MALLA REDDY VISHWAVIDYAPEETH
(Deemed to be University)
Hyderabad

School of Nursing Science and Technology

FELLOWSHIP IN

PUBLIC HEALTH CARE NURSING

Curriculum 2026

Programme particulars	Details
Level	Post-registration fellowship (nursing)
Duration	26 weeks (6 months)
Structure	Theory 100 hours · Lab 60 hours · Practical 840 hours
Eligibility	Registered B.Sc Nursing / M.Sc Nursing in India, or equivalent
Award	Fellowship certificate of Malla Reddy Vishwavidyapeeth

Approved Curriculum by the Board of Studies, Academic Council and Executive Council

Stage	Body	Date of approval / resolution no.
1	Board of Studies Nursing – School of Nursing Sciences & Technology	
2	Academic Council	
3	Executive Council	

Contents

1. Preamble and Need for the Programme

2. Vision, Mission and Programme Objectives

3. Programme at a Glance

4. Eligibility, Selection and Governance

5. Programme Outcomes

6. Curriculum Framework

7. Detailed Syllabus: Public Health Care Nursing

8. Clinical Practice: Field Postings (840 hours)

9. Essential Public Health Nursing Skills and Logbook

10. Scheme of Assessment

11. Infrastructure, Faculty and Quality Assurance

12. Suggested References

Annexure A: Final Assessment Sheet – MRV Fellowship

Annexure B: Logbook Formats

Annexure C: Certificate of Completion (format)

1. Preamble and Need for the Programme

Malla Reddy School of Nursing Science and Technology believes that registered nurses need training in public health care nursing in clinical and community settings to provide competent care and enhance quality of life. Nurses play vital roles in prevention, promotion, curative and rehabilitative care. Expanding nursing roles and advances in technology necessitate additional training for effective participation in these services.

This fellowship is designed to enhance nurses' knowledge and skills in public health nursing. It focuses on community health, disease prevention, health promotion and public health management. The course helps graduates provide comprehensive nursing care and explore and expand nursing knowledge through nursing research.

1.1 Need

- Registered nurses require preparation for public health nursing in clinical and community settings.
- Disease prevention, health promotion, community care and public health management are central areas of the fellowship.
- Nurses contribute to prevention, promotion, curative and rehabilitative care and to patient and family education.

2. Vision, Mission and Programme Objectives

2.1 Vision

To prepare registered nurses with specialized knowledge, skills and attitudes for effective public health nursing in community and clinical settings.

2.2 Mission

- Enhance knowledge and skills in community health, disease prevention and health promotion.
- Strengthen the ability to provide comprehensive nursing care and participate in public health management.
- Encourage nursing research and evidence-informed public health practice.

2.3 Programme objectives

After successful completion of the Fellowship Programme in Public Health Care Nursing, the fellow will be able to:

1. Provide quality health care services in the community.
2. Assess, manage and supervise nursing care to improve population health, disease prevention and community care.
3. Educate and guide nurses, allied health professionals, patients and family members on emergency preparedness, health planning and post-emergency rehabilitation needs.

3. Programme at a Glance

Item	Details
Name of programme	Fellowship in Public Health Care Nursing
Offered by	School of Nursing Science and Technology, Malla Reddy Vishwavidyapeeth (Deemed to be University)
Duration	26 weeks (6 months), as stated in the source
Total hours	Theory: 100 hours · Lab: 60 hours · Practical: 840 hours, as stated in the source
Eligibility	Registered B.Sc Nursing / M.Sc Nursing in India, or equivalent
Mode	Contact teaching, field visits, supervised practice and logbook, based on source teaching activities
Assessment	MCQs 25 + practical skills (three case scenarios) 60 + logbook 15 = 100 marks; minimum 50% in each component and 50% aggregate
Award	Fellowship certificate by Malla Reddy Vishwavidyapeeth (Deemed to be University)
Medium of instruction	English

4. Eligibility, Selection and Governance

4.1 Eligibility

- Registered B.Sc Nursing / M.Sc Nursing in India or equivalent.

4.2 Selection and commencement

The Fellowship Committee is established to uphold transparency, fairness and meritocracy in selection for the MRV Fellowship Programme.

4.3 Fellowship Committee

Sl. No.	Role / position	Description / designation
1	Chairperson	The Dean, SNST
2	Subject expert	Dean MRCON, Professor or Associate Professor of SNST
3	Guide / co-guide	Professor, Associate Professor or Assistant Professor from SNST
4	Convener	The Fellowship Coordinator of MRV
5	Ex officio members	The Registrar and the Controller of Examinations, MRV

4.4 Guides

- Guide / co-guide: Professor, Associate Professor or Assistant Professor from SNST, as specified by the source committee structure.
- Guide-to-fellow ratio: Not more than 1:1

4.5 Functions of the committee

- Uphold transparency, fairness and meritocracy in selection.
- The source lists committee roles; additional committee functions and guide requirements are not further specified in the Public Health Care Nursing source.

5. Programme Outcomes

At the end of the fellowship, the fellow is expected to demonstrate outcomes aligned with the stated objectives and curriculum content.

PO	Domain	Programme outcome
PO1	Public health nursing	Explain the concepts, principles, scope and functions of public health nursing.
PO2	Community health	Provide quality health care services in community settings.
PO3	Assessment and management	Assess, manage and supervise nursing care focused on population health and disease prevention.
PO4	Health education	Educate nurses, allied health professionals, patients and families on health planning and rehabilitation needs.
PO5	Epidemiology and data	Apply epidemiology, demographic assessment and health information to community needs assessment.
PO6	Public health services	Describe and support delivery of community health services and national health programmes.

6. Curriculum Framework

6.1 Distribution of hours

Unit	Title	Theory (h)	Lab hours
1	Introduction to Public Health Nursing	6	Not specified in source
2	Health Care Planning and Organisation of Health Care at Various Levels	12	Not specified in source
3	Epidemiology, Demography and Population Control	13	Not specified in

			source
4	Management of Common Conditions, Emergencies, Nutrition and Food Safety	13	Not specified in source
5	Reproductive, Maternal, Newborn, Child and Adolescent Health	18	Not specified in source
6	Geriatric Health Care	10	Not specified in source
7	Health Management Information System	18	Not specified in source
8	Management of Delivery of Community Health Services	10	Not specified in source
	Total of listed unit hours	100	Lab/practical hours not allocated by unit in source

Component	Hours	Share
Theory (listed unit hours)	100	10% of 1,000 hours
Lab	60	6% of 1,000 hours
Practical	840	84% of 1,000 hours
Total	1,000	100%

6.2 Schedule of the 26 weeks

Weeks	Activity
1–2	Orientation and commencement of public health nursing theory and field exposure; exact weekly schedule not specified in source.
3–20	Theory units, field visits and supervised practice according to institutional posting arrangements.
21–25	Completion of practical experience, logbook, revision and case-scenario preparation.
26	Final assessment and exit examination.

6.3 Teaching–learning methods

- Lectures and discussions
- Directed reading
- Field visits to community and health service settings
- Community needs assessment and field surveys
- Demonstrations and practice sessions
- Counselling and role play
- Group projects, presentations and supervised field practice
- Logbook entries and guide verification

7. Detailed Syllabus: Public Health Care Nursing

Theory: 100 hours · Lab: 60 hours · Practical: 840 hours. Learning objectives, content, teaching–learning activities and assessment methods are presented below based on the supplied source.

Unit I: Introduction to Public Health Nursing

Theory: 6 hours

Learning objectives

- Define public health, community health and community health nursing.
- Explain the evolution of public health in India and the scope of public health nursing.

Content

- Concept, definition and scope; philosophy and principles of public health nursing; Primary Health Care approach; public health concepts, goals and functions; evolution and history; national and local health care delivery systems; roles of public health nurse as care provider, educator, counsellor, advocate, manager and researcher.

Teaching–learning activities

Community needs assessment; field survey to identify demographic data; lectures and discussion.

Assessment methods

Short-answer questions; essay; objective-type questions; survey report.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Define public health, community health and community health nursing and explain their scope.
CO2	Explain the philosophy, principles, goals and functions of public health nursing.
CO3	Describe the evolution of public health nursing and the health-care delivery system in India.
CO4	Explain the roles of the public health nurse as care provider, educator, counselor, advocate, manager and researcher.

Unit II: Health Care Planning and Organisation of Health Care at Various Levels

Theory: 12 hours

Learning objectives

- Describe health planning and its steps, plans and committees.
- Discuss health care delivery in India at various levels.
- Describe SDGs, Primary Health Care and CPHC.
- Explain health care policies and regulations in India.

Content

- Health planning steps; committees and commissions on health and family welfare; Five Year Plans; community participation; health infrastructure and sectors; services at SC, PHC, CHC, district, state and national levels; SDGs; Primary Health Care and Comprehensive Primary Health Care elements and principles; SC / HWC and role of MLHP / CHP; National Health Policies (1983, 2002, 2017); NHM, NRHM, NUHM, NHPM, Ayushman Bharat and Universal Health Coverage.

Teaching–learning activities

Lectures, discussion, directed reading and field visits to CHC, PHC, SC / HWC.

Assessment methods

Short answers, essays, field-visit reports and presentations.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Describe the steps involved in health planning and the major health committees, commissions and plans in India.
CO2	Explain the structure and delivery of health services at sub-centre, PHC, CHC, district, state and national levels.
CO3	Discuss the SDGs, Primary Health Care and Comprehensive Primary Health Care, including Health and Wellness Centres.
CO4	Summarise the national health policies and programmes listed in the syllabus, including NHM, NRHM, NUHM, Ayushman Bharat and Universal Health Coverage.

Unit III: Epidemiology, Demography and Population Control

Theory: 13 hours

Learning objectives

- Describe epidemiological concepts, scope, uses, methods and approaches.

- Identify the impact of population explosion in India.
- Describe methods of population control.

Content

- Epidemiology: definition, concepts, aims, scope, uses and terminology; disease transmission and epidemiological triad; morbidity and mortality measurements; levels of prevention; descriptive, analytical, outbreak investigation and experimental methods. Demography: concepts, scope, data collection, analysis and interpretation; rates and ratios. Population growth, explosion and social/economic impact; population control; women's empowerment; women and child welfare; small-family norm; natural, biological, chemical and mechanical spacing methods; terminal surgical methods; emergency contraceptives; family welfare programmes; Family Planning 2020; environment and human health; human rights and value education.

Teaching–learning activities

Lectures, charts, graphs, models, films and slides; counselling; demonstrations; supervised field practice.

Assessment methods

Essay, short answers, objective questions and assessment of survey reports.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Explain the concepts, aims, scope, uses and terminology of epidemiology.
CO2	Describe disease transmission, the epidemiological triad, morbidity, mortality and levels of prevention.
CO3	Differentiate descriptive, analytical, experimental and outbreak-investigation methods of epidemiology.
CO4	Explain demographic data, population trends and population-control and family-welfare methods and programmes included in the syllabus.

Unit IV: Management of Common Conditions, Emergencies, Nutrition and Food Safety

Theory: 13 hours

Learning objectives

- Explain the nurse's role in identification, primary management and referral of common conditions and emergencies, including first aid.
- Describe nutrition assessment methods and plan diets for all age groups, including therapeutic diets.
- Provide nutrition counselling and education and describe national nutrition programmes.

Content

- Standing orders; screening, identification, primary care and referral. Gastrointestinal conditions: abdominal pain, nausea/vomiting, diarrhea, constipation, jaundice, GI bleeding, distension, dysphagia, dyspepsia and aphthous ulcers. Respiratory conditions: rhinitis, sinusitis, pharyngitis, laryngitis, tonsillitis, bronchitis, pneumonia and bronchial asthma. First aid: fever, hypoglycaemia, injuries, fractures, fainting, bleeding, shock, stroke, bites, burns, choking, seizures, RTAs, poisoning, drowning and foreign bodies. Nutrition concepts, meal planning, nutrition assessment, diet planning by age group, nutrition education, deficiency disorders, national nutrition policy/programmes. Food-borne diseases: burden, causes, classification, signs/symptoms, transmission, pathogens/toxins, identification, initial management, referral, food poisoning/intoxication, epidemiology, prevention/control and public health response.

Teaching–learning activities

Lectures, discussion, demonstrations, role play, suggested field visits, field practice, market visits, nutrition assessment and visits to milk purification plants and slaughterhouses.

Assessment methods

Short answers, essays, field-visit reports, OSCE, performance assessment and nutrition assessment reports.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Identify common gastrointestinal and respiratory conditions covered in the syllabus and describe initial nursing care and referral.

CO2	Explain first-aid measures for the emergency conditions listed in the syllabus and identify when referral is required.
CO3	Describe nutrition assessment, meal planning and diet education for individuals, families and different age groups.
CO4	Explain food-borne disease transmission, early identification, initial management, referral, prevention and public-health response.

Unit V: Reproductive, Maternal, Newborn, Child and Adolescent Health

Theory: 18 hours

Learning objectives

- Provide reproductive, maternal, newborn and childcare in urban and rural settings.
- Promote adolescent health and youth-friendly services.

Content

- Reproductive, maternal and child health in India. Antenatal care: objectives, visits, examination, nutrition, counselling, calcium/iron supplementation, birth preparedness, high-risk screening and referral (APH, pre-eclampsia/eclampsia, anaemias, GDM, hypothyroidism, syphilis). Intranatal care: normal labor, stages, monitoring, active management, complications, newborn care, records, safe childbirth checklist, SBA module and labor-room organisation. Postpartum care: visits, mother/baby care, breastfeeding, lactation diet, counselling, postpartum hemorrhage, shock, puerperal sepsis, breast conditions and postpartum depression. Newborn/child care: essential newborn care, neonatal problems, pneumonia, diarrhea, sepsis, congenital anomaly screening, IMNCI and under-five clinics. Adolescent health: common problems, gynecological conditions, teenage pregnancy, legal marriage age, nutrition, menstrual hygiene, SRH needs and youth-friendly services. National programmes: RMNCH+A, UIP, RBSK and RKSK.

Teaching–learning activities

Lectures, discussions, demonstrations, role play, field visits/practice and assessment of antenatal, postnatal, newborn, infant, preschool, school-age and adolescent health.

Assessment methods

Short answers, essays, OSCE, assessment reports and field-practice evaluation.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Describe antenatal care, birth preparedness, nutrition and screening for high-risk pregnancy.
CO2	Explain intranatal and postpartum care, including early identification and referral of maternal complications.
CO3	Describe essential newborn care, common neonatal and child-health problems, IMNCI and under-five services.
CO4	Explain adolescent health needs, youth-friendly services and the national programmes listed in the syllabus, including RMNCH+A, UIP, RBSK and RKSK.

Unit VI: Geriatric Health Care

Theory: 10 hours

Learning objectives

- Identify health problems of older adults and provide primary care, counselling and supportive health services.

Content

- Health problems of older adults; management of common geriatric ailments; counselling and supportive treatment; organisation of geriatric services; NPHCE; state-level programmes/schemes; community health nurse's role in screening, diagnosis, management and referral.

Teaching–learning activities

Lectures, discussion, demonstrations and supervised visits to older-adult homes.

Assessment methods

Visit report, essay and short-answer questions.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Identify common health problems among older adults.
CO2	Describe primary care, counselling and supportive management for common geriatric ailments.
CO3	Explain the organisation of geriatric health services and the National Programme for Health Care of the Elderly.
CO4	Describe the community health nurse's role in screening, management, referral and follow-up of older adults.

Unit VII: Health Management Information System (HMIS)

Theory: 18 hours

Learning objectives

- Discuss effective management of health information in community diagnosis and intervention.

Content

- HMIS introduction, data elements, recording/reporting formats and data quality; basic demography and vital statistics; sources of vital statistics; sampling techniques; frequency distribution; collection, analysis and interpretation; community needs assessment and health action plan.

Teaching–learning activities

Lectures, discussion, demonstrations, role play, field visits and group project on community diagnosis/data management.

Assessment methods

Group project report, essay and short-answer questions.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Explain the purpose of HMIS and identify its data elements and reporting formats.
CO2	Describe basic demography, vital statistics and sources of vital statistics.
CO3	Explain sampling techniques, frequency distributions and methods for collecting, analysing and interpreting data.
CO4	Use community-health data to support needs assessment, community diagnosis and preparation of a health action plan.

Unit VIII: Management of Delivery of Community Health Services

Theory: 10 hours

Learning objectives

- Describe the system management of delivery of community health services in rural and urban areas.

Content

- Planning, budgeting and material management of CHC, PHC and SC/HWC; manpower planning as per IPHS standards. Rural services at village, SC/HWC, PHC, CHC, district, state and central levels. Urban services in slums, dispensaries, special clinics, municipal and corporate hospitals. Defence and institutional services; Indian systems of medicine, AYUSH clinics, alternative health care systems, referral systems and indigenous health services.

Teaching–learning activities

Lectures, discussion, visits to health-care delivery systems and supervised field practice.

Assessment methods

Essay, short answers and field-visit reports.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to

CO1	Explain planning, budgeting and material management for CHC, PHC and SC/HWC services.
CO2	Describe manpower planning in relation to IPHS standards.
CO3	Compare the organisation, staffing and functions of rural and urban health services.
CO4	Describe the role of defence, institutional, AYUSH, alternative and indigenous health services and referral systems.

8. Clinical Practice: Field Postings (840 hours)

The source specifies 840 practical hours but does not provide an hour-wise allocation to individual field postings. The following locations are the observational / field visits explicitly listed in the source.

Clinical / field area	Expected exposure from source
MCH office and DPHNO	Observe maternal and child health administration and community nursing services.
CHC / First Referral Unit (FRU)	Observe referral services and community-level care.
Child guidance clinic	Observe child guidance services.
Institute / unit for mentally challenged	Observe services for persons with intellectual or developmental disabilities.
District TB centre	Observe TB services.
AIDS control society	Observe HIV/AIDS control services.
Filariasis clinic	Observe filariasis services.
RCH clinic	Observe reproductive and child health services.
STD clinic	Observe sexually transmitted disease services.
Leprosy clinic	Observe leprosy services.
Community-based rehabilitation unit	Observe community rehabilitation.
Cancer centres and palliative care	Observe cancer and palliative services.
Home for older adults	Observe geriatric health services.
Mental health units and de-addiction centres	Observe mental health and de-addiction services.
School health services	Observe school health programmes and assessments.
Selected industrial health centres	Observe occupational / industrial health services.
ESI unit and municipality / corporation office	Observe institutional and municipal health services.

Posting duration, sequence and hours for each area should be fixed by the institution because these details are not allocated in the source document.

9. Essential Public Health Nursing Skills and Logbook

The fellow should record the listed observations and procedures in a logbook for review by the assigned guide. The source document does not specify minimum numerical targets for each procedure.

9.1 Procedures observed

- Antenatal examination
- Normal deliveries in hospital, home or health centre
- Episiotomy and suturing
- Neonatal resuscitation
- Vaginal examination
- Witnessing abnormal deliveries
- Insertion of IUD
- Laparoscopic sterilization
- Vasectomy

9.2 Procedures assisted

- Advanced life support and basic cardiac life support
- Arterial line / arterial pressure monitoring / blood taking and arterial blood gas
- ECG recording, blood transfusion and IV cannulation therapy
- Arterial catheterization, chest tube insertion and endotracheal intubation
- Ventilation, central/CVP line insertion and connecting lines for dialysis
- Antenatal and postnatal examination
- Assisted normal deliveries; episiotomy and suturing; assistance with caesarean section and abnormal deliveries
- Postnatal nursing in hospital, home or health centre
- Insertion of IUD, laparoscopic sterilization and vasectomy

9.3 Procedures performed

- Infection prevention: hand washing, disinfection, sterilization surveillance, fumigation and universal precautions
- Bag technique and specimen collection
- Urine analysis (albumin and sugar)
- Drug administration: IM/IV injections, IV cannulation, infusion-pump fixation, dosage calculation, insulin/tuberculin syringes, fluid therapy monitoring and blood administration
- Blood sugar assessment and monitoring; periodic insulin administration
- Haemoglobin estimation and physical examination across age groups
- Antenatal and breast examination
- Conduct deliveries; postnatal visits; episiotomy, suturing and postnatal examination; vaginal examination
- Insertion/removal of IUD and Pap smear preparation
- Nutrition support: gastrostomy, pharyngeal and jejunostomy feeds, TPN, formula preparation and patient education
- CPR, basic cardiac life support and ECG
- School health assessments, health survey and health assessment
- Monitoring national health and family welfare programmes
- Treatment of minor ailments
- Outbreak investigation; screening for leprosy, TB and non-communicable diseases; presumptive and radical malaria treatment
- Counselling, report writing, referrals and project proposal writing
- Material management: requisition, condemnation, inventory and maintenance
- Training and supervision of personnel and liaison with NGOs

9.4 Logbook format

Date	Clinical / field area	Procedure / activity	Observed / assisted / performed	Fellow signature	Guide / preceptor signature

10. Scheme of Assessment

10.1 Final assessment and exit examination

The final assessment by the assigned guides includes the following components:

Component	Maximum	Assessment details

	marks	
Multiple Choice Questions (MCQs)	25	Number of questions to be determined
Practical skills assessment	60	Three case scenarios with discussion; 20 marks each
Logbook maintenance	15	Completeness and regularity; accuracy of entries; guide verification
Total	100	Minimum 50% in each component and 50% aggregate

10.2 Criteria to pass

- A candidate should obtain 50% in theory and 50% in practical separately.
- A candidate should obtain 50% in internal assessment.
- The final assessment sheet states a minimum 50% in each listed component and 50% aggregate.

10.3 Final assessment sheet – MRV Fellowship

Fellow details	Entry
Name of fellow	_____
Fellowship ID	_____
Institution / Department	_____
Batch / Year	_____

Component I: MCQs	Details
Total marks	25
Number of questions	_____
Marks obtained	_____ / 25
Result	☐ Pass ☐ Fail (minimum 50% required)

Case	Maximum marks	Marks obtained	Examiner signature
Case 1	20	_____	_____
Case 2	20	_____	_____
Case 3	20	_____	_____
Total practical	60	_____ / 60	

Logbook assessment criteria	Marks / notes
Completeness and regularity	_____
Accuracy of entries	_____
Guide verification	_____
Marks obtained	_____ / 15
Result	☐ Pass ☐ Fail (minimum 50% required)

Component	Maximum marks	Marks obtained	Pass / Fail
MCQs	25	_____	_____
Practical skills	60	_____	_____
Logbook	15	_____	_____
Total	100	_____	_____

Final result: ☐ Pass ☐ Fail (minimum 50% aggregate required)

10.4 Certification

We certify that the above Final Assessment and Exit Examination have been conducted strictly in accordance with the approved MRV Fellowship guidelines.

Name of fellow: _____

Fellowship ID: _____
Institution / Department: _____
Batch / Year: _____
Date: _____
1. Name of Guide / Examiner: _____
Signature: _____
2. Name of Guide / Examiner: _____
Signature: _____

11. Infrastructure, Faculty and Quality Assurance

The source document identifies the School of Nursing Science and Technology and the Fellowship Committee structure. Specific infrastructure standards, faculty workload, quality-assurance indicators and clinical-preceptor ratios are not stated in the supplied Public Health Care Nursing source and should be approved separately by the institution.

12. Suggested References

The source file does not provide a formal reference list. The institution should insert the approved textbooks, national programme guidelines, Ministry of Health and Family Welfare publications and public health nursing references before final approval.

Annexure A: Final Assessment Sheet – MRV Fellowship

Use the assessment tables in Section 10.3 for recording fellow details, component marks, results and signatures.

Annexure B: Logbook Formats

Date	Unit / field posting	Activity / procedure	Learning / reflection	Fellow signature	Guide signature

Annexure C: Certificate of Completion (format)

MALLA REDDY VISHWAVIDYAPEETH

(Deemed to be University)

This is to certify that

_____

Fellowship ID _____ has successfully completed the 26-week

FELLOWSHIP IN PUBLIC HEALTH CARE NURSING

at the School of Nursing Science and Technology, and has passed the final assessment and exit examination held in _____ with a total of _____ / 100 marks.

Date of issue: _____	Place: Hyderabad
Controller of Examinations	Dean, School of Nursing Science and Technology