

**Report on**  
**Sensitization workshop for RNTCP staff at Civil Surgeon Complex Kapurthala, Punjab**  
**on 15th July 2011**

The sensitization workshop about ELI Lily Project for RNTCP staff held at Civil Surgeon Complex Kapurthala, Punjab on 15th July 2011. After the situational analysis undertaken by VHAP for Eli Lily Project at Kapurthala, dates have been finalized after concerning ETO Kapurthala. The objective was to sensitize RNTCP staff basically about Eli Lily Project at Kapurthala, specifically focusing on involving Traditional healers.

In welcome address, a brief report about project was touched upon by Mr. Manmohan Sharma, Executive Director, VHAP and Dr. Rajinder Paul, DTO Kapurthala and welcomed the distinguished guests and the participants from RNTCP.

Then, Dr. Rajinder Paul, DTO Kapurthala invited Dr. S. Khajuria, WHO-RNTCP Consultant for inaugural address. The workshop was inaugurated by Dr. Chaman Lal, DFWO Kapurthala, as Dr. Harminder Singh, Civil Surgeon Kapurthala had to go on another official meeting. DFWO Kapurthala emphasized on more referral cases, on more compliance and widening the network. In the end, he wished great success for this project.

Dr. Rajinder Paul, DTO Kapurthala talked on "Technical session on status of RNTCP with special emphasis on TU 1 Kapurthala." He presented the following data and not a single ngo working on RNTCP except VHAP.

<b>Healthcare Facilities in Kapurthala</b>	
Total number of hospital in Distt. Kapurthala	01
Sub Divisional Hospital	02
Number of CHC	04
No. of PHC	10
Number of SHC Dispensaries	43
Number of sub centers	103
Kapurthala town Dispensary	03
ESI dispensary Kapurthala	02
Number of TB Suspects whose sputum was examined for diagnose in TU Kapurthala (2 <sup>nd</sup> Qtr. 2011)	1127

Dr. S. Khajuria, WHO-RNTCP Consultant, basically told that this would definitely widen the scope, since they are available 24\*7 to the public at their doorstep residing in the remote areas. And, he particularly mentioned traditional healers still not in our list but very crucial catering to the health needs of the

people particularly traditional healers (home setters, vaid, hakeem, providing treatment for snake bites, post abdominal knots like dharan, kaudi). Health system should add them in their network.

Mr. Manmohan Sharma briefed about Eli-Lily project, its goal to engage the largely untapped informal private healthcare providers and help them enhance their capacity and establish effective linkages among the programme, traditional healers and NGOs, objectives and planning, and its outcome. The presentation is enclosed as Annexure 1.

Post lunch, planning strategy was done in order to chalk out the final list of traditional healers and other healthcare providers, tentative time schedule had been finalized. It was discussed that by 20<sup>th</sup> of July, all the concerned health officials will provide the list of traditional healers and healthcare providers to us. The following tentative schedule had been discussed for the four workshops of traditional healers training and to be completed in two months at the interval of 15 days.

1. 1<sup>st</sup> training at Tibba – CHC between 15<sup>th</sup> to 31<sup>st</sup> July
2. 2<sup>nd</sup> training at Begowal between 15<sup>th</sup> to 30<sup>th</sup> August
3. 3<sup>rd</sup> at Sultanpur between 15<sup>th</sup> to 30<sup>th</sup> August and
4. The last, 4<sup>th</sup> training at Kala Singhaniya between 1<sup>st</sup> to 15<sup>th</sup> September, 2011.

We requested Dr. S. Khajuria, WHO-RNTCP Consultant, to facilitate the discussion with the participants on the followings points sent by The Union.

1. Venue and dates of the first round of training for THs – tentatively finalized
2. Curriculum for the training – yes, basic signs and symptoms of TB and DOTs program; less technical in their own language
3. Resource person for the training – was discussed and resulted that existing staff available would be utilized as resource person (DTO, CMO, CS)
4. Whether giving a certificate of attendance is a good move – on this point, all RNTCP staff was not in favor of giving them certificate. The reason they came up with that this certificate will give them legitimacy in their other services, because of Punjab and Haryana Court verdict which prohibits them to practice.
5. Follow up mechanisms as Referral slips and collection mechanisms – it was decided to use referral slips mentioning the name of Eli Lily project.
6. Person responsible to make supervisory visits to trained THs – support of RNTCP staff.
7. Incentives – its already existing under NRHM
8. Reporting mechanisms to both program and project – was discussed
9. Making trained THs as DOT providers – they agreed upon it.

In the end, Mr. Shamsher Singh from VHAP concluded the workshop with Vote of thanks.