	1	Social marketing of health programmes	
		HSM 839	1	Health systems research as a management tool	
		HSM 841	1	Public health legislation	
		HSM 843	1	The functions of the Medical Officer of Health	
		HSM 845	1	The management of change	
4	Human Resources for Health	HSM 822	1	The personnel management function	10
		HSM 824	1	Health manpower planning, recruitment and selection	
		HSM 826	1	Leadership. Motivation and team building-	
		HSM 828	1	Supportive supervision and control	
		HSM 830	1	Performance appraisal, health manpower development, training needs assessment; training strategies and methods.	
		HSM 832	1	Conflict resolution; industrial relations, collective bargaining and labour laws.	
		HSM 834	1	Problems of management of general support services, maintenance of building, vehicles, equipment, etc.	

5	Management of Material Resources	HSM 836	1	Purchasing and supply procedures. Stores management. Management of drugs and consumables. Inventory management.	10
		HSM 838	1	Office management - management of work - place, patient flow, paperwork, time, etc.	
6	Health Care Financing	HSM 840	1	The financial environment, laws and financial regulations	15
		HSM 842	2	Health care financing - sources of finance: short-term, long- term, relative merits and demerits, the National Health Insurance Scheme.	
		HSM 844	2	Cost-recovery mechanisms; management of funds Budgeting and budgetary control – general principles of budgeting; budget preparation, budget implementation, and budget performance monitoring.	
		HSM 846	2	Basic accounting records and procedures; the appraisal of financial and cash flow statements; internal financial control procedures; auditing procedures, appraisal of audit reports	
7	Organized national programmes of medical care	HSM 848	2	Objective, nature, content and managerial problems of various 10 specialized health programmes organized by:-Federal, state and local governments- Voluntary and non-governmental organizations.	10
	Project	HSM 850	6	Student project	
	TOTAL CREDIT		48		

***Elective Courses: Candidates could choose no more than two (2) courses from any of the fundamental Public Health subspecialties as electives.**

10.1 STUDENT PROJECT HSM: 850

Candidates shall develop and submit projects before the final examinations. This shall be either an assessment of an existing project/intervention (secondary data) identified by the candidate or a review of any relevant topic in Public Health. That is both primary and secondary data are allowed.

The project shall have the following format and structure.

Title page: The title is to be written as **“Project for Final Examination.”** This is then followed by the name of the candidate, his/her training institution's address; followed by statement: **“submitted to the Faculty of Public Health and Community Medicine, in partial fulfilment of the requirements for the award of diploma in Health System Management in Faculty of Public Health and Community Medicine, of the National Postgraduate Medical College of Nigeria”**. Finally, the month and year of the examination at which the book is presented, for example “November 2022”.

The student project shall consist of the following opening pages and chapters

Certification page (*Should contain Name, Signature, Date and Address of Supervisor*)

Dedication (optional)

Acknowledgements (optional)

Table of contents

Chapter One. Introduction

Chapter Two: Literature Review

Chapter Three. Methods

Chapter Four. Results/Findings

Chapter Five. Discussion, Conclusions and Recommendations

- The conclusions and recommendations for all stakeholders including the Faculty, the training institution, the department, as well as, for colleagues and future Trainees
- Referencing style should be Harvard applying Vancouver Referencing in the text and listing the references at the end of the report.

11.0 ASSESSMENT/EXAMINATION METHOD

11.1 Formative Assessment (30%): The Logbook will be used to assess the student.

11.2 Summative Assessment (30%): Final Examination Format

Components	Assessment type	How will it be assessed	Resources	Time
Theory	MCQ	Standard Setting Method (Angoff)	CBT	60 minutes
Project defense/ Orals	Candidate will be examined on theory and Practice of Health System Management	60% on Principles and practice of HSM and 40% defense of Field Posting Report	Examiners	30 minutes 60 minutes

11.2 ASSESSMENT SCORING AND GRADING OF PERFORMANCE

Scoring of the different components of the assessment shall be as follows:

Scores	Level of Pass	Grade	Grade Level
≥ 70	Very Good Pass	A	P+1
60 – 69	Good Pass	B	P+
50 – 59	Pass	C	P
40 – 49	Borderline	D	P -
< 39	Fail	E	P -1

11.3 AWARDING THE POSTGRADUATE DIPLOMA DEGREE

Any student whose CGPA falls below 2.50 in any semester shall withdraw from the programme. Students must complete the course work before being allowed to defend project. Any student who fails to complete course work and defend project within the stipulated maximum period of stay (18 months) will be considered to have abandoned the programme.

