# प्रदेश लोक सेवा आयोग, कर्णाली प्रदेश

प्रदेश निजामती सेवाको स्वास्थ्य सेवा, हेल्थ एजुकेशन समूह, अधिकृतस्तर सातौं तह, स्वास्थ्य शिक्षा अधिकृत पदको खुला, अन्तर तह र आन्तरिक अन्तर समूह प्रतियोगितात्मक लिखित परीक्षाको पाठ्यक्रम र परीक्षा योजना

पाठ्यक्रमको रुपरेखाः- यस पाठ्यक्रमको आधारमा निम्नानुसार दुई चरणमा परीक्षा लिइने छ।

प्रथम चरणः- लिखित परीक्षा

पूर्णाङ्क:- २००

अन्तिम चरणः- सामृहि

सामूहिक परीक्षण र अन्तर्वार्ता

पूर्णाङ्गः- ४०

१. प्रथम चरणः लिखित परीक्षा योजना (Examination Scheme)

पत्र	विषय	खण्ड	पूर्णाङ्क	उत्तीर्णाङ्क	परीक्षा प्रणाली	प्रश्नसंख्याXअङ्क	समय
प्रथम	General Subject	Part I: General Knowledge	900	80	वस्तुगत (Objective): बहुबैकल्पिक	<b>2 4 2 4 3 4 4 5 5 1 1 1 2 3 4 3</b>	१ घण्टा - ३० मिनेट
		Part II: General Technical Subject			प्रश्न (Multiple Choice Questions)	७५X१=७५	
द्वितीय	हेल्थ एजुकेशन सम्बन्धी		900	४०	विषयगत (Subjective): छोटो उत्तर लामो उत्तर	ςχ <b>χ</b> =γο ξχ <b>ηο</b> =ξο	३ घण्टा

# २. अन्तिम चरणः सामुहिक छलफल तथा अन्तर्वार्ता

विषय	पूर्णाङ्क	परीक्षा प्रणाली	समय
सामूहिक परीक्षण (Group Test)	90	सामूहिक छलफल (Group Discussion)	३० मिनेट
अन्तर्वार्ता (Interview)	30	मौखिक(Oral)	-

#### द्रष्टव्यः

- १. यस पाठ्यक्रमलाई प्रथम चरण र अन्तिम चरणमा विभाजन गरिएको छ।
- २. लिखित परीक्षाको माध्यम भाषा नेपाली वा अंग्रेजी अथवा नेपाली र अंग्रेजी दुवै हुन सक्नेछ।
- ३. पाठ्यऋमको प्रथम र द्वितीय पत्रको विषयवस्तु फरक फरक हुनेछन।
- ४. प्रथम र द्वितीय पत्रको लिखित परीक्षा छुट्टाछुट्टै हुनेछ।
- ५. प्रथम पत्रहरुका एकाइहरुबाट सोधिने प्रश्नसंख्या निम्नानुसार हुनेछन।

प्रथमपत्रका एकाई	٩	२	nr	8	ሂ	ų	9
प्रश्न संख्या	9ሂ	ζ	ζ	ζ	ζ	१४	१४

- ६. वस्तुगत बहुवैकल्पिक (Multiple Choice) प्रश्नहरूको गलत उत्तर दिएमा प्रत्येक गलत उत्तर बापत २० प्रतिशत अङ्क कट्टा गरिनेछ। तर उत्तर नदिएमा त्यस बापत अङ्क दिइने छैन र अङ्क कट्टा पनि गरिने छैन।
- ७. बहुवैकल्पिक प्रश्नहरु हुने परीक्षामा कुनै प्रकारको क्याल्कुलेटर (Calculator) प्रयोग गर्न पाइनेछैन।
- द. विषयगत प्रश्नका लागि तोकिएका प्रश्नहरूको हकमा एउटा लामो प्रश्न वाएउटै प्रश्नका दुई वा दुई भन्दा बढी भाग (Two or more parts of a single question) वा टिप्पणीहरू (Short notes) सोध्न सिकने छ।
- ९. द्वितीय पत्रमा प्रत्येक खण्डका लागि छुट्टाछुट्टै उत्तरपुस्तिकाहरु हुनेछन्। परिक्षार्थीले प्रत्येक खण्डकाप्रश्नहरुको उत्तर सोही खण्डको उत्तरपुस्तिकामा लेख्नुपर्नेछ।
- 90. यस पाठ्यक्रम योजना अन्तर्गतका पत्र/विषयका विषयवस्तुमा जेसुकै लेखिएको भए तापिन पाठ्यक्रममापरेका कानून, ऐन, नियम तथा नीतिहरू परीक्षाको मिति भन्दा ३ महिना अगाडि (संशोधन भएका वासंशोधन भई हटाईएका वा थप गरी संशोधन भई) कायम रहेकालाई यस पाठ्यक्रममा परेको सम्झनुपर्दछ।
- ११. प्रथम चरणको लिखित परीक्षाबाट छनौट भएका उम्मेदवारहरुलाई मात्र अन्तिम चरणको परीक्षामा सम्मिलित गराइनेछ।
- 9२. लिखित परीक्षा र अन्तिम चरणको सामूहिक परीक्षण र अन्तर्वार्ताको कुल अङ्क योगका आधारमा अन्तिम परीक्षाफल प्रकाशित गरिनेछ।
- १३. पाठ्यऋम लागू हुने मितिः २०८१।०९।०२

## प्रदेश लोक सेवा आयोग, कर्णाली प्रदेश

प्रदेश निजामती सेवाको स्वास्थ्य सेवा, हेल्थ एजुकेसन समूह, अधिकृतस्तर सातौँ तह, स्वास्थ्य शिक्षा अधिकृत पदको खुला, अन्तर तह र आन्तरिक अन्तर समूह प्रतियोगितात्मक लिखित परीक्षाको पाठ्यक्रम

## प्रथम पत्र (Paper I): General Subject

### Part (I):

# General Knowledge (25 Marks)

# 1. General awareness and contemporary issues

- 1.1 Physical, socio-cultural and economic geography and demography of Nepal with special focus on Karnali province
- 1.2 Major natural resources of Nepal
- 1.3 Geographical diversity, climatic conditions, and livelihood & lifestyle of people
- 1.4 Notable events and personalities, social, cultural and economic conditions in modern history of Nepal
- 1.5 Current periodic plan of Karnali province and Nepal
- 1.6 Information on sustainable development, environment, pollution, climate change, biodiversity, science and technology
- 1.7 Nepal's international affairs and general information on the FAO, SAARC & WTO
- 1.8 The Constitution of Nepal
- 1.9 Governance system and governments at federal, provincial and local level
- 1.10 Provisions of civil service act [(Karnali Province Civil Service Act, 2080 and Regulations, 2080], {Local Services (Formulation and Operation) Act, 2081} and regulation relating to organizational structure, posts of service, fulfillment of vacancy and code of conduct
- 1.11 Functional scope of public services
- 1.12 Public Service Charter
- 1.13 Concept, objective and importance of public policy
- 1.14 Fundamentals of management: planning, organizing, staffing, directing, controlling, coordinating, decision making, motivation and leadership
- 1.15 Government planning, budgeting and accounting system
- 1.16 Major events and current affairs of national and international importance
- 1.17 Public service delivery system and its barriers in Nepal

## Part (II):

# General Technical Subject (75 Marks)

- 1. Health, disease, epidemiology and health statistics
  - 1.1. Health and disease
    - 1.1.1. Concept, definition, dimension and spectrum of health
    - 1.1.2. Concept of wellbeing
    - 1.1.3. Determinants of health
      - 1.1.3.1. Biological
      - 1.1.3.2. Behavioral and socio-cultural
      - 1.1.3.3. Environmental
      - 1.1.3.4. Socio-economic
      - 1.1.3.5. Health services
      - 1.1.3.6. Politics, gender, age, physical facilities, war, disaster, education.
    - 1.1.4. Health system and level of health care
    - 1.1.5. Disease process/disease theories
      - 1.1.5.1. Agent, host and environment

- 1.1.5.2. Theories of disease
- 1.1.6. Public health: definition, its different terminology and development
- 1.2. Epidemiology and health statistics
  - 1.2.1. Concept, history, definition and aim of epidemiology
  - 1.2.2. Basic measurement in epidemiology: tools, indicators and methods
  - 1.2.3. Use of epidemiology
  - 1.2.4. Dynamics of disease transmission
    - 1.2.4.1. Source and reservoir
    - 1.2.4.2. Modes of transmission
    - 1.2.4.3. Susceptible host and host defense
  - 1.2.5. Disease prevention and control measures
  - 1.2.6. Investigation of epidemics steps
  - 1.2.7. Management of epidemics such as of diarrhoea, cholera, encephalitis, measles etc. through management of
    - 1.2.7.1. Early diagnosis & treatment
    - 1.2.7.2. Interruption of mode of transmission
    - 1.2.7.3. Immunization
    - 1.2.7.4. Wastes, sewage, excreta & its disposal
    - 1.2.7.5. Control of street dogs, animal & slaughter house
    - 1.2.7.6. Protection of source of water
    - 1.2.7.7. Protection of food from contamination
    - 1.2.7.8. Health education measures to control epidemics/campaign &participation
- 1.3. Health statistics and research
  - 1.3.1. Screening of disease and health indicators
  - 1.3.2. Health statistics: source of health information, tabulation and presentation of data and simple statistical methods- mean, median, mode, sampling and sampling size
  - 1.3.3. Demography: national population policy; population process; trends; measuresfertility, mortality, migration; population size, growth, composition, marital status, spatial distribution
  - 1.3.4. Health education research: operational, health system, behavioral, diagnostic, evaluation, cost benefit, effectiveness research and its steps, design and applications
- 1.4. Community diagnosis
  - 1.4.1. Process, methods, techniques, tools, analysis and presentation
  - 1.4.2. Community mobilization/social mobilization
  - 1.4.3. Community participation
- 1.5. Social problems in Nepal population explosion and migration, poverty, unemployment, substance abuse, prostitution, violence, child abuse/exploitation, gender bias, girl trafficking, ignorance
- 1.6. Health research and international health
  - 1.6.1. WHO, UNFPA, UNICEF, USAID, UNDP, WOLD BANK, JICA, CARE, SCF, GTZ, DFID, Global Fund, IUHPE
  - 1.6.2. Nepal health research council
- 2. Primary health care (PHC) and essential health care services (EHCS)
  - 2.1. Primary health care
    - 2.1.1. Concept
    - 2.1.2. Elements
    - 2.1.3. Principles
    - 2.1.4. Analytical view of PHC approaches in present context
  - 2.2. Essential health care services (EHCS)
    - 2.2.1. Concept and origin

- 2.2.2. Elements/components
- 2.2.3. Principles
- 2.2.4. Analytical view of EHCS approaches in present context
- 2.2.5. Responsibilities of government, individual, family, group & community in EHCS
- 2.2.6. Differentiation and importance of PHC and EHCS
- 2.3. Levels of health services: basic, specialized and super specialized.
- 2.4. Health professional councils and associations
  - 2.4.1. Nepal health professional council: roles, act, rules and regulations
  - 2.4.2. Health promotion and education association of Nepal
  - 2.4.3. Nepal public health association

## 3. Communicable diseases and non-communicable diseases

- 3.1. Communicable diseases
  - 3.1.1. Leprosy, malaria, Japanese encephalitis, Kala-azar, HIV/AIDS, STD, diarrhoea, ARI, filariasis, rabies
  - 3.1.2. Vaccine preventable diseases –tuberculosis, measles, diphtheria, pertusis, tetanus, poliomyelitis, hepatitis B
  - 3.1.3. Meningitis, typhoid, influenza, food poisoning, amoebiasis, cholera, trachoma and intestinal parasites induced diseases
- 3.2. Non communicable diseases
  - 3.2.1. Diabetes
  - 3.2.2. Cancers
  - 3.2.3. Heart diseases: hypertension, stroke and coronary heart disease
  - 3.2.4. Arthritis
  - 3.2.5. Asthma
  - 3.2.6. Obesity
  - 3.2.7. Blindness
  - 3.2.8. Accident and injury
  - 3.2.9. Mental and dental health problems

# 4. Environmental and occupational health and home hygiene

- 4.1. Environmental health
  - 4.1.1. Concept and definitions
  - 4.1.2. Major environmental issues and its contribution in morbidity, mortality and environmental degradation
  - 4.1.3. Sources of water, water quality assurance and household purification
  - 4.1.4. Solid waste and its management at community and household level
  - 4.1.5. Excreta disposal management
  - 4.1.6. Control of fly, rodent and street dogs
  - 4.1.7. Animal health and management of slaughter house
  - 4.1.8. Air pollution, its assessment and mitigation measures
  - 4.1.9. Hospital waste management
  - 4.1.10. Environmental sanitation campaign
- 4.2. Occupational health
  - 4.2.1. Definition
  - 4.2.2. Occupational health hazards and diseases
  - 4.2.3. Measures of health protection of workers
  - 4.2.4. Preventive measures of occupational diseases
  - 4.2.5. Social abuses like tobacco, drug abuse and alcoholism: effects, prevention and control
- 4.3. Home hygiene

- 4.3.1. Personal hygiene: hand washing, bathing and laundering
- 4.3.2. Domestic hygiene: food, water and environment
- 4.3.3. Community hygiene: market and animal rearing
- 5. School health, nutrition and health promotion
  - 5.1. School health program
    - 5.1.1. Definition and objectives
    - 5.1.2. Areas of school health program
      - 5.1.2.1. School health services
      - 5.1.2.2. Health instruction
      - 5.1.2.3. Healthy school environment
      - 5.1.2.4. School community cooperation
  - 5.2. Nutrition and malnutrition
    - 5.2.1. Definition of nutrition
    - 5.2.2. Classification of foods
    - 5.2.3. Nutrients and its types, functions, effects and sources
    - 5.2.4. Factors affecting and measurement of nutrition
    - 5.2.5. Malnutrition
  - 5.3. Health promotion
    - 5.3.1. Definition and concept
    - 5.3.2. Priority areas
    - 5.3.3. Settings
  - 5.4. Family life education, sex education and life skills education
- 6. Health policy, strategies and programs
  - 6.1. Health act, regulations, policy and strategies
    - 6.1.1. Public health service act, 2075 and regulations, 2077, Karnali province health service act, 2078 and regulations, 2080
    - 6.1.2. National health policy, 2076, health policy, 2076 (Karnali province), current national and Karnali province periodic plan (health related), Nepal health sector strategic plan, 2023-2030
    - 6.1.3. Organizational structure of health system
      - 6.1.3.1. Federal
      - 6.1.3.2. Provincial
      - 6.1.3.3. Local level
    - 6.1.4. National communication/IEC strategies
    - 6.1.5. Health related strategies of different health programs at national level and Karnali province
    - 6.1.6. Health promotion, education information and communication program and activities- federal, provincial, local and community level
    - 6.1.7. Sustainable development goals: concept, goals/areas and health related indicators
  - 6.2. Health programs
    - 6.2.1. Child health
      - 6.2.1.1. Integrated management of newborn and childhood illness (IMNCI)
      - 6.2.1.2. Nutrition: Iodine, iron and folic acid, Vitamin A, de-worming
      - 6.2.1.3. Immunization
    - 6.2.2. Reproductive health
      - 6.2.2.1. Safe motherhood neonatal health
      - 6.2.2.2. Family planning
      - 6.2.2.3. Adolescent RH
      - 6.2.2.4. Care of elderly women

- 6.2.2.5. Reproductive tract infection, male involvement, infertility management, comprehensive abortion services
- 6.2.3. Epidemiology and disease control
  - 6.2.3.1. Common vector borne diseases, zoonotic diseases and outbreak prone diseases
  - 6.2.3.2. Vaccine preventable diseases
  - 6.2.3.3. Tuberculosis
  - 6.2.3.4. Leprosy
  - 6.2.3.5. HIV/AIDS and STD
  - 6.2.3.6. Non-communicable diseases: heart diseases, cancer, COPD, diabetes mellitus, road traffic accident, fall injuries etc.
  - 6.2.3.7. Mental illnesses
- 6.2.4. Eye and oral health
- 6.2.5. Health promotion, health education, information and communication
- 6.2.6. Risk communication and community engagement
- 6.2.7. Control of substance abuse (tobacco, alcohol, drug)
- 6.2.8. Health training
- 6.2.9. Health rehabilitation
- 6.2.10. Logistic management
- 6.2.11. Health management information system (HMIS), digital health and other health related information systems
- 6.2.12. Disaster management, crisis management and health emergencies
- 6.2.13. One health and international health regulations
- 6.2.14. Essential care services at different level
- 6.2.15. Health financing and health insurance
- 7. Health care planning and management
  - 7.1. Health planning: definition and planning steps/cycle
  - 7.2. Role of health professionals and volunteers
    - 7.2.1. Director general of DoHS
    - 7.2.2. Directors of centers and divisions
    - 7.2.3. Directors of Provincial Health Directorate, Provincial Health Training Centre, Province Health Logistics Management Centre, Province Public Health Laboratory, Provincial Hospital, Province Ayurved Hospital
    - 7.2.4. Health education professionals
    - 7.2.5. Public health professionals
    - 7.2.6. Medical professionals
    - 7.2.7. Health diagnostic professionals (medical imaging technology, medical laboratory technology)
    - 7.2.8. Nursing professionals
    - 7.2.9. Pharmacy professionals
    - 7.2.10. Health assistant, AHW
    - 7.2.11. ANM
    - 7.2.12. FCHV
  - 7.3. Health care delivery system in Nepal
  - 7.4. Health information and resource management
  - 7.5. Management: concept, principles, theories and skills

# प्रदेश लोक सेवा आयोग, कर्णाली प्रदेश

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# द्वितीय पत्र (Paper II): हेल्थ एजुकेशन सम्बन्धी Section A- 35 Marks

### 1. Health Promotion and Education

- 1.1. Concept, meaning and definition of health promotion and education
- 1.2. Aims, objectives, principles and settings/scope of health promotion and education
- 1.3. Approaches to health promotion and education: social marketing, child to child, basic and adult education, community organization, advocacy, peer education etc.
- 1.4. Role of health promotion and education in primary health care program
- 1.5. International conferences, declarations (Ottawa Charter and subsequent conferences including FCTC) and events (health related days) on health promotion and education
- 1.6. Ethics of health education
- 1.7. Role of health educator in the preventive, promotive, curative and rehabilitative aspect of health

## 2. Training and Curriculum Development

- 2.1. Definition, concept, objectives and types of training
- 2.2. Concept, types and models of curriculum development
- 2.3. Training process
  - 2.3.1. Need assessment: definition, level, analysis steps, methods, tools
  - 2.3.2. Training planning: analysis, objective, strategies, action plan, monitoring and evaluation
  - 2.3.3. Curriculum development and lesson plan: definition, importance, process and elements of curriculum and lesson plan and its adaptation
  - 2.3.4. Training implementation and methods, aids, materials, monitoring, follow-up and reporting
  - 2.3.5. Training evaluation, monitoring and follow up
  - 2.3.6. Coaching, mentoring and simulation exercises
- 2.4. Trainers' training techniques
- 2.5. Role of national and provincial health training centers in training of various categories for health professionals and volunteers

#### Section B- 20 Marks

#### 3. Fundamental Factors of Health Education

- 3.1. Communication
  - 3.1.1. Definition and communication process
  - 3.1.2. Elements, models and types of communication
  - 3.1.3. Principles of communication
  - 3.1.4. Techniques and methods of communication
  - 3.1.5. Barriers of communication
  - 3.1.6. Effective communication
  - 3.1.7. Health communication planning steps
- 3.2. Perception
  - 3.2.1. Concept and meaning
  - 3.2.2. Types of perception and its example
  - 3.2.3. Role of perception in health education

- 3.3. Motivation
  - 3.3.1. Concept and definition
  - 3.3.2. Theories, tools and techniques
  - 3.3.3. Role of motivation in health education
  - 3.3.4. Motivation skills
- 3.4. Learning process
  - 3.4.1. Concept and definition of learning process
  - 3.4.2. Ways and techniques of learning
  - 3.4.3. Learning principles and process
  - 3.4.4. Theories of learning
  - 3.4.5. Factors affecting learning
  - 3.4.6. Adult learning
- 3.5. Leadership
  - 3.5.1. Concept and definition leadership
  - 3.5.2. Role and function of leader
  - 3.5.3. Identification of leader types
  - 3.5.4. Role of leadership in health education
- 3.6. People's participation
  - 3.6.1. Concept and definition of people's participation
  - 3.6.2. Role and needs of people's participation
  - 3.6.3. Techniques of community participation
  - 3.6.4. Community involvement in health education activities
- 3.7. Group dynamics
  - 3.7.1. Concept of group process and dynamics
  - 3.7.2. Characteristics of group
  - 3.7.3. Communication in group setting
  - 3.7.4. Group roles and individual roles
  - 3.7.5. Mobilization of groups in health education
- 3.8. Change process
  - 3.8.1. Concept and definition of change process
  - 3.8.2. Planned and unplanned change
  - 3.8.3. Ways, methods and techniques of change
    - 3.8.3.1. Compliance
    - 3.8.3.2. Identification
    - 3.8.3.3. Internalization
    - 3.8.3.4. Diffusion process
  - 3.8.4. Different models (Kurt Lewin, Mashlow, Rosenstock, Festinger) including behaviour change communication (BCC) model
- 3.9. Applied sociology and social psychology
  - 3.9.1. Definition
  - 3.9.2. Role of sociology and social psychology in health behaviour
  - 3.9.3. Social sciences and its role in health education
  - 3.9.4. Components of culture: values, norms, mores, customs, tradition, religion, belief, folkways, totem/taboos, habit, magic, ideology and its relation to health and health education.
- 3.10. Community development and community organization
  - 3.10.1. Concept and definition
  - 3.10.2. Characteristics
  - 3.10.3. Approaches/techniques
  - 3.10.4. Factors resistant to community development and organization

# 3.10.5. Importance of community development and organization in health education Section C- 20 Marks

#### 4. Methods and Media of Health Education

- 4.1. Methods: concept, meaning, types and process
  - 4.1.1. Individual methods: interview, counseling, home visit, conversation telephone call, personal letter
  - 4.1.2. Group methods: group discussion, mini lecture, demonstration, role play, panel discussion, small group meeting, workshop, seminar, case study, educational field trip
  - 4.1.3. Mass method: lecture/speech, films/documentary, radio /TV/FM programs, rally, miking, exhibition, internet, email, social media and street drama
  - 4.1.4. Folk methods: traditional folk drama, debates, colloquy, poems, folk dances, folk songs, puppet show
- 4.2. Media: concept, meaning, types, importance and process
  - 4.2.1. Audio aids: radio, cassettes, FM, telephone/mobile, gramophone
  - 4.2.2. Visual aids: projected and non-projected
    - 4.2.2.1. Projected aids: OHP, LCD, slides, film strips, photography
    - 4.2.2.2. Non-projected aids: display boards (black board, flannel board, hoarding board, digital board, notice board, wall painting, banners etc.), Graphic (poster, pamphlet, flipchart, flash card, flannel graph, journal, brochure, booklet, manual, newspaper, cartoon, comic and other printed materials) and three dimensional aids (models, specimens, mockups, diarroma)
  - 4.2.3. Audio visual aids: tele-film, celluloid films, videos, documentary, computer
- 4.3. Health education materials development process
  - 4.3.1. Need assessment
  - 4.3.2. Target segmentation
  - 4.3.3. Develop and test message concepts
  - 4.3.4. Develop draft or dummy materials
  - 4.3.5. Pre-test of materials, reason, process and methods
  - 4.3.6. Review and revise materials
  - 4.3.7. Finalize and produce materials
  - 4.3.8. Distribute and disseminate
  - 4.3.9. Evaluate effects
  - 4.3.10. Ensure continuity

#### Section D- 25 Marks

# 5. Planning, Implementation and Evaluation of Health Promotion and Education Program

- 5.1. Planning process
  - 5.1.1. Needs assessment and identification of health problems
  - 5.1.2. Educational diagnosis
  - 5.1.3. Assessment of resources
  - 5.1.4. Establishment of priorities
  - 5.1.5. Determination of objectives (general/specific/behavioral)
  - 5.1.6. Plan of action for health education
    - 5.1.6.1.Deciding target group and audiences
    - 5.1.6.2. Deciding the contents/messages
    - 5.1.6.3. Determination of methods and media

- 5.1.6.4. Preparation and pretesting of health education materials
- 5.1.6.5. Preparation of evaluation plan
- 5.1.7. Preparation of implementation schedule
- 5.1.8. Evaluation of health education programs
- 5.2. Implementation of health education program
  - 5.2.1. Concept, definition and processes
  - 5.2.2. Implementation strategies
    - 5.2.2.1. Building commitment
    - 5.2.2.2. Capacity building of human resource for health education
    - 5.2.2.3. Mobilization and utilization of resources
    - 5.2.2.4. Formation and organization of community groups
    - 5.2.2.5. Effective communication, selection and use of appropriate methods and media
    - 5.2.2.6. Monitoring, supervision and follow-up of health education program
    - 5.2.2.7. Recording and reporting of health education events and outcome
- 5.3. Evaluation of health education programs
  - 5.3.1. Concept, definition and types of evaluation
  - 5.3.2. Levels of evaluation
  - 5.3.3. Criteria of evaluation
  - 5.3.4. Methods and techniques of evaluation
  - 5.3.5. Steps of evaluation
  - 5.3.6. Development and testing of evaluation tools
  - 5.3.7. Indicators of health promotion and education

# द्वितीय पत्रको प्रश्नसंख्या तालिका

खण्ड/भाग	A-	35	B-20	C-20	D-25
एकाई	1	2	3	4	5
छोटो प्रश्नसंख्या	2	1	2	2	1
लामो प्रश्नसंख्या	1	1	1	1	2

# साम्हिक परीक्षण

सामूहिक परीक्षण व्यक्तित्व परीक्षणको एक अंश हो। प्रदेश निजामती सेवाको क्षेत्र विस्तार तथा कार्य पद्धित परिवर्तन समेत भैरहेको सन्दर्भमा नेपाल सरकारका नीति, योजना, कार्यक्रम लगायत शासन व्यवस्था सम्बन्धी समसामियक विषयमाथि विचार—विमर्श, छलफल गरी तिनको अझै बढी प्रभावकारी तथा कार्यान्वयनयोग्य समाधान पहिल्याउने सम्बन्धमा उम्मेदवारहरुको क्षमता पहिचान गर्नु यस परीक्षणको मूलमर्म हो। यसको लागि छलफल, विचार—विमर्श गरी परिस्थिति बुझ्न सक्ने, निर्णय दिने, जनतालाई क्रियाशील बनाउने, चित्त बुझाउने, निर्धारित लक्ष्य अनुसार काम गर्ने/गराउने, जस्ता कामका लागि लेखन क्षमताका साथसाथै समस्यालाई यथार्थपरक ढंगले पहिचान गर्नसक्ने, वाकपटुता, शिष्टता, तर्कशक्तिको पनि आवश्यकता पर्दछ।

त्यसैले यस परीक्षणमा उम्मेदवारहरुको बौद्धिक क्षमता, संचार सीप, समूह गतिशिलता, व्यवहार, व्यक्तित्व, मनोवृति, क्रियाशीलता, निर्णयशक्ति, समस्या समाधान क्षमता, नेतृत्व क्षमता, समय व्यवस्थापन तथा व्यक्तित्वमा भएका अन्य गुणहरुको आँकलन अर्थात परीक्षण र मूल्याङ्कन गर्नको लागि उम्मेदवारहरुलाई कुनै समसामियक विषय/सवाल/समस्यामा सामूहिक छलफल गरीसमस्या समाधान केन्द्रीत प्रभावकारी र कार्यान्वयनयोग्य समाधान निकालन दिइन्छ।

# साम्हिक छलफल

यस प्रयोजनको लागि गरिने परीक्षण १० पूर्णाङ्क र ३० मिनेट अवधिको हुनेछ जुन नेताविहिन सामूहिक छलफलको रूपमा अवलम्बन गरिनेछ। दिइएको प्रश्न वा Topic का विषयमा पालैपालोसँग निर्दिष्ट समयभित्र समूहवीच छलफल गर्दै प्रत्येक उम्मेदवारले व्यक्तिगत प्रस्तुति गर्नुपर्नेछ। यस परीक्षणमा मूल्याङ्कनको लागि देहाय अनुसारको ३ जना भन्दा बढीको समिति रहनेछ।

आयोगका अध्यक्ष वा अध्यक्षले तोकेको सदस्य – अध्यक्ष आयोगका सदस्य – सदस्य मनोविज्ञानवेत्ता – सदस्य दक्षाविज्ञ (१ जना) – सदस्य