

Integrated Community Case Management Task Force Operations Research SubGroup, February 12, 2014, 10:00-11:00

Participants: Stefan Peterson (UU/KI)- facilitator, David Hamer (BU)-co-facilitator; Jennifer Callaghan (JHSPH), David Marsh (Save the Children); Amy Ginsburg (PATH), Karin Kallander (Malaria Consortium), Valerie D’Acremont (Swiss TPHI), Franco Pagnoni (WHO/GMP), Dyness Kasungami, Paulin Basinga (BMGF)

Topic	Main Points	Decisions, Next Steps
Introductions	New chairs: Stefan Peterson and David Hamer	<ul style="list-style-type: none"> 2 year term with Stefan leading the first year and David the second year.
CHNRI manuscript and dissemination of results (Salim Sadruddin)	<ul style="list-style-type: none"> PLOS medicine rejected. Paper being revised and resubmitted elsewhere. (Lancet Global Health or PLOS ONE). The CHNRI team will prepare a generic presentation summarizing the results for members to present in meetings, conferences, etc. David Hamer has already prepared and presented a Zambia dissemination package. 	<ul style="list-style-type: none"> Salim to update OR group.
iCCM symposium update and OR subgroup role before, during and after (Mark Young/OR group)	<ul style="list-style-type: none"> Link symposium outcomes to the CHNRI results. 6/3 there will be a post symposium debrief, where Dyness will be present on behalf of CCM.ORG as will Paulin Basinga. 	<ul style="list-style-type: none"> Group will start discussion at the Symposium. Dyness will organize a lunch session for CCM.ORG during the symposium and communicate the timing to the members.
OR subgroup workplan update - see attached (Dyness Kasungami)	<ul style="list-style-type: none"> See matrix. David Marsh suggested populating “approach donors” group at Ghana luncheon. Paulin suggests building Research into M and E is an excellent opportunity (10% of Global Fund grant for OR on top of M & E – is that the case? Or 10% for M and E, including OR –). This may require CCM.ORG members and consultants to support Global Fund applications and later execution of joint iCCM/malaria grants. 	<ul style="list-style-type: none"> Paulin to find out the percentage of GF grants allocated to M&E versus OR. Dyness to circulate list of short list of countries under consideration for members to indicate interests or help identify consultants to support including OR in Iccm/malaria grants. (Nigeria, Malawi, Ethiopia – early countries)
RACe OR update on plans and meeting at/after Symposium (Franco Pagnoni)	<ul style="list-style-type: none"> Grantee workshop the two days following the iCCM symposium, including some Steering Group members. Aim will be to identify possible additional OR questions/topics for some or several grantees for multicenter studies. 	<ul style="list-style-type: none"> Stay tuned
iCCM supplement to Ethiopian Medical Journal (EMJ) update (David Marsh)	<ul style="list-style-type: none"> UNICEF Ethiopia asked David Marsh and colleagues to edit a supplement with 14 papers. “Stockholm framework” used to organize the papers. Six more papers coming. Best case peer review by March. “Edit 911” useful for copy-editing. EMJ does not publish online, but will be put online through partners e.g UNICEF, CCM Task Force etc and ideally be ready by June. 	<ul style="list-style-type: none"> Discuss in Ghana whether there is capacity development for such OR and publications should be a CCM.ORG activity.
Update on the e letter to Health Policy and Planning (David Hamer)	<ul style="list-style-type: none"> Health Policy and Planning paper on lack of evidence for iCCM Pneumonia management in Africa merited a response, which David Hamer facilitated. The Authors’ response is now also online. David Hamer to circulate link to the two letters and hopefully Ghana meeting will help fill some of the evidence gaps. 	<ul style="list-style-type: none"> (http://heapol.oxfordjournals.org/letters/)
OR studies matrix update (Dyness Kasungami)	<ul style="list-style-type: none"> Good response so far to request to keep an updated roster of ongoing (and completed) studies. Ethiopia, Kenya, Zambia, and less in Francophone countries. Time frames end 2013-15. Topics varied: CHW performance, utilization, TBA-CHW pairing. 	<ul style="list-style-type: none"> Once compiled will be compared to CHNRI priorities. Soo will resend, and then post on website once completed.
AOB	<ul style="list-style-type: none"> Thanks to David Marsh for services rendered to CCM.ORG over last years. Amy from PATH suggesting topics to discuss in TCs. E.g. discuss an mHealth iCCM application, and 	<ul style="list-style-type: none"> Amy will formulate a question, circulate to membership, and then synthesize answers

	<p>the role and place of pulse oximetry. Likely to be included as a danger sign, says Valerie, and triage tool but may be procedurally cumbersome. Other topics also relate to e.g. how transfer a paper algorithm to mHealth</p> <ul style="list-style-type: none"> • Paulin asked the interest and desire of the CCM.ORG group to e.g. discuss impact data requirements. Positive response. 	<p>for presentation on TC for reactions.</p>
<p>Next meeting</p>	<ul style="list-style-type: none"> • Suggest TC every two months – plus ad hoc as required – as TC periodicity • 	<ul style="list-style-type: none"> • After Ghana