

ABSTRACT

Tamil Nadu Health System Reform Program – 'Operational Research Programme' – Approved and Adopted – Orders – Issued.

HEALTH AND FAMILY WELFARE (EAPI-1) DEPARTMENT

G.O.(Ms).No.162

Dated: 31.03.2020

Thiruvalluvar Aandu - 2051

Vihari, Panguni – 18

Read:

From the Project Director, Tamil Nadu Health System Reform Program, letter No.2881/TNHSRP/2020, dated: 23.03.2020 and 26.03.2020.

ORDER:

In the reference read above, the Project Director, Tamil Nadu Health System Reform Program has stated that Tamil Nadu Health System Reform Program is being implemented by the Government of Tamil Nadu with funding support from World Bank. As per the loan agreement, the project will be funded under Program for Results mode, that is, the funds will be disbursed based on the achievement of pre-defined Disbursement Linked Indicators (DLI) in respect of the project activities. The activity is to develop and adopt a Operational research Programme Document (Disbursement eligible US\$ 1,750,000) which is linked to disbursement for year one of the Project and requiring Government Orders.

- 2. The Project Director, Tamil Nadu Health System Reform Program has stated that the above activity is to be completed before 31st March, 2020 and disbursement to be obtained after verification by the Independent Verification Agency (IVA) and World Bank. The World Bank Task Team Leader looks forward to receiving confirmation for the issuance of Government Orders relevant strategy and policies by March 31st, 2020.
- 3. The Project Director, Tamil Nadu Health System Reform Program has stated that the Project Management Unit is functioning from 01.11.2019. The Project had taken the preparation of the above strategy document earnestly and in coordination with World Bank. Task Forces and Working Groups of the above activity were formed involving the experts from Directorate of Medical Education, Medical and Rural Health Services, Public Health and Preventive Medicine, National Health Mission and Stakeholders from Indian Institute of Technology Madras and other reputed specialists in the field.
- 4. The Project Director, Tamil Nadu Health System Reform Program has stated that the first draft documents were prepared, sent to World Bank and got vetted. Based on the remarks, further meetings were held and a 2nd draft was prepared for the documents and circulated to the Members of the State Empowered Committee (SEC).

- 5. The Project Director, Tamil Nadu Health System Reform Program has stated that the remarks received were studied in the group and a 3rd Version of the documents were prepared and again sent to Members of the State Empowered Committee (SEC) for review prior to the convening of State Empowered Committee Meeting. The policy and strategy of 'Operational Research Programme' has been approved by the State Empowered Committee.
- 6. The Project Director, Tamil Nadu Health System Reform Program has now sent the approved proposal and requested the Government to issue orders for approving and adopting the draft Operational Research Programme.
- 7. The Government after careful examination have decided to approve and adopt the Operational Research Programme Strategy as annexed to this Government Order.

(BY ORDER OF THE GOVERNOR)

BEELA RAJESH SECRETARYTO GOVERNMENT

То

The Project Director, Tamil Nadu Health System Reform Program, Chennai-6.

The Mission Director, State Health Society, Chennai-6.

The Managing Director, Tamil Nadu Medical Services Corporation Limited, Egmore, Chennai-8.

The Project Director, Tamil Nadu Urban Health Care Project, Chennai-6.

The Director of Medical Education, Chennai-10.

The Director of Medical and Rural Health Services, Chennai-6.

The Director of Public Health and Preventive Medicine, Chennai-6.

The Private Secretary to Chief Secretary, Chennai-9.

The Private Secretary to Additional Chief Secretary, Finance Department Chennai-9.

The Private Secretary to Additional Chief Secretary, Planning and Development Department, Chennai-9.

The Private Secretary to Principal Secretary to Government, Public Works Department Chennai-9.

The Accountant General (A&E), Chennai- 18.

The Pay and Accounts Officer (South), Chennai-35.

The Commissioner of Treasuries and Accounts, Nandhanam, Chennai-35.

Copy to

The Special Personal Assistant to Hon'ble Minister (Health and Family Welfare), Chennai-9.

The Finance (Health-II/ PWD-I/BG I&II/) Department, Chennai-9.

The Health and Family Welfare (Data Cell) Department, Chennai-9. SF/SC.

//FORWARDED BY ORDER //

SECTION OFFICER

Annexure

[G.O.(Ms) No.162, Health and Family Welfare (EAPI-1) Department, Dated 31.03.2020]

Operational Research Programme

Tamil Nadu: Using Research to Improve Health Systems Operational Research Programme Guidelines

A. MOTIVATION

Several countries across the world have adopted a strategy to initiate and sustain an Operational Research (OR) programme that will strengthen and enable to transform healthcare systems over a period of time. Evidence from across several countries show that operational research, which are primarily context specific, have the potential to (a) identify and solve problems in a timely manner, (b) help policy-makers and program managers to make evidence-based program decisions (c)help program managers and staff understand how their programs work. This document proposes guidelines that the Government of Tamil Nadu (GoTN) could adopt for Operational Research which will contribute significantly in transforming Tamil Nadu (TN) healthcare system in desirable directions in the future.

B. FRAME WORK FOR OPERATIONAL RESEARCH PROGRAMME

Research has a crucial part to play in strengthening health systems and in improving the equitable distribution of quality health services for populations, especially for those in need. There are different types of research and multiple definitions for of each these, which leads to a lack of clarity and negatively affects credibility of the research. To avoid these pitfalls, TN is developing a research program focused on strengthening its health system. Based on the focus of research, its utility and the users of the research outputs, research to improve health system will be broadly classified under three categories¹((figure-1).

- 1. Operations research (OR),
- 2. Implementation research (IR) and
- 3. Health systems research (HSR)

Research
Domain

Implementation

Operational

Research
Users

Health care providers
Programme managers
Health system managers /
Policy makers

Research
Utility

Local

Eroaci

Figure 1. Research to improve health systems.

Source: Research to improve health systems. doi: 10.1371/journal.pmed. 1001000.g001

1. Operational Research

Operational research aims to develop solutions to current operational problems of specific health programmes or specific service delivery components of the health system. This research is characterized by a strong problem-solving focus and an urgency to find solutions and is of primary use to health care providers and programme managers. Few illustrative examples are given in table:1

A wide range of study designs and research methods are used, ranging from descriptive and analytical studies to operational experiments and the use of mathematical modelling. The research often starts with exploratory studies to better define the problem and its determinants, and to identify potential solutions that can subsequently be tested.

Tab: 1Defining research to improve health systems with Illustrative Examples
Source: How amenable the research outputs are to adaptation, scaling up or use or in other
contexts or locations. doi:10.1371/journal.pmed.1001000.t001

| Research | Primary Characteristic | | | |
|----------------|---|--|-----------------|---|
| Domain | | | | |
| | Focus of | Users of | Utility of | Illustrative Examples |
| | research | research | research | |
| Operational | Operational issues of specific health programmes | Health care providers program managers | Local | "Communication for behavioural impact (COMBI)" strategy to improve the poor compliance with mass drug administration for LF elimination in TN, India Which locations should be targeted for delivering HIV prevention services in Namakal district, Tamil Nadu? |
| Implementation | Implementing strategies for specific products or services | program managers, R&D managers | Local/ broad | How to improve access to vaccination among children who are currently not reached by immunisation services? How to effectively implement a new intervention package for kala azar elimination in the Indian sub-continent? |
| Health System | Issues affecting some or all of the building blocks of a health system | Health system managers, policy makers | Broad | To what extent do health services reach the poor? How can this be improved? How effective are different policies for attracting nurses to rural areas? |

2.Implementation Research

Implementation Research refers to research work done to promote the uptake and successful implementation of evidence-based interventions and policies². Implementation research is characterized by a focus on the need for innovative approaches and/or ensuring the effectiveness of implemented interventions and/or focused on scale-up of interventions that have already been evaluated to be effective. This type of research is of primary use to programme managers and often utilizes multiple sites (countries, states, districts, etc.) to tease out which findings are context-specific and which are more generalizable.

3. Health Systems Research

Health systems research addresses health system and policy questions that are not disease-specific but concern systems problems that have repercussions on the performance of the health system as a whole. It addresses a wide range of questions, from health financing, governance, and policy to problems with structuring, planning, management, human resources, service delivery, referral, and quality of care in the public and private sector. This research is generally multidisciplinary, with a strong emphasis on social sciences, economics, and anthropology. Health systems research is of primary use to policy makers and health system managers¹.

The three research domains are not mutually exclusive, and there are large overlapping areas.

Research Proposal Supported

This research programme mainly supports OR. IR and HSR and other research will be supported in special circumstances where it is absolutely essential. Research proposals related to drug trials, monitoring and evaluation and intervention studies will not be considered.

Current and Future Programmes requiring Operational Research

A number of ongoing programmes related Reproductive and Child health (RCH), Communicable and Non-Communicable diseases, Trauma care, mental health etc., have operational issues which are identified through routinemonitoring and evaluation activities. Operational research related to these issues identified will provide information to the decision-makers and enable them to improve performance of their programmes. OR willalso be useful to design, test, identify challenges included in the result areas of TNHSRP,namely Quality of Care Strategy, Non-Communicable diseases, Health Assemblies, TAN-QUEST among others.

Call for Research Proposals

Broad themes related to OR in TN will be finalized by the I.I.T. (M), bi-annually in consultation with the Directorates of Public Health, Medical Services and Medical Education and Indian system of Medicine, National Health Mission (NHM), Tamil Nadu Health System Reform Programme (TNHSRP), Tamil Nadu Urban Health Project(TUHP), National Institute of epidemiology (NIE), National Institute of Research in Tuberculosis (NIRT) and Tamil Nadu Aids Control Society (TANSACS). There will be bi-annual call of

proposals from the I.I.T. (M). Call for research proposals will be published in TNHSRP web site and the I.I.T. (M) website and communication will be sent to the Directorates and societies under the Department of Health and FamilyWelfare and Department of Social Welfare, public and private institutions, Universities, Research institutes, Professional associations etc

C. INSTITUTIONAL ARRANGEMENTS

1. Overview of Key Stakeholders

The key stakeholders include Directorates and societies under the Department of Health and Family Welfare and Department of Social Welfare, Academia, Think Tanks, Research Agencies and Development partners like the World Health Organization (WHO), the World bank, JICA etc. Numerous stakeholders will be benefited from the research outputs, and many of them will also participate in the actual conduct of research.

2. I.I.T. (M) Nodal Agency for Implementation of OR

The I.I.T. (M) will be the nodal agency for implementation of the ORP. The responsibility of implementation of the ORP will be vested with I.I.T. (M) .An MOU will be signed between the Project Director TNHSRP and the Director, I.I.T. (M) for implementing the ORP.

Roles and Responsibilities of I.I.T. (M),

- To finalize broad themes of OR, IR&HSR in health sector in consultation with the Directorates of Public health, Medical Services and Medical Education and Indian Systems of Medicine, NHM, TNHSRP, TUHP, NIE, NIRT and TANSACS and propose research questions in the context of the broader themes suggested.
- 2. To make bi- annual call for research proposalsbased on the broad topics identified
- 3. To convene Technical Committee meetings to shortlist the proposals
- 4. To convene the Research Proposal Selection Committee meeting twice a year for approving the list of the proposals which will be receiving the funding support.
- 5. To award research proposal to those selected by the ResearchProposalSelection Committee
- 6. To issue of grants for research proposal
- 7. To review quarterly on the status of ongoing research
- 8. To maintain the repository of proposals, consent, investigation tools datasets and research related documents

9. To receive, approve and upload the final project report as working papers in the TNHSRP web site

3. Who can apply and submit Research Proposal?

- 1. Individuals and teams of Medical and Paramedical health functionaries affiliated to private and public universities
- 2. Medical colleges/ hospitals and health centers from private and public institutions
- 3. To convene meetings of Ethical Committee if needed
- 4. Departments from colleges working on Health and allied subjects
- 5. Colleges and Universities
- 6. Institutions of national importance
- 7. AICTE affiliated institutions
- 8. Research institutions working on health care
- 9. Think tanks

4. Technical Committee

A Technical Committee will beformed with the Project Director, TNHSRP as the chairperson and the Director, I.I.T. (M) will be the member secretary

Members of the Technical Committee:

- 1. Additional/Joint Director NHM
- 2. Expert Advisor/ Team Lead (Quality) from TNHSRP
- 3. Joint Director TANSACS
- 4. DD (Research) DPH
- 5. DD/JD from DMS
- 6. Scientist/DD from ICMR- NIE
- 7. Scientist/DD from ICMR-NIT
- 8. DD/JD Indian system of Medicine
- 9. DD Madras institute of Developmental studies
- 10. Research Officer (statistics) TN Dr MGR Medical University
- 11. Co- opted members related to specialty of the proposals submitted

Responsibilities of the Technical Committee

Based on the broad categories of research topics/questions identified, I.I.T. (M) will call for proposals circulating the information through the heads of various departments related to health and other allied specialties and will also be put up in the website of I.I.T. (M) and TNHSRP. The HOD of the Department concerned will convene a meeting of

the Technical Committee bi annually during the month of May/October to scrutinize the proposals received and will shortlist based on the objective, methodology and expected outputs and budget requested. The researchers who have been shortlisted would be requested to make a brief presentation of the projects before the technical committee. The technical committee will recommend and forward the selected research proposals to the Research Proposal Selection Committee after obtaining clearance from the ethical committee.

5. Ethical Committee

Every research has some inherent risks and probabilities of harm or inconvenience to participants/communities. Therefore, protection of participants shall be built into the design of the study. Do no harm (non-maleficence) has been the underlying universal principle guiding health care in all systems of medicine around the world. While conducting biomedical and health research the four basic principles namely: respect for persons (autonomy), beneficence, non-maleficence and justice have been enunciated for protecting the dignity, rights, safety and wellbeing of research participants. All the proposal recommended for the selection committee shall be reviewed by the Ethical Committee for obtaining ethical clearance. The researcher shall submit the Ethical Committee clearance certificate from their place of work or from the place of study at the time of presenting their proposal or atleast before it is sent to the Research Proposal Selection Committee. Individuals taking up research who are unable to get the ethical clearance from the place of their work, can obtain the clearance from the ethical committee of I.I.T. (M).

6. Research Proposal Selection Committee

Research Proposal Selection Committee is formed with the Secretary, Department of Health and Family Welfare as the Chairperson and the Project Director, TNHSRP as the member secretary.

Members of the Research Proposal Selection Committee

- 1. Secretary, Health and Family Welfare Chair person
- 2. Managing Director, Tamil Nadu Medical Service Corporation
- 3. Mission Director, National Health Mission
- 4. Project Director, Tamil Nadu State AIDS Control Society
- 5. Director, I.I.T. (M)
- 6. Director of Medical Education

- 7. Director of Medical and Rural Health Services
- 8. Director of Public Health and Preventive Medicine
- 9. Director of Indian Medicine
- 10. Director, National Institute of Epidemiology
- 11. Director, National Tuberculosis Research Institute
- 12. Director, Madras Institute of Development Studies
- 13. Co-opted members for specific projects from relevant departments/disciplines

14. Any other nominee by Chairperson

The Research Proposal Selection Committee will review the proposals recommended by the Technical Committee and approve the research projects for which grants can be provided. The funds allocated to each of the research project will also be finalised by the Research Proposal Selection Committee.

7. Costing

As a part of the ORP, TNHSRP proposes to support research projects related to OR. On an exceptional basis, IR and HSR may also be supported when absolutely essential. The study shall be conducted within Tamil Nadu and shall be completed within the period approved by the Research Proposal Selection Committee and whenever required can be extended based on approval by Research Proposal Selection Committee. Priority would be given to research proposals, where research outputs provide insights on specific health programmes or specific delivery components of the health system. Each research projects will be funded to a maximum of approximately Rs 25 lakhs,and additional funds may be provided on a case to case basis subject to the approval of the Research Proposal Selection Committee. GoTN would provide TNHSRP an amount of Rs 2 crores each year for 5 years to fund the research projects. The funds will in turn be transferred to I.I.T. (M). who will claim an amount of Rs.15 lakhs from this as an administrative cost for functioning as the nodal agency for implementation of the OR programme.

8. Monitoring

On approval of the research proposal by the Project Selection Committee, I.I.T. (M) will issue 1st instalment of the fund approved. The HOD Epidemiology will conduct a meeting once in threemonths to review the status of the ongoing research, and give feedback and necessary guidance to the researcherand also release funds in instalments or as required

9. Dissemination and use of Operation Research

On completion of the research project, they will receive, review and approve the studies. The completed research project will be uploaded in the TNHSRP website and also in I.I.T. (M) Website who will maintain a digital library. The study reports will also be shared with the stakeholders who are directly involved in programmes/ work related to the topic of research. TNHSRP will organise workshops to disseminate the research findings to the implementation agencies which will be useful to them for course corrections and for adopting alternate strategies. The researchers would be encouraged to publish their research findings in peer-reviewed journal.

10. Expected Outcomes

The program is expected to establish a network of researchers across Tamil Nadu and beyond to support Tamil Nadu health sector's improved outcomes. The OR programme, if successfully implemented, is expected to build a culture of continuous learning, research and evidence-based programmatic and policy decision making.

List of References

- Remme JHF, Adam T, Becerra-Posada F, D'Arcangues C, Devlin M, et al. (2010)
 Defining Research to Improve Health Systems. PLoS Med 7(11): e1001000.
 doi:10.1371/journal.pmed.1001000
- 2. Sanders D, Haines A (2006) Implementation research is needed to achieve international health goals. PLoS Med 3: e186. 13. Allotey P, Reidpath DD, Ghalib H, Pagnoni F.

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SECRETARY TO GOVERNMENT

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