

Draft CCM Operations Research Workplan (Jan-Dec 2015)

Result	Generic Activity	Specific Activity	Lead	Time-Frame	Success Criteria
CHNRI-informed research	Facilitate planning, implementation and documentation of operational research	RAcE multi-country research (pending) Add specific research questions and timelines	Franco Pagnoni	On-going	Funds secured, research questions and protocols finalized
		BU research on C-stock and mHealth tool for supervision MoH/MCDMCH plan is to make available both the primary outcome (Appropriate treatment of malaria, diarrhea, and pneumonia) and secondary outcomes (medicine and diagnostic availability, clinical supervision coverage, virtual supervision coverage via mobile technology and average cost per iCCM contact) to the National IMCI Technical Working Group (TWG) and iCCM Subcommittee responsible for policy and planning	David	May 2015 – September 2016	make available both the primary outcome (Appropriate treatment of malaria, diarrhea, and pneumonia) and secondary outcomes (medicine and diagnostic availability, clinical supervision coverage, virtual supervision coverage via mobile technology and average cost per iCCM contact)..  for action. The next steps will be determined by the results.

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		for iCCM and IMCI for action.			
		Multi-country research on barriers to / determinants of careseeking (CHNRI priority #4)	Nick Oliphant	2015-2016	At least 1 peer review journal article published
		2-3 Observational studies on the impact of iCCM on equity of access and use of basic health services (CHNRI priority #18)	Nick Oliphant	2015-2016	At least 1 peer review journal article published
Evidence dissemination	Produce evidence briefs and policy briefs	Identify completed studies from the mapping of studies (CCMcentral) and compile key findings and messages for presentation OR subgroup and to disseminate to CCM TF	Dyness		Completed studies and presenter identified and presentations made- at least one per quarter
		Do case studies on effectiveness of integrating diarrhea and pneumonia management with malaria <i>This is a place holder- given the ongoing advocacy with</i>	Offers?		TBD

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		<i>the GF to fund iCCM in addition to CCM malaria, is there opportunity to consolidate the evidence of effectiveness of integration? Will the proposed Cochrane review- see below- take care of things if done?</i>			
	Propose iCCM panels at major conferences	ASTMH, APHA, MIM	Many  ASTMH 2015- Mark Young and David Hamer	2015	2-3 panels accepted
	Produce reviews and/or supplements	2 <sup>nd</sup> iCCM Evidence Review Symposium (timing and funding to be determined)	Nick Oliphant  (with planning/coordinating committee)	2016	2 <sup>nd</sup> iCCM Evidence Review Symposium held
		<i>Work with 2-3 countries implementing iCCM at scale to publish a Journal supplement summarizing iCCM implementation experience</i>	Dyness + a consultant	2016	supplement published (put on hold)
		Cochrane systematic review of iCCM (review questions,	Nick Oliphant	2015 title registered,	Systematic review published in the

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		<p>outcomes, scope etc. to be decided by author team)</p> <p>Small team of workabees (academic, PhD students) plus a review team;</p> <p>? Norway- lay health workers</p> <p>? Focal point-DK</p> <p>RSA Medical Research Council</p> <p>Skills-set and time</p> <p>Scope</p> <p>Funding??</p> <p>Nick funded</p> <p>No funds to bring people together, remotely</p>	(Author team to be identified)	protocol submitted, review commenced; 2016 review completed	Cochrane Database of Systematic Reviews
Knowledge management	Track global research	Updated matrix on CCMCentral	Dyness Kasungami/Anna	Ongoing	Completed table posted and updated

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			Bryant		regularly
	Archive reprints	CCMCentral			10-20 publications posted in 2015
Advance learning on iCCM implementation	Consolidate iCCM research and learning agenda under the CCM TF	Support other CCM TF subgroups to develop and implement research e.g. demand generation, nutrition etc and consolidate proposed lccm research	Dyness		Number of iCCM research studies based on the iCCM CHNRI and other