

Integrated Community Case Management Task Force Operations Research Subgroup, June 18, 2014, 10:00-11:00

Participants: Stefan PETERSON (UU/KI)- Chair, David HAMER (BU)-co-facilitator; Rashid SHAH, Save the Children

Paulin BASINGA, BMGF, Dyness KASUNGAMI, MCHIP, Franco PAGNONI, GMP/WHO, Maura GHAUGAN, MCHIP, Kerry ROSS, USAID

Agenda item	Main Points	Decisions, Next Steps
1. Progress on action points from April 16, 2014 minutes	<ul style="list-style-type: none"> Amy Ginsburg not available to report on possible research questions and no other member was aware of the progress. 	<ul style="list-style-type: none"> Dyness will reach out to Amy. Other items to be covered under specific agenda items below
<p>2. Review of work plan activities:</p> <p>-Facilitate planning, implementation and documentation of operational research</p> <p>-Propose iCCM panels at major conferences</p> <p>-Produce reviews and/or supplements</p>	<ul style="list-style-type: none"> Update on [iCCM] Documentation report by BMGF with UNICEF and BU in Zambia, Mozambique: draft report reviewed and approved. Ghana iCCM supplement in process for December deadline in Journal of GH. RTI/Save the children: doing an evaluation in Nigeria, (3 states); still in early phase of implementation Rashid: a study to evaluate “Added responsibility can affect performance of health workers in Bangladesh” Paulin: BMGF will be convening a meeting of partners towards end of year to take stock, how well they are addressing priority research questions and defining next year’s priorities. <p>Additional discussions on conferences –</p> <ul style="list-style-type: none"> ASTMH in planning for Nov, 2014. Potential discussions at Health Systems Research Global Symposium in Capetown in October. MIM not taking place this year. Newborn conference in Kampala 17-19 Nov: to be confirmed by Rashid and potential iCCM input to be confirmed. Propose a panel at the meeting to discuss challenges of newborn integration into iCCM? TREAT issues in hard to reach areas? Review Ethiopia experience and use the lessons learned to inform discussions, can it be a model? Ask UNICEF Ethiopia to present either Peter Salama or someone from MOH Ethiopia? Include session on OR issue development? "Case Management of Febrile Child" in <i>Disease Control Priorities</i>, 3rd ed. David Hamer reported having co-authored a chapter on diagnosis and treatment of a febrile child which will be part of “Disease Control Priorities” 3rd edition - final draft to be released for peer review in coming months 	<ul style="list-style-type: none"> CHNRI manuscript submitted to Journal of Global Health but still waiting for feedback from reviewers Rashid: will get and share details about the newborn meeting in Kampala in October. Action by June 27, 2014.
3. CHNRI priority research and OR matrix of planned iCCM research	<ul style="list-style-type: none"> Matrix completed. Some questions match the CHNRI priorities while others do not. 	<ul style="list-style-type: none"> MCHIP will provide an update on which CHNRI questions are addressed and which ones are not.

		Action end date: July 4
4.RACe project	<ul style="list-style-type: none"> • RACe: Implementation has started. Multicountry study protocol done. Planning meeting for country teams will be 22-26 September 2014- Malawi, Niger, DRC and 2 sites in Nigeria, not Mozambique • Lessons Learned meetings: 2 planned over life of project; 2014 and end of project. More internal best practices to share solutions rather than lessons learned since implementation has not started. First in October, 2014 with secretariat and grantees. 	<ul style="list-style-type: none"> • Franco will keep group informed about progress.
5.Global Fund concept notes update	<ul style="list-style-type: none"> • Zambia included OR, but in general malaria program managers not keen on including OR. • Negative attitude of malaria program managers noted in most countries. A contributing factor is the fact that GF is not funding commodities which gives malaria people an excuse. In addition, low capacity of child health/iCCM program managers compared to malaria teams. • BMGF notes the need to support the development of additional capacity for Iccm/child health and will be reaching out for input on how to proceed. • There is need for political guidance to prioritize Iccm/Malaria integration and OR is important to learning effective program approaches. • What can UNICEF do to improve leadership for child health? 	<ul style="list-style-type: none"> • Paulin will reach out for input on the design of a capacity development for child health effort. • Others? <p>Action end date: ongoing</p>
6.iCCM supplement to the Ethiopian Medical Journal	<ul style="list-style-type: none"> • Publication of the iCCM supplement to the Ethiopian Medical Journal 	<ul style="list-style-type: none"> • David H. to check with David Marsh • Response: progress slower than expected but in the works.
7.AOB	<ul style="list-style-type: none"> • Develop specific study questions on the integration of newborn health and malnutrition into iCCM. Stefan: how to convene an Iccm/newborn brainstorming session. Send out an email and create an "interest group" on malnutrition and iCCM. • Do we know the champions? • Could group do a mapping of who has done what and experiences that we can build on? • Not much was known, but Karin reported some work under MC. Groups? • One issue with management of acute malnutrition is the state of or lack of a functional community to facility continuum to manage referrals? • Non-malaria fevers and integration. David Schellenberg from the London School of Hygiene and Tropical Medicine and Valerie d'Acremont of the Swiss Tropical Public Health Institute are working on obtaining funding for a multi-country fever etiology study that would potentially include an iCCM component. 	<p>Dyness will send an email to create the interest group.</p> <p>Action end date: June 27</p>
8.Next meeting	August 20 at 10 AM Washington DC, 16:00 Stockholm, Lusaka	Request agenda items two weeks before the meeting