

Test Bank Tb Human Resource Management

Training for Better TB Control Human Resources for Health leadership and management: a prototype curricula package Human Resource Management Guidelines for the Programmatic Management of Drug-resistant Tuberculosis Investing in Strategies to Reverse the Global Incidence of TB Federal Register UN Millennium Development Library: Investing in Strategies to Reverse the Global Incidence of TB Test Bank The Costs and Cost-effectiveness of Tuberculosis Control Human Resources Management Human Resources Report Practical manual on tuberculosis laboratory strengthening Using Time and Motion Studies to Determine the Human Resource Needs Associated with Improving the Latent Tuberculosis Infection Cascade of Care Human Resources in Healthcare Transactions Report Global Tuberculosis Control Annual Report, Human Resources Agencies Reichman and Hershfield's Tuberculosis Access Register Karin Bergström World Health Organization John Ivancevich World Health Organization Jaap Broekmans UN Millennium Project Noe Anna Vassall World Health Organization Hannah Alsdurf Bruce Fried Epidemiological Society of London Maine. State Board of Health Mario C. Raviglione Canada

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this book serves as a comprehensive resource on human resources for health hrh leadership and management featuring a prototype curricula package with case studies it provides detailed curricula for various educational courses including a master s program a one month course and an executive short course aimed at enhancing hrh management skills the book explores the role of policy politics and stakeholder engagement in hrh

policy implementation using real world case studies from countries like ghana south africa and sierra leone it is intended for health professionals policy makers and educators involved in health workforce planning and management offering insights into the complexities and challenges of hrh policy making and implementation

the emergence of extensively drug resistant strains of tuberculosis especially in countries with a high prevalence of human immunodeficiency virus is a serious threat to global public health and jeopardizes efforts to effectively control the disease this publication offers updated recommendations for the diagnosis and management of drug resistant tuberculosis in a variety of geographical economic and social settings and the recording of data that enables the monitoring and evaluation of programs publisher s description

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the millennium development goals adopted at the un millennium summit in 2000 are the world s targets for dramatically reducing extreme poverty in its many dimensions by 2015 income poverty hunger disease exclusion lack of infrastructure and shelter while promoting gender equality education health and environmental sustainability these bold goals can be met in all parts of the world if nations follow through on their commitments to work together to meet them achieving the millennium development goals offers the prospect of a more secure just and prosperous world for all the un millennium project was commissioned by united nations secretary general kofi annan to develop a practical plan of action to meet the millennium development goals as an independent advisory body directed by professor jeffrey d sachs the un millennium project submitted its recommendations to the un secretary general in january 2005 the core of the un millennium project s work has been carried out by 10 thematic task forces comprising more than 250 experts from around the world including scientists development practitioners parliamentarians policymakers and representatives from civil society un agencies the world bank the imf and the private sector this report lays out the recommendations of the un millennium project task force 5 working group on tb the working group s recommendations include expanding access to dots programs implementing efforts against hiv related tb and multidrug resistant mdr tb engaging all primary care providers and communities in high quality tb care and developing new diagnostics drugs and vaccines these bold yet practical approaches will enable countries in every region of the world to halve the prevalence of tb by 2015

tuberculosis is a leading cause of ill health and death in low and middle income countries tuberculosis control is essential for achieving the millennium development goals relating to health by 2015 however despite efforts made to expand tuberculosis control over the past decades tuberculosis remains a serious global health problem this book aims to assist the expansion of tuberculosis control by adding to the evidence on the cost effectiveness of different tuberculosis control strategies it presents research from five countries egypt ethiopia syria peru and ukraine it

examines the implementation of the world health organization recommended strategy directly observed treatment strategy dots new technologies currently being developed to tackle drug resistance are also assessed emphasis throughout is placed on the importance of health systems and the costs for patients accessing treatment this book is essential reading for anyone interested in economic aspects of tuberculosis control

it is estimated that almost one quarter of the world's population or 2 billion people have latent tuberculosis infection (ltbi) of those latently infected with tb between 5-15% will go on to develop active tb in 2015 the world health organization who outlined the end tb strategy aimed at ending the tb epidemic globally including a specific target to increase provision of preventive therapy to household contacts (hhc) of confirmed pulmonary tb to over 90% by 2025 despite the who's focus on improving access to ltbi preventive therapy there has been little data reported on the human resource needs to provide such services in the first manuscript of my doctoral thesis i present the systematic review and meta-analysis of the literature we conducted to determine the proportion of persons completing each step in the patient journey for hhc from initial investigation and screening for ltbi through to completion of ltbi preventive therapy also known as the ltbi cascade of care this review demonstrated that fewer than 20% of eligible hhc completed preventive therapy and interventions aimed at reducing losses at the early steps in the ltbi cascade showed greater public health impact than interventions focused on improving patient completion of treatment the act4 trial is a cluster randomized controlled trial conducted in 24 health facilities in 5 countries: benin, canada, ghana, indonesia, and vietnam to address the gaps in ltbi services identified in the first manuscript the second manuscript in this thesis quantifies the precise healthcare worker (hcw) time required to perform clinical work activities at each step in the ltbi cascade of care using a time and motion (tam) study of consenting hcw in all act4 health facilities this tam data was also used in the third manuscript which quantifies the change in proportion of hcw time dedicated to ltbi activities resulting from the act4 intervention of ltbi program evaluation and strengthening results from a linear mixed model demonstrate that there was a 10% increase in hcw time spent on ltbi services due to the act4 intervention the negative costs of the intervention show that hcw time was taken away from active tb patient care justification for additional staffing needs to improve ltbi services the fourth manuscript in this thesis aims to validate the use of a daily hcw self-reported time estimation questionnaire (teq) to replace the tams as a tool to capture hcw time in four main categories: 1) total time worked, 2) time on direct patient care, 3) time on active tb patient care, and 4) time on ltbi patient care although the tams are the most accurate method to estimate time they are time consuming and costly thus we aimed to validate a simpler tool for measuring time that can be applied in other program settings for my doctoral research i piloted and tested the initial teq performance compared to the tams then refined the teq tool to better capture hcw time in those four main categories the work i conducted for my doctoral thesis fills an important gap of quantifying the human resource needs for improving the ltbi cascade of care my thesis provides estimates of hcw time requirements for expanded ltbi services in both high and low and middle income countries from prospectively collected primary data as part of the act4 trial these human resource needs are key to addressing the who end tb strategy goals of expanding access to ltbi services to the millions of household contacts of pulmonary tb patients around the world

human resources in healthcare managing for success second edition presents the techniques and practices behind effectively managing people the healthcare industry s most important asset it provides the concepts and practical tools necessary for meeting the unique challenge of managing healthcare employees a comprehensive resource the book covers fundamental topics such as performance management and employee rights as well as more timely issues such as nurse workload management and managing diversity this edition includes new information about healthcare workforce planning nurse staffing and workload managing a diverse workforce and developing diversity programs human resources budgeting and productivity analysis the unionization of physicians and nurses strategies for retaining valuable staffcases that illustrate key concepts are included along with exercises that allow readers to apply and practice the information given

includes list of members

combined annual reports of agencies which administer washington state s human resources programs and services

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