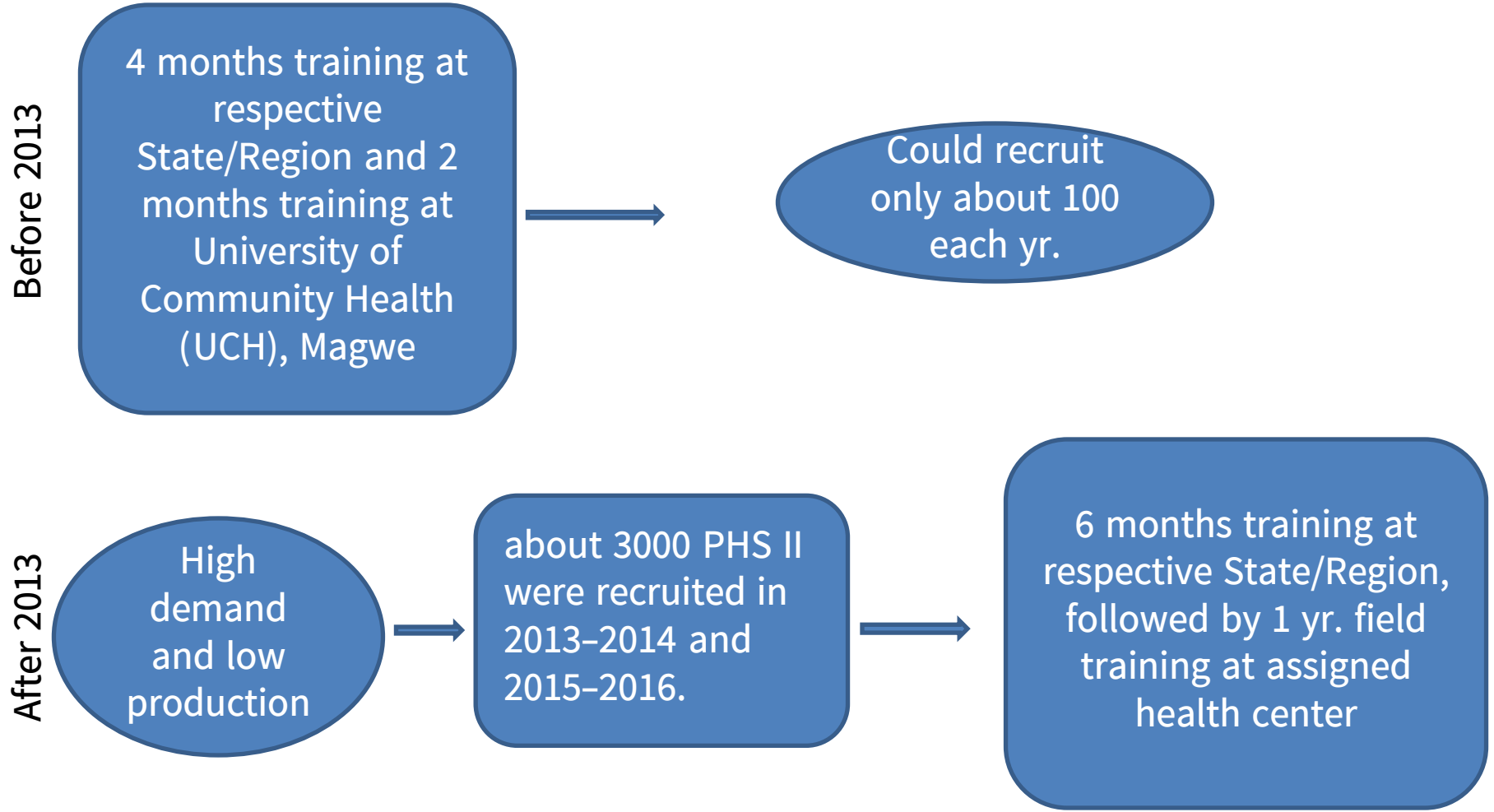


# Overview of Training Program

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Department of Public Health



# Background of PHS II Training



# MoHS's concern and plan

- Not enough training for PHS II
- Different training quality at different States and Regions
- In order to promote health literacy of community and learning capacity of Basic Health Service Professionals (BHSP), the MoHS has been supplying mobile tablets to all BHSP, and about 5,000 among 10,000 PHS II have already received it.
- According to current job description, PHS II are mainly assigned for prevention and control of communicable and non-communicable diseases, and promotion of environmental health.
- So, it is planned to conduct the reorientation training for all PHS II, focusing on those subjects through their mobile tablets.



# Objectives of Training

1. To promote PHS II's capacity for promotion of public health care services
2. To conduct reorientation training for PHS II using mobile tablets and appropriate methods during COVID-19 period



# Proposed schedule

No.	Activities	Responsible division/faculty	Lead persons	Period
1	Development of Draft curriculum	<ul style="list-style-type: none"> <li>All programs/ Division under DoPH</li> <li>UCH, Magwe</li> </ul>	DyDG (Public Health)	May – June, 2020
2	Finalization of Curriculum and Central Level TOT Training for 17 S/R training teams	<ul style="list-style-type: none"> <li>All programs/ Division under DoPH</li> <li>UCH, Magwe</li> </ul>	DyDGs (Public Health, Disease Control, CEU, A&F), Rector of UCH	June, 2020
3	State/Regional Level TOT Training at 17 S/R	<ul style="list-style-type: none"> <li>All S/R Training teams</li> </ul>	State/Regional Public Health Director	June, 2020
4	Township Level Training at all Townships	<ul style="list-style-type: none"> <li>All Township Training teams</li> </ul>	Head of Township Public Health Department	July – August, 2020



# Proposed schedule of Training at Township level

## For those who received mobile tablets

- Face to face training for 5 days at Township Public Health Department (last wk of July, before monthly CME program)
- 6 weeks training at respective RHC/sub-RHC through mobile tablet and field practice
- Course assessment and mid-evaluation will be done at the end of 1st month (through mobile tablet or after CME program).
- Final assessment and evaluation will be done and certificate will be provided at Township Public Health Department at the end of 2 months training.



# Proposed schedule of Training at Township level

## For those who have not received mobile tablets yet

- Face to face training for 1 week at Township Public Health Department (last wk of July, before monthly CME program)
- 3 weeks training at respective RHC/sub-RHC through field practice
- Course assessment and mid-evaluation will be done at the end of 1st month (after CME program).
- Face to face training for another 1 week at Township Public Health Department and 3 weeks training at respective RHC/sub-RHC through field practice
- Final assessment and evaluation will be done and certificate will be provided at Township Public Health Department at the end of 2 months training.



# Financial arrangement for training costs

- Training costs including mobile top up cost for trainers and trainees will be used from World Bank component 2 budget.

## Proposed training contents with allotted time

It will be discussed during TOT.





Thanks for your attention and  
welcome for discussion.

