

प्रदेश लोक सेवा आयोग, बागमती प्रदेश

स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक प्रतियोगितात्मक परीक्षाको पाठ्यक्रम

पाठ्यक्रमको रूपरेखा:- यस पाठ्यक्रमको आधारमा निम्नानुसार दुई चरणमा परीक्षा लिइने छः

प्रथम चरण:- लिखित परीक्षा

पूर्णाङ्क:- २००

द्वितीय चरण:- अन्तर्वार्ता

पूर्णाङ्क:- ३०

प्रथम चरण:- लिखित परीक्षा योजना (Written Examination Scheme)

Paper	Subject		Marks	Full Marks	Pass Marks	No. of Questions & Weightage	Time	Remarks
I	General Subject	Part I A: Management	50	100	40	6X5=30 (Short answer) 2X10=20 (Long answer)	3 hrs	Note: One long Question and four short questions must be asked from group A. One long Question and two short questions must be asked from group B.
		Part II General Health Issues						
II	Technical subject			100	40	4X15=60 (Critical analysis) 2X20=40 (Problem solving)	3 hrs	

द्वितीय चरण:-

Subject	Full marks	Exam type	Time allowed
Interview	30	Oral	

- लिखित परीक्षाको माध्यम भाषा नेपाली वा अंग्रेजी अथवा नेपाली र अंग्रेजी दुवै हुन सक्नेछ ।
- प्रदेश स्वास्थ्य सेवा अन्तर्गतका सबै समूह/उपसमूहहरूको लागि प्रथम पत्रको पाठ्यक्रमको विषयवस्तु एउटै हुनेछ । तर द्वितीय पत्रको पाठ्यक्रम समूह/उपसमूह अनुरूप फरक फरक हुनेछ ।

प्रदेश लोक सेवा आयोग, बागमती प्रदेश

स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक प्रतियोगितात्मक परीक्षाको पाठ्यक्रम

३. प्रथम पत्रको लिखित परीक्षा समूह/उपसमूहहरूको लागि संयुक्त रूपमा एउटै प्रश्नपत्रबाट एकैदिन वा छुट्टाछुट्टै प्रश्नपत्रबाट छुट्टाछुट्टै दिन पनि हुन सक्नेछ । द्वितीय पत्रको परीक्षा पनि समूह/उपसमूह अनुसार अलग अलग दिन छुट्टाछुट्टै प्रश्नपत्रबाट हुनेछ ।
४. प्रथम पत्रको **Part I** मा **group A & group B** का लागि छुट्टाछुट्टै उत्तरपुस्तिका हुनेछ र **Part II** को लागि छुट्टाछुट्टै उत्तरपुस्तिका हुनेछ भने द्वितीय पत्रको लागि प्रत्येक पत्रको लागि प्रत्येक प्रश्नका उत्तरपुस्तिकाहरू छुट्टाछुट्टै हुनेछ ।
५. यस पाठ्यक्रम योजना अन्तर्गतका पत्र/विषयका विषयवस्तुमा जेसुकै लेखिएको भए तापनि पाठ्यक्रममा परेका कानून ऐन नियम तथा नीतिहरू परीक्षाको मिति भन्दा ३ महिना अगाडि (संशोधन भएका वा संशोधन भई हटाइएका) कायम रहेकालाई यस पाठ्यक्रममा परेको सम्झनु पर्दछ ।
६. पाठ्यक्रम लागू मिति:-

प्रदेश लोक सेवा आयोग, बागमती प्रदेश
स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक प्रतियोगितात्मक
परीक्षाको पाठ्यक्रम

Paper I: General Subject

A. Management

1. Management: - concept, principles, functions, level, and role of managers in context to Hospital Management.
2. Planning: concept, principles, quarterly / annual action plan
3. Leadership: concept, leadership styles, Qualities of leadership
4. Human resource management
5. Conflict / Stress/ Burnout: concept, causes, levels of conflict and strategies for conflict, stress and burnout syndrome prevention and management.
6. Supervision, monitoring and evaluation
7. Performance appraisal
8. Motivation
9. Quality assurance on health care services
10. Clinical Audit
11. Clinical protocols on relevant health services and procedures
12. Coordination, cooperation and communication
13. Health Management Information System (HMIS)
14. Budget formulation and implementation,
15. Accounting, auditing and inventory management
16. Research: Evidenced based practice on health care services, Design, methodology of research. ethical issues
17. Good Governance: concept and characteristics

B. Relevant Legislations and Cross Cutting Issues

1. Provisions of Province Civil Service Act and Regulation of Bagamati Province
2. The Constitution of Nepal.
3. Current periodical plan of Bagamati Province
4. The Public Procurement Act, 2063
5. The Public Procurement Rules, 2064
6. The Prevention of Corruption Act, 2059

प्रदेश लोक सेवा आयोग, बागमती प्रदेश
स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक प्रतियोगितात्मक
परीक्षाको पाठ्यक्रम

7. Money Laundering Prevention Act, 2064
8. Right to Information Act, 2064
9. Sustainable Development Goals.
10. Effectiveness of Service Delivery through Citizen Charter, Social Audit, Public Hearing, Grievance Handling and Information Technology,
11. Social Inclusion, Reservation and Positive Discrimination
12. Public Health Service Act, 2075

Part II: General Health Issues

1. National Health Policy, 2076
2. Second long-term health plan (1997-2017)
3. Health services act 2053, health service regulation, 2055
4. Introduction of Ministry of Social Development of Bagamati Province
5. International health agencies: role and responsibilities of WHO, UNICEF, UNFPA and interagency relationships
6. Concerned Professional Council and related Act, 2052
7. Health professional Code of Ethics and Code of Conduct.
8. Indigenous and traditional faith healing and health practices
9. Health insurance and financing in health care
10. Public health: air pollution, domestic pollution, noise pollution
11. Importance of water, sanitation and hygiene in public health
12. Disaster preparedness plan and policy in the hospital and Province level
17. Health volunteers' involvement in health service delivery
18. Community involvement in health service delivery
19. Programme and activities of Government and NGOs of Bagamati province for the guardianless and shelterless destitute persons staying in a very difficult situation
20. Impact of the COVID-19 pandemic
21. Health in all policies
22. One health concept
23. Health Issues of 15th Five Year Development Plan

प्रदेश लोक सेवा आयोग, बागमती प्रदेश
स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक प्रतियोगितात्मक
परीक्षाको पाठ्यक्रम

Paper II: TECHNICAL SUBJECT

A. Introduction of Health Education and Health Promotion

1. Health Education
 - 1.1. Meaning, philosophy, aim and principles of health education
 - 1.2. Scope of health education- Individual, family, Community School, health care facilities, occupational setting
 - 1.3. Role of health education in public health programs and primary health care services
 - 1.4. Health Education for disaster prevention and management
2. Health Promotion
 - 2.1. Meaning and definition of health promotion; issues and challenges for health development
 - 2.2. Ottawa charter, Jakarta declaration and subsequent international conferences on health promotion
 - 2.3. Setting Approach in Health Promotion
 - 2.3.1. Health Promoting School - Meaning, concept and strategies (School Health Services, Healthful School Environment, Health Instruction and School Community Joint Actions)
 - 2.3.1.1. Adolescent health and sex education
 - 2.3.1.2. Life skill education (10 core skills)
 - 2.3.1.3. School health nurse intervention
 - 2.3.2. Health Promoting Hospital
 - 2.3.3. Health Promoting Workplace/office
 - 2.3.4. Health Promoting Community
 - 2.3.5. Health promoting industry and factory
 - 2.4. International and national commitment for health education and health promotion events - world health day, world no tobacco day and world AIDS day etc.
 - 2.5. International treaties on health education and health promotion - Framework Convention on Tobacco (FCTC) etc.
 - 2.6. Risk approach to health education and health promotion

B. Fundamentals for Health Education and Health Promotion

1. Communication in Health Education and Promotion
 - 1.1. Meaning, principles, elements of communication
 - 1.2. Theories and principles of mass communication
 - 1.3. Factors for effective communication
 - 1.4. Types of appeal for communication
 - 1.5. Message and its characteristics
 - 1.6. Communication methods
 - 1.6.1. Individual - interview, counseling
 - 1.6.2. Group - group discussion, demonstration, role play, seminar, workshop, symposium, panel discussion, drama (street performances)
 - 1.6.3. Mass - Radio, TV, Newspaper, Movie, Exhibition
 - 1.6.4. Folk - Folk song, folk dance, puppet show etc.

स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक
प्रतियोगितात्मक परीक्षाको पाठ्यक्रम

1.7. Risk Communication

2. Sociology and Social Psychology in Health Education and Health Promotion
 - 2.1. Meaning and relation between sociology, social psychology and anthropology in health education and health promotion
 - 2.2. Perception, knowledge, attitude and behavior
 - 2.3. Culture and its component
 - 2.4. Community development and community organization - process and approaches
 - 2.5. Change process and change agent
 - 2.6. Group Dynamics and Group Process
3. Learning Theories - classical and modern theories of learning (Pavlov, Thorndike, Skinner, Kurt Lewin, Kelman and Gestalts) and its application in health education and health promotion
4. Motivation and Health Belief Model - Maslow, Rosenstock, Kurt Lewin, Rogers, Festingers etc. for behaviour change model
5. Concept and application of Behaviour Change Communication
6. Components of health promotion, education and communication management, Planning, Organizing, human resources, financing, operation (action plan), monitoring and evaluation
7. Differences between information, education and communication (IEC) and Behaviour Change Communication (BCC) and Social behavioural change communication (SBCC), Integrated Marketing Communication for Behavioral Impact (IMC/COMBI)

C. Media for Health Education and Health Promotion

1. Classification and nature of health education and health promotion Media and methods
2. Mass media – electronic and Print media (Radio, FM, Television, Newspaper, Posters, Pamphlets, Leaflet, Booklets, Magazines, Email, Internet, Web hosting, online including social media .etc.)
3. Group and individual - projected, non-projected and 3 dimensional (Flip chart, Flannel graph, Flash card, Film strip, Slide, Video Film, Models, specimen, & real objects)
4. Media development format and process: Need assessment; setting target audience; developing and pre-testing of message concepts; developing draft or dummy materials; pre-testing of materials with respect to reason, process and methods; review and revision of materials; finalization, production and distribution of materials; dissemination of information, evaluation of its effect and continuity
5. Consideration for choosing media and methods for health communication
6. Use of computers for Graphic designing and Photoshop for the production audio visual aids

प्रदेश लोक सेवा आयोग, बागमती प्रदेश

स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक
प्रतियोगितात्मक परीक्षाको पाठ्यक्रम

7. Preparation and dissemination of health education, information and communication program guidelines
8. Overview of media materials distribution management including IEC clearing house management
9. Self-management and out sourcing of media/materials production, distribution and dissemination, including tendering and contracting process
10. Building organizational capacity to manage media-material resources

D. Curriculum Development and Training

1. Training introduction, process, theories, principles, type
2. Training need assessment, planning, implementation, monitoring and evaluation
3. Curriculum development models, methods and processes
4. Teaching learning process and lesson plan
5. Teaching learning methods and media – preparation of teaching learning material such as Transparency, Power Point presentation etc. and use of Over Head Projector, LCD Projector, Slide and movie Projectors)
6. Non- formal education and Adult learning
7. Different clinical and non-clinical health training planned and conducted in health system
8. Health training system and organization in federalism

E. Health Education and Health Promotion Program Planning, Implementation and Evaluation

1. Rationale and importance of a planned health education and health promotion programs at different level
2. Overview of the national health education program and activities in Nepal focusing local, provincial and federal level
3. Constitutional and executive role of NHEICC at federal level, health directorate at provincial level and municipalities at local level in health education and health promotion
4. Different health education program planning models - classical and modern (PIE, PRECEDE & PROCEED model for diagnosis, planning, monitoring and evaluation of health education and health promotion programs)
5. Health Education and Promotion Strategy Development
 - 5.1. Situation Analysis
 - 5.2. Approaches of Strategy Development
 - 5.2.1. Advocacy
 - 5.2.2. Social Mobilization/Social marketing/ Peer Education (Child to child) /Non-formal education
 - 5.2.3. Behavior Change Communication
 - 5.3. Segmenting Target Audience
 - 5.4. Objective Setting
 - 5.5. Deciding Message, Methods and Channel

प्रदेश लोक सेवा आयोग, बागमती प्रदेश

स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक
प्रतियोगितात्मक परीक्षाको पाठ्यक्रम

- 5.6. Development of Action Plan with respect to activities, resources, place, time frame, responsibility and allies.
- 5.7. Monitoring and Evaluation
 - 5.7.1. Monitoring of activities and events
 - 5.7.2. Impact, effect and process evaluation

F. Health Education and Health Promotion Aspect of Major Public Health Programs

- 1. PHC Priority Essential Health Care Services – Reproductive Health, Child Health (Integrated Management of Childhood Illness, Immunization, Vitamin A and other Nutrition Programs); Communicable disease control - TB, HIV/AIDS, Vector born disease, Hepatitis B, Leprosy etc. and rational use of drugs.
- 2. Non-communicable disease control program - risk assessment and control strategies and patient education
- 3. Environmental Health program
 - 3.1. Major Environmental Issues and its contribution in morbidity, mortality and environmental degradation
 - 3.2. Air pollution, its assessment and mitigation measures
 - 3.3. Sources of water, water quality assurance and household purification
 - 3.4. Solid waste and its management at community and household level
 - 3.5. Human excreta disposal management
 - 3.6. Fly and rodent control
- 4. Personal, domestic and community hygiene
- 5. Tobacco, drug abuse and Alcohol: effects, prevention and control

G: Management of human resource for health promotion and education

- 1. Distinction between professional, para-professional and lay health promotion and education human resources
 - 1.1. Professional health promoters, health educators, health media experts
 - 1.2. Health promotion, health education workers and information disseminators /volunteers
 - 1.3. Media designers, script writers, actors, artists
- 2. Survey of health promotion and education related human resources in Nepal including their categories, affiliated organizations, responsibilities and contribution made for health behavior changes and healthy population
- 3. Critical overview of status of requirement and production of health promotion and education human resources
- 4. Conduction of capacity building activities to develop knowledge, attitudes and skills individually and in groups for health promotion and education
- 5. Conduction of refresher program at various levels for health promotion and education

प्रदेश लोक सेवा आयोग, बागमती प्रदेश

स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक
प्रतियोगितात्मक परीक्षाको पाठ्यक्रम

6. Critical review of utilization status of health promotion and education human resources

H: Financing health promotion and education

1. Justification and critical appraisal of financing for health promotion and education sector
 - 1.1. Priority and attitudinal issues
 - 1.2. Adequacy of allocation
 - 1.3. Diversion of allocated resources
2. Survey of sources of financial resources for health promotion and education
 - 2.1. International, bi-lateral, national governmental and non-governmental resources
 - 2.2. Focus on financial resources: health promotion/education/communication
 - 2.3. Social marketing of health promotion and education communication media and materials
3. Cost-effectiveness and cost-efficiency in financing health promotion and education program, project and campaigns in terms of health behavior changes and healthy population

I: Development and maintenance of health promotion and education Management Information system (MIS)

1. Concept and components of MIS of health promotion, education, and communication
2. System of manual and computer entry of health promotion, health education, and health communication management information (MI)
3. Forwarding and reviewing the health promotion, education and Communication MI at local, provincial and federal levels for knowing the status of health promotion, education, and communication operations, population covered, behavioral changes, healthy population and environment, and planning for further operations
4. Orientation of relevant human resource on health promotion, education, and Communication MIS

J: Monitoring, supervision and evaluation of health promotion and education programs

1. Monitoring of health promotion and education
 - 1.1. Review of long term and short term milestones, indicators and means of verifications of behavioral change impact, outcomes and outputs as a result of health promotion and education intervention
 - 1.2. Setting organizational and or specific human resource health promotion and education program performance indicators
 - 1.3. Development and use of monitoring tools

प्रदेश लोक सेवा आयोग, बागमती प्रदेश

स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक
प्रतियोगितात्मक परीक्षाको पाठ्यक्रम

- 1.4. Description and analysis of the information from monitoring of health promotion and education program
- 1.5. Prescription of future actions to carry out health promotion and education appropriately and timely
2. Supervision of health promotion and education program
 - 2.1. Understanding the basic steps of supervision of health promotion and education
 - 2.2. Methods of supervision of health promotion and education program
 - 2.3. Levels of supervision: vertical and horizontal
 - 2.4. Specific tools to be used during supervision of health promotion and education program
 - 2.5. Supervision as mentoring and on-site coaching for health promotion and education program performance
 - 2.6. Supervision report and its implementation for effectiveness and efficiency of health promotion and education programs
3. Evaluation of health promotion and education program
 - 3.1. Concept of utilization-focused evaluation
 - 3.2. Criteria for evaluation of health promotion and education program: effectiveness, acceptability, appropriateness, equity and efficiency
 - 3.3. Areas and corresponding indicators of health promotion and education program evaluation
 - (a) Health promotion and education program design
 - (b) Health promotion and education program implementation processes
 - (c) Health promotion and education program output, outcome, impacts
 - (d) Listeners and viewers assessments
 - 3.4. Health promotion and education program evaluation methods and designs
 - (a) Survey method and designs: pre-post; cross sectional, comparison,
 - (b) Qualitative methods: focus group discussion; in-depth interviews
 - (c) Record including health promotion and education program management information review and analysis
 - 3.5. Description and analysis of evaluation information
 - 3.6. Interpretation and evaluative managerial decision making for continuation, modification and termination of health promotion and education program
4. Evaluation of health communication strategies/ programs and use of media
 - 4.1. Setting up verification indicators (qualitative and quantitative) for evaluation of:
 - (a) Effective interpersonal, group, and mass communication techniques
 - (b) Effective interpersonal, group and mass media for health communication

प्रदेश लोक सेवा आयोग, बागमती प्रदेश

स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, नवौं (९) तह, स्वास्थ्य शिक्षा प्रशासक पदको खुला र आन्तरिक
प्रतियोगितात्मक परीक्षाको पाठ्यक्रम

- 4.2. Preparation of prototype design for evaluation of interpersonal, group and mass health communication techniques and media using appropriate valuation system, methods and criteria
5. Conduction of monitoring, supervision and evaluation of all the health promotion and education activities at all levels, preparation and submission of report to the concerned authorities