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No. NHMHP-HWC0GEN/6/2022-HWC-Section- 11235
National Health Mission,
Directorate of Health Services,
SDA Complex, Kasumpti
Himachal Pradesh, Shimla-9

To

The Chief Medical Officers
Himachal Pradesh

Dated: Shimla-9, the May, 2023

Subject:- Guidelines for CHO Mentoring



Madam/Sir,

This is in reference to Gol's D.O No. NHSRC/11-12CP/08/MoFHF/P Dated 14.1.2022 which conveys that in order to impart regular mentoring to the emerging carder of CHOs, MoH&FW has planned out to roll out Mentoring Programme for CHOs across the country using a virtual platform.

Accordingly, State Guideline has been framed for implementing the Mentoring Programme for all the stakeholders.

You are requested, to get these guidelines implemented in letter and spirit.

Yours faithfully,

[Signature]
Mission Director (NHM),
Himachal Pradesh, Shimla-9
Email: md-hp-nrhm@nic.in
Dated, Shimla-9, the

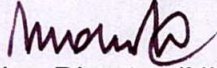


Endst. No. As above
Copy to:

1. The Secretary (Health) to the Govt. of Himachal Pradesh for information please.
2. The Executive Director, NHSRC, Gol for information please
3. The Director Health Services, Himachal Pradesh for information please.
4. The Director Medical Education, Himachal Pradesh for information and with the request to disseminate the guideline to all the Principals of Nursing Colleges/ Schools and ensure that the State mentors are spared time for CHO Mentoring as per guideline.
5. All the District Programme Officers (HWC) for information and necessary action.

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6. All the Block Medical Officers for information and necessary action please


Mission Director (NHM),
Himachal Pradesh, Shimla-9

Guidelines for CHO Mentoring- Himachal Pradesh

Background:

The National Health Policy, 2017 recommended strengthening the delivery of Comprehensive Primary Health Care (CPHC) and called for a commitment of two-thirds of the health budget to primary healthcare. Government of India launched the Ayushman Bharat program to provide universal access to CPHC through transformation of Sub Health Centers (SHCs), Primary Health Centers (PHCs) and Urban PHCs (UPHCs) to Ayushman Bharat – Health and Wellness Centres (AB-HWC).

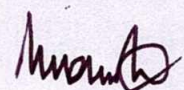
The AB-HWCs provide an expanded range of outpatient health services under CPHC including management of communicable and non-communicable diseases, RMNCHN, common Ophthalmic, ENT, Oral Health, Geriatric Medicine, and Palliative Health Care Services, alongside Emergency Services and implementation of National Health Programs. One of the key paradigm-shifts in organization of service delivery is creation of a new cadre to manage the SHC- HWCs i.e. mid -level health providers known as Community health officers.

CHOs at the AB-HWC are to perform 3 functions; clinical, public health and managerial.

Evidence and reports from technical experts have found that quality of training and learning varies. Gaps exist both in relevant skills and knowledge for the CHOs to provide defined services at the AB-HWC. Fortunately, where-ever there has been an investment in mentoring of CHOs, the service quality of CHO performance has shown improvement. Hence, a CHO Mentoring Project has been conceived which would be undertaken by National Health Systems Resource Centre (NHSRC), a technical support institute under the National Health Mission with technical support from CMCVellore Distance Education Unit (CMC-DEU).

Aim:

1. Nurture leadership qualities along with enhancement of public health, managerial and clinical skills among CHOs equipping them to 'resolve more'.
2. Develop and demonstrate a contextually relevant and scalable CHO mentorship program



The project will be implemented in 2 phases.

- i. Pilot phase – 2 years
- ii. Scale up phase

For this project a pool of state mentors would be created to cater to the need of the state.

The mentoring plan will include the following key components:

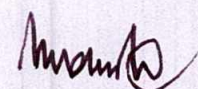
E-learning content – An online platform has been created to transact the training for State Mentors and CHOs. The e-learning package encompasses skills and competencies of CHOs through problem-based self-learning modules, video lectures, video- conferencing and innovative teaching methods. The course will also emphasize on ethics, values and social responsibility. It also includes integration and delivery of wellness components appropriate to the context, build leadership capabilities to lead the team of MPWs and ASHAs and coordination skills to establish linkages with local self- government institutions and leverage community collectives such as Village Health Sanitation and Nutrition Committees (VHSNC), Self-Help Group (SHG) etc.

The content in the form of online modules has been designed and digitized for interactive learning of state mentors and CHOs. It includes videos, animations, extra reading materials, articles etc., in addition to the printed modules. The modules will be delivered through an online platform and will use tablets or any other internet enabled devices, for content delivery to the CHOs. The curriculum will also include formative and summative assessments for the trainers and the trainees.

The time commitment for the state mentors would be as follows:

State Mentors - Time Commitment

Key Activity	Duration	Self-study Modules & Weekly evaluations	Group Training & Mentoring	Personal Mentoring	Other Activities	Total Hours Per Week
Training	3 months	10 hours a week (2 hours a day - protected)	4 hours a week	20 mins with National Mentors once a	-	14 HOURS & 20 MINS



		time - 5 days a week)		week		
Observed mentorin gof CHOs	6 months -		8 hours a week (2 hours a day - protected time with groups of 30 CHOs - 4 days a week)	10 Hours (with 6 CHOs for 20 mins each, daily)	4 hours aweek*	22 HOURS
Extended mentorin gof CHOs	3 months -		4 hours a week (2 hours a day - protected time with groups of 30 CHOs - 2days a week)	10 Hours (with 6 CHOs for 20 mins each, daily - 5 days a week)	2 hours aweek * (Above activitie sdone on alternat e weeks)	16 HOURS
Extended Mentorin gof CHOs	Ongoing -		1 hour a week (with groups of 30 CHOs)	9 Hours (with 6 CHOs for 20 mins each, for 4days a week and 3 CHOs on Day 5)	1 hour aweek **	11 HOURS

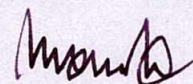
*1 hour each for i. mentoring by NMs, ii. Remedials for CHOs iii. Weekly monitoring and reporting iv. prep for next week

**Meeting NMs once a month, remedials once a month, reporting and planning once in 2 weeks

Mentoring

The mentoring of CHOs would include -

- Professional mentoring:** CHO curriculum will be delivered through asynchronously delivered self-paced online modules. The state mentors will supplement this, by running weekly synchronous live sessions with the CHOs, via online platform. The



training will use information and communication technology (ICT) to incorporate a blended learning framework to deliver the course content comprising interactive lectures, patient discussions, group activities, simulations, etc.

- ii. **Personal mentoring:** The state mentors will interact with CHO mentees via phone calls on a periodic basis through a well-planned schedule. The mentors would enquire about their implementation of learning, professional and personal challenges and wellness. The State mentors would guide the mentees on arriving at possible solutions as well as flagging some problems to relevant stakeholders for appropriate actions.

The time commitment for CHOs would be as follows:

CHO -Time Commitment

Key Activity	Duration	Self-study Modules & Weekly evaluations	Weekly Evaluations	Group Training & Mentoring	Personal Mentoring	Total Hours Per Week
Observed mentoring by SMs	6 months	3 hours a week Self-paced over a week (at their convenience)	1 hour (protected time)	2 hours a week	20 mins (once in 4 weeks)	3 TO 3.5 HOURS A WEEK
Extended mentoring Phase	3 months	May or may not need 1 hour / fortnight remedials if lagging behind	1 hour (protected time – on alternate weeks)	2 hours on alternate week	20 mins (once in 4 weeks)	3 TO 3.5 HOURS FORTNIGHTLY

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Extended Mentoring Phase	ongoing	May or may not need 1 hour / month remedials if lagging behind	1 hour (protected time – once a month)	2 hours once a month	20 mins (once in 6 weeks)	3 TO 3.5 HOURS A MONTH
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Role of State Mentors

1. Supplement and support learning of CHOs by running weekly synchronous live sessions on an online video platform
2. Conduct monthly Zoom calls with CHOs for continued skill building and mentoring support using Continuous Professional Development (CPD) materials released regularly and conduct motivational webinars quarterly
3. Make regular phone calls with each of the CHOs to support their learning
4. Facilitate CHOs to identify professional and personal challenges and guide them in problem solving and remedial learning process
5. Support the CHOs in their general well being

Financial Guidelines for CHO Mentoring Programme

1. A State CHO Mentor would be eligible for an honorarium of Rs. 100 per CHO mentor per month.
2. Each State Mentor who has successfully completed the prescribed training course would be allocated 36 Community Health Officers.
3. The Block Medical Officers of whose Block the CHOs are mentored, would pay the honorarium to the State Mentors.
4. The State would allocate resource to the district who in-turn will allocate resource for CHO Mentoring to the Block under FMR Code HSS. 1 Sr. No. 153 and the expenditure would be booked under this head.
5. The state would provide attendance of the CHOs who have been mentored to the districts every month for the purpose of verification. The districts would in-turn convey the attendance to the Blocks for verification

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