



India TB Research Consortium

Request for Concept Proposals on 'Developing/ scaling up innovative, cost effective and sustainable models to engage the private sector for tuberculosis (TB) elimination [involving/ not involving Information and Communication Technology (ICT) tools]'

Background

Despite mandatory notification for reporting cases of TB, many patients are still not reported to the Revised National Tuberculosis Control Programme, (RNTCP). This is because a majority of patients afflicted with TB are seeking care in the private sector resulting in about 1.5 million missed cases. Therefore, there is an urgent need to address this issue and accelerate our efforts towards strengthening case notification, reducing diagnostic delays and improving treatment outcomes of patients going to the private sector.

The massive private healthcare sector coupled with the vast heterogeneity (comprising qualified and unqualified practitioners) further aggravates this problem. Recently, many innovative pilot initiatives to improve diagnosis, notification and treatment practices for TB by the private sector have been developed and tested in various parts of the country. Because of such pilot initiatives, private sector practitioners have been using various ICT tools to notify TB cases and ensuring that the patients receive e-vouchers for free and appropriate drugs. It has become evident that ICT tools have been extremely instrumental in engaging the private healthcare providers towards facilitating TB notification and improving treatment outcomes. Optimization of the usage of such ICT tools is extremely important. The innovative models have engaged the private sector and aided in bringing the privately treated TB patients towards public health services, where care and adherence can be monitored. References for few of the models implemented in the country are attached in Annexure I only for reference.

While the models implemented in the country have shown success in a particular zone/ or state (s)/cities; they have not been replicated or have not found to be replicable in other states due to not being cost effective or because of sustainability issues. This has been a limiting factor in the large scale implementation of models across the country or for incorporation into the RNTCP. Thus, there is a dire need of having cost effective and sustainable models to engage the vast diversity of private healthcare providers in the country which could be scaled up further and finally incorporated into the RNTCP or be taken up by Govt Institutions.

The India TB Research Consortium, Indian Council of Medical Research, New Delhi solicits proposals from qualified implementation research/ corporate organizations to develop/ scale up cost effective, innovative and sustainable models towards engaging the private sector for TB elimination which would have high potential of integration in the Programme. Proposals are solicited for the following **Areas involving/ not involving ICT tools:**

1. Increasing notification of TB
2. Improving the diagnostic efficiency within the private sector by using advanced molecular diagnostics methods/ microbiologically confirmed TB
3. Providing free drugs through e-vouchers
4. Innovative means of engaging informal providers
5. Improving treatment adherence
6. Increasing patient support

7. Any other innovative mechanism to engage the private sector, (please specify)

The proposal can belong to any of the following **Categories**:

- A. Developing a cost effective, innovative and sustainable model
- B. Intervention which has been successful at the pilot stage in the country and which can be scaled up in a cost effective and sustainable manner for effective large scale implementation by the RNTCP/ Government Institutions.

Who can apply?

The following organizations are eligible to apply:

1. Implementation research organizations
2. Non-governmental Organizations
3. Other Research organizations with prior experience in implementation research
4. Hospitals with necessary expertise
5. Corporate organizations/ hospitals with necessary expertise

Selection process, timeframe and criteria:

The organizations should have skilled manpower and prior experience in implementation research/ developing models for private sector engagement. Commitment of time of Principal Investigator (PI) and co-principal investigator (Co-PI) will be considered as one of the key factors while shortlisting the proposals. The application may be addressed to DG, ICMR and sent via e-mail at teamtbcconsortium@gmail.com by **20th August, 2017** by 1800 hrs IST. Please submit a 2 paged concept note specifying:

1. Organization and contact details
2. Name of PI and Co-PI
3. Key area for engaging the private sector (1-7: as in the RFP)
4. Category (A/B: as in the RFP)
5. Main concept of the proposal (Maximum 2-3 pages). The note should also contain the proposed concept/strategy and as to how the proposed concept is innovative, applicable, sustainable, cost effective and feasible under existing systems of RNTCP without any financial implications)
6. Timelines
7. Budget requirements

Annexure I

References for few of the private sector engagement models which have been implemented in the country:

1. <http://www.tbpartnershipindia.org/documents/Enhancing%20private%20sector%20contribution%20to%20TB%20care%20in%20India.pdf>
2. <https://www.kncvtbc.org/en/india-unique-initiative-with-private-practitioners-against-mdr-tb/>
3. <http://pharmabiz.com/NewsDetails.aspx?aid=101214&sid=1>
4. <http://www.clintonhealthaccess.org/content/uploads/2016/06/Case-Study-India-IPAQT-June-2016.pdf>
5. <http://economictimes.indiatimes.com/industry/healthcare/biotech/healthcare/new-model-of-tracking-tuberculosis-patients-holds-promise-for-india/articleshow/54994035.cms>
6. <https://www.apollohealthcity.com/tb-treatment/>
7. <http://www.psi.org/program/engaging-the-private-sector/>