

AHPI- TN Nursing Skills Training Program:

Introduction:

Nurses in clinical care need a curated and specific set of skills to do their job well and have competitive value. A combination of hards kills (Learned through practical training and certification) and soft skills (Habits or traits and social skills) that help to perform the job well for nurses would be an asset to delivering efficient and professional patient care in hospitals. The Association of Nurse Executives India (ANEI) and the Association of Health Care Providers India (AHPI) TamilNadu chapter have collaborated to develop a skill development module that would be a one-day work shop offered to Novice nurses who are yet to grow confident at performing skills at the bedside.

Details of the Program:

- 1. The program will consist of a total of six modules, each designed to enhance the Skills and knowledge of the participating nurses.
- 2. AHPI TN Members will receive a 50% discount on the program fees, with the discounted price set at Rs. 500 per nurse (the original price is Rs. 1000 per nurse).
- 3. Trainer Allocation: Each module will have 3 trainers assigned to train a group of 45 nurses and 2 trainers to train 30nurses.
- 4. Non-members can also participate in the program by paying INR 1000 per nurse.
- 5. The expenses related to food, venue and accommodation for the trainers will be borne by the institutions hosting the Nurse Skill Development Program.
- 6. It is recommended that the organizing institution arrange for relevant Manikin (the AHPI TN Secretariat can provide details in this regard).

About the Workshop:

- The program will be rolled out first to hospitals within Tamil Nadu.
- Each workshop can take in a maximum of 45 delegates
- Three trainers will be assigned to each workshop. They will coordinate with the hospital SPOC (Single point of contact).
- The workshop will be held as a one-day program (8- 5p.m.) catering to 6 nursing skills in the basic module and 8 in the advanced module.
- A pre-test will be given at the beginning of the workshop and the same will be used to assess participants' knowledge after the training. The scores will be shared with the institution.
- Participants will get e-certificate on completion of the feedback and post-test.

Modules Includes:

BASIC MODULE	ADVANCED MODULE
Injection techniques	Injection techniques
IV Cannulation	IV Cannulation
NG tube insertion	NG tube insertion
Urinary catheterization	Urinary catheterization
ECG	ECG
Wound care management	Wound care management
	Tracheostomy care and suctioning
	ABG



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President’s Message:

Title: Addressing the Challenges and Mapping the Road Ahead for Healthcare in Tamil Nadu

Dear Members,

As the President of Association of Healthcare Providers India, Tamil Nadu (AHPI-TN), I am writing this article to address the challenges that our healthcare facilities currently face. These challenges range from insurance issues, biomedical waste management, shortage of skilled workforce, violence against healthcare providers, high electricity and property tax bills, among others. We at AHPI-TN acknowledge these issues and are dedicated to creating viable solutions and providing necessary assistance to our members.

Firstly, let's talk about the issue of insurance. The growing discrepancy between the cost of services provided by healthcare facilities and the reimbursements received from insurance companies poses a significant threat to our sustainability. We are actively negotiating with insurance companies and regulators to ensure fair compensation for our services while also advocating for a more comprehensive and inclusive insurance framework.

Biomedical waste management is another significant issue. Strict adherence to protocols and regulations is essential to minimizing environmental harm and ensuring patient safety. AHPI-TN is committed to organizing various training programs and workshops to educate healthcare providers about the best practices in biomedical waste management. We are also working towards facilitating easier access to cost-effective and sustainable waste management solutions.

Attracting and retaining a skilled workforce is a challenge faced by many healthcare facilities. We aim to address this problem by fostering partnerships with educational institutions to create training and development programs. Through these partnerships, we hope to increase the availability of skilled healthcare professionals in the state.

Violence against healthcare providers is a grave concern. It not only demoralizes the healthcare workforce but also disrupts the delivery of healthcare services. We at AHPI-TN strongly condemn any form of violence against healthcare providers. We are working closely with law enforcement agencies and the government to ensure the security and safety of our members.

High electricity and property tax bills significantly impact the operational costs of healthcare facilities. We are in talks with the concerned authorities to consider providing concessions or subsidies to healthcare facilities, especially those providing crucial services in rural and underserved areas.

In essence, AHPI-TN is committed to addressing these challenges head-on and providing the necessary support to healthcare facilities in Tamil Nadu. We believe in the power of unity and cooperation in overcoming these hurdles. Our collective voice has the potential to bring about significant changes in the healthcare landscape of our state.

As we continue to engage with various stakeholders, we look forward to your continued support and cooperation. Together, we can create a healthcare environment in Tamil Nadu that is conducive to the well-being of our patients and the growth of our healthcare facilities.

Thank you for your dedication and service.

Best Regards,

Sathish Devadoss
President, AHPI-TN

Current Status of Healthcare Insurance:

At present the hot topic for discussion in private hospitals is GIPSA. GIPSA stands for General Insurance Public Sector Association. It is a group of four General insurance companies. Those 4 companies are New India Assurance Company Ltd, National Insurance Company Ltd, United India Insurance Company Ltd and Oriental Insurance Company. Initially all most all the hospitals have entered into MOU with GIPSA because the policy holders prefer these hospitals for cashless treatment and % of insurance patients were less. So the hospitals have accepted the rates of GIPSA for various surgical and other procedures. Now the hospitals are started facing problems as the % of cashless patients increased and the GIPSA rates are much lower compare to the cash patients. Secondly the huge amounts are outstanding from the Insurance companies. The third one is unilateral deductions by way of disallowances from the Bill amount while making the payment to the hospitals.

Now the hospitals are in dilemma, whether to renew their MOU with GIPSA or not, if GIPSA is not agreed for the hospital rates or the GIPSA revised tariff does not match with hospital rates.

Private hospitals cannot fight with GIPSA individually, because GIPSA is a very strong association and patients supports GIPSA as they get cashless treatment.

Before taking any decision by the hospitals regarding either to continue cashless treatment or to stop cashless treatment, some of the points are to be considered very seriously.

- 1. Whether the hospital can balance its financial status by accepting the GIPSA rates though they are lower than the rack price.
- 2. Whether the hospital can survive without GIPSA network and with cash patients alone.
- 3. How to convince Insurance companies for higher tariff.
- 4. The latest developments and the policies of Central Government to provide 100% cashless treatment through PMJAY,CM,CGHS etc.

It is a welcoming move to provide 100% cashless treatment to the policy holders or the beneficiaries of Central Govt., and State Govt., Health schemes. But what about the survival of healthcare providers.

In 99% of business, the service provider fix the price and the consumer or the customer pay for the product or service. Utmost he can only ask for some discount .It is the prevailing practice in every business starting from 10/-idly to ten lacks car. But it is vice versa in Healthcare services. The payer (GIPSA) on behalf of the policy holder is fixing charges and the service provider has to enter into MOU. It is like this, the tenant fix the rent and the house owner should sign the rental agreement.

No one is questioning why the star hotels are selling Idly at 100/- when the similar Idly is available in next door for 10/- at Udipi hotel. Then why the medical treatment charges alone are in debate.

Anyhow ,This subject is very sensitive because it is connected to human lives and also the public is involved . The better tariff from GIPSA can be achieved through the unity and solidarity of all hospitals. If they are ready for discussions, we, as a group, can convince them by submitting the details of Costing done scientifically.

Mr. D. Rambabu
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Secretary- AHPI TN -- 2023--2025
General Secretary, AHPI TN Chapter 2015-17
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