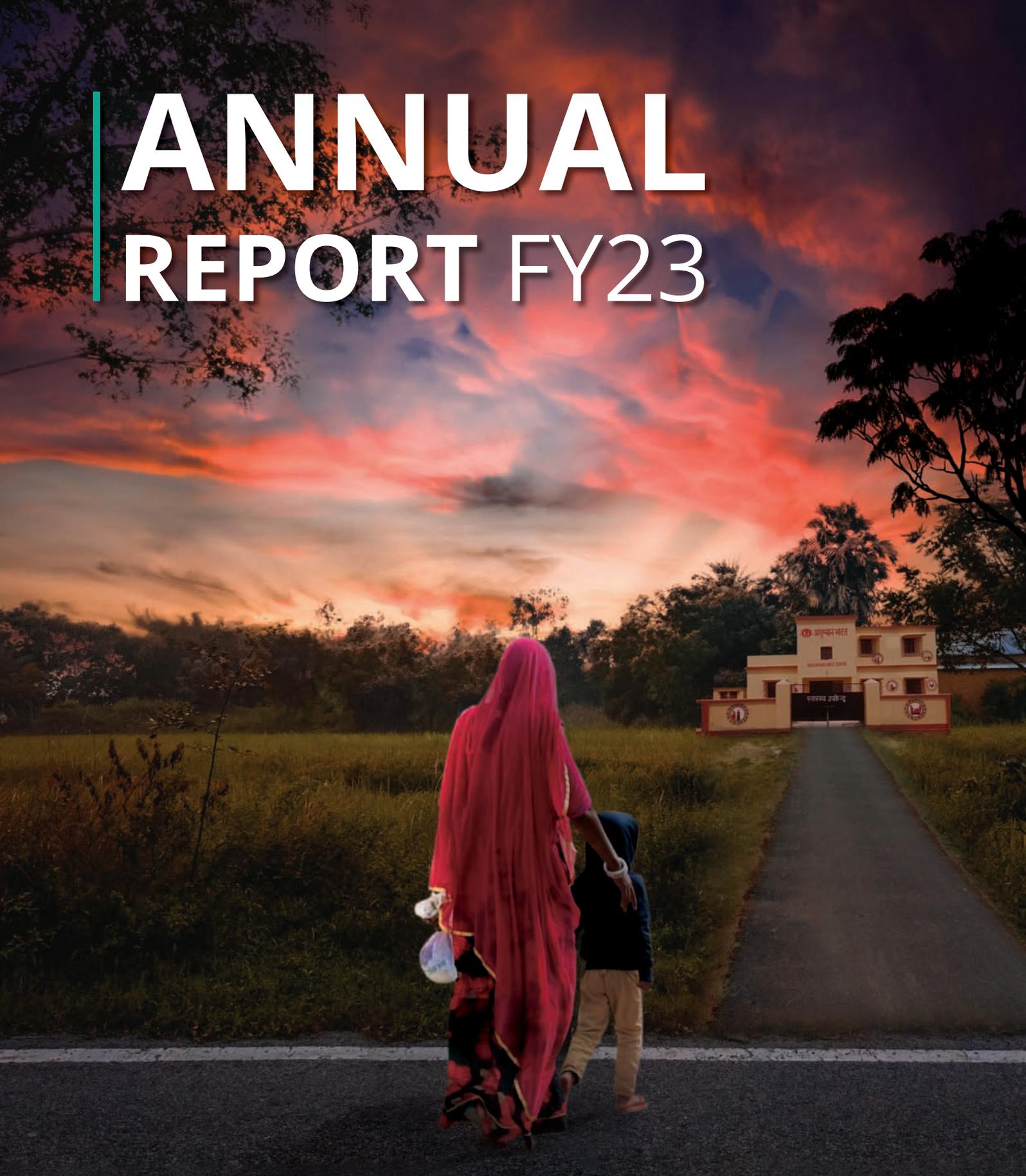


ANNUAL REPORT FY23



Enabling Indian
Health Systems

From the CEO's Desk



It is with great pleasure that I present to you the annual report of the Health Systems Transformation Platform (HSTP) for the financial year 2022-23. This year saw the completion of many research projects we had commenced, including definition and assessment of competencies of pharmacists and lab technicians, urban primary health care, home based health care, decentralisation of health systems, access to medicines and analysis of state health budgets. We initiated programmes for physician leadership development, fellowship for journalists and continued our work of building capacity of mid-career researchers through the India Health Policy and Systems Research fellowship programme.

This annual report is not only an overview of the achievements of the preceding year; it also serves as a roadmap for the years to come with our current work serving as building blocks for the future.

These achievements have been possible thanks to continued support from the union and state governments, our donors, the collaborating institutions, and the hard work put in by Team HSTP.

Thank you for your continued trust and support.

Yours sincerely,

A handwritten signature in black ink, reading "Rajeev S".

Rajeev Sadanandan
Chief Executive Officer

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The Year At A Glance

COLLABORATIVE PARTNERSHIPS:

In Madhya Pradesh

Collaborating with technical experts, HSTP and its partner organisations adapted the WHO Healthy City Framework for Bhopal to deliver a comprehensive urban healthcare model. With an integrated multi-sectoral approach to the project, the team conducted virtual consultations across the five key pillars: Water (quantity, quality), Food (nutrition, quality of processing/cooking, healthy ingredients), Sanitation (toilets, solid and liquid waste management), Environment (air, soil, public spaces, law, natural environment) and Individual and family (health services, safety). The framework developed is in line with the baseline report and aims to guide the selection of key focus areas.

In Meghalaya:

Supporting the state government with a state assessment and health budget analysis to develop a long-term investment plan for the government financed health services, which will be useful to be adopted for implementation. Health delivery and linked outcomes are significantly impacted by planning and availability of resources, especially monetary resources.

To read more about our work in Meghalaya, [click here](#)

In Odisha:

Working with the state health department to understand the limitations and improve access to medicines at primary health centres. HSTP studied this in partnership with Odisha Medical Services Corporation by creating assessment tools for supply chain enhancement.

Strengthening the implementation of Biju Swasthya Kalyan Yojana (state health assurance program) with a review of existing systems and a roadmap for the future.

To read more about our work in Odisha, [click here](#)

In Karnataka:

Delivering an assessment study followed by a model for a Healthy City for Mysuru with an intent to strengthen primary healthcare service delivery. In Urban settings, primary healthcare needs attention especially for low-income communities given the complexity of service delivery, weak social fabric, and fluidity of the population.

IMPACTFUL RESEARCH:

- **Organization and Delivery of Home Health Care:** This exploratory qualitative study investigated the emerging sector of home health care and provided an understanding of the dynamics between service providers and users.
- **Methods For Improving Out-Of-Pocket Expenditure (OOPE) Estimates for India:** The study, conducted with National Sample Survey Office (NSSO), assessed the impact of publicly funded health insurance schemes on hospitalization care utilization and the reduction of out-of-pocket expenditure (OOPE) among the elderly in India and aimed to enhance access to healthcare services and achieve Universal Health Coverage (UHC) objectives.

THOUGHT LEADERSHIP:

- **'Decentralisation and Local Decision Making in Health':** A study by Health Action by People and HSTP, based on the Kerala Experience, provided insights into how devolving power and resources to local governments has contributed to improved health outcomes in the State.
- **India's Health System: Reflections:** A policy dialogue with ten former health secretaries, organised by HSTP, drew on their rich experience, and captured their insights on India's health system. The dialogue generated ideas to strengthen India's health system and identified areas for future health systems research and practice.

VITAL CAPACITY BUILDING:

- Building competencies of primary healthcare providers like Pharmacists, and Medical laboratory technologist in Odisha helped cover a significant gap and triggered development of a model for upscaling the intervention.
- Awarding 38 mid-career health researchers with the India Health Policy and Systems Research Fellowship and training them on HPSR contributed towards our goal of building a community of Health Policy and System Researchers in India.
- Launching the Health Journalism Fellowship helped facilitate media discourse on health beyond crisis situations.
- Conducting a pilot of the "Creating Incredible Performances" - a leadership development programme, facilitated the process of enhancing the performance of mid-level health officials in the public sector.

Impact



Mission

Our mission is to enable Indian researchers and policy makers to conduct health policy and systems research and translate evidence to practice for Universal Health Coverage. The focus is on policy relevance, systems thinking and value-based partnerships with Indian and global institutions and experts.

Strategy

Strengthening India's Health Systems for Improved Health Outcomes and Equity

In pursuit of a healthier and more equitable India, the Health Systems Transformation Platform (HSTP) aims to create a space where theory meets practice, where policies are informed by evidence, and where healthcare delivery meets societal needs. We are committed to fortifying India's health systems, ultimately advancing health outcomes, and fostering health equity. The year's focus was to build the programme strategy that would prioritise critical health system interventions to work on.

The Four Pillars of HSTP's Strategy



Research

HSTP conducts research to generate evidence and knowledge products. This foundational step forms the bedrock upon which every subsequent action is built, guiding HSTP's strategic choices.



Design

Armed with the insights derived from research, HSTP designs evidence-based strategies for health system strengthening - actionable blueprints aimed at addressing the specific health challenges that India faces.



Validate

Implementation research is HSTP's means of validating the strategies it designs. This phase ensures that ideas resonate with the realities on the ground, and any necessary adjustments are made to optimize impact.



Scale

HSTP's commitment extends beyond research and implementation, into building the capacity of researchers in health policy and systems research and educating policymakers on the importance of scaling evidence-based practices. This holistic approach ensures that the fruits of research not only reach those who need it most but also catalyse transformational systemic change.

Central to HSTP's strategic intent is the aim to achieve health equity. It recognizes that a stronger health system is one that leaves no one behind, irrespective of geographic location, socioeconomic status, or any other societal determinant.

Human Resources for Health

- Clinical Competencies for Primary Health Care
- Leadership Development
- India HPSR Fellowship
- HRH Policies

Health Information

- Digital Health and Informatics
- Health Exchange
- Clinical Decision Support System

Health Financing

- Health Planning and Financing
- Health Assurance
- Internal Performance Agreements

Health Service Delivery

- Comprehensive Primary Urban Health
- Secondary Care Strengthening
- Emergency Care Systems
- One Health And Preparedness
- Anti-Microbial Resistance
- Referral Management

Essential Medicines

- Access to Medicines

Leadership and Governance

- Policy Analysis
- Regulation of Healthcare Delivery
- Decentralisation in Health Care

HSTP Thematic Interventions - Aligned to the WHO HSS Model

Health Service Delivery

Our Commitment to Access, Quality, and Equity

HSTP is dedicated to strengthening health service delivery in India through a multifaceted approach. This includes the enhancing of secondary care services, development of a model for trauma care, optimizing referral pathways and management systems, working to improve specific Non-Communicable Disease (NCD) outcomes and urban health initiatives.

Strengthening Urban Health Systems

India has witnessed positive health improvements due to increased investments in primary healthcare, particularly in health promotion, disease prevention, and expanding service outreach. However, challenges persist in urban areas, where comprehensive primary healthcare remains inadequate, fragmented, and costly for patients.

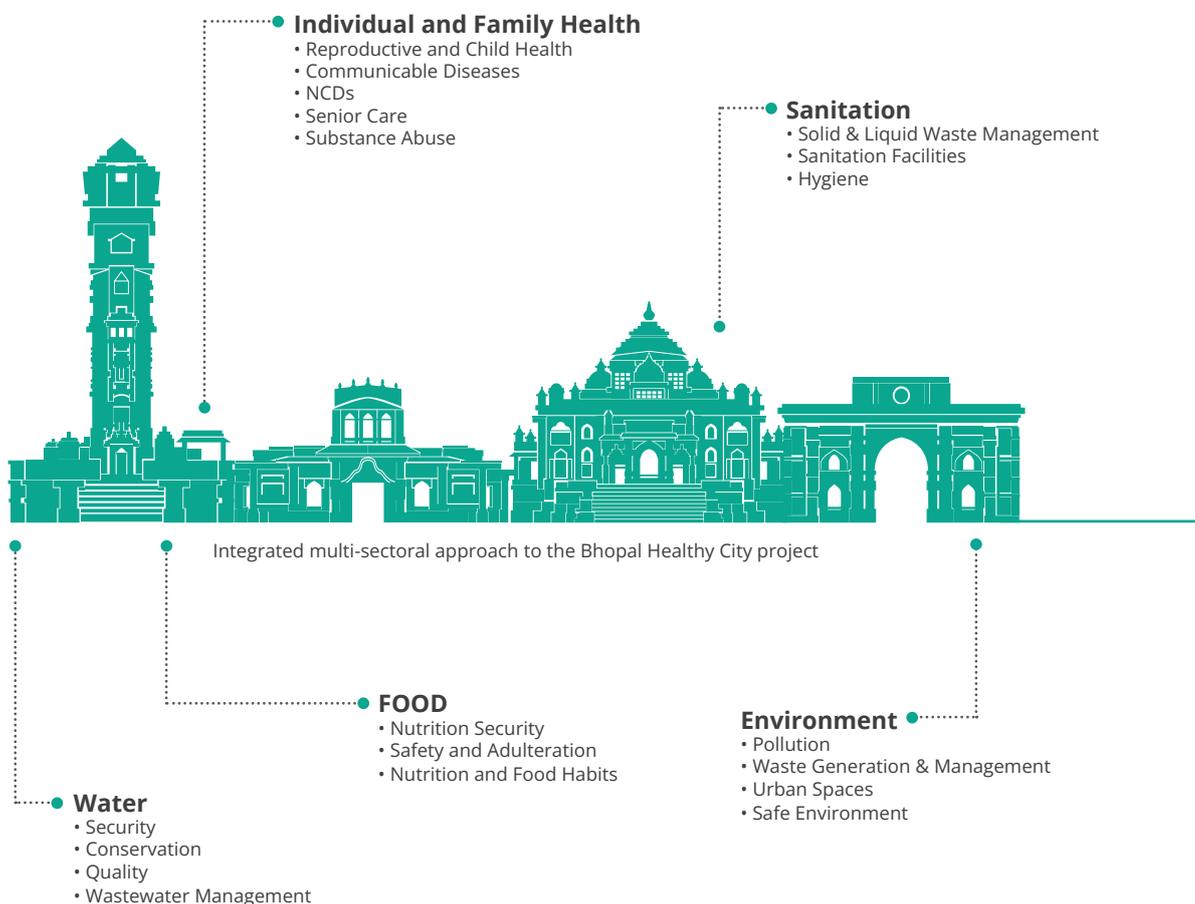
HSTP's vision for Healthy Cities aligns with the 2017 National Health Policy's goal of achieving

the highest level of health and well-being for all, emphasizing universal access to quality healthcare without financial hardship. Within its Urban Health Care portfolio, HSTP is engaged in initiatives in Bhopal and Mysuru cities, developing strategies for comprehensive primary care implementation.

Healthy City: Bhopal

HSTP, in partnership with Swasti, has been involved in the Healthy City Program in Madhya Pradesh since 2021. In March 2022, the Additional Chief Secretary-Health, Government of Madhya Pradesh, approved the proposal to establish a higher-level task force committee for the Healthy City Project. This led to extensive engagements with the National Health Mission (NHM), Government of Madhya Pradesh, to finalize agreements for project implementation and create state-level and city-level task force committees for Bhopal Healthy City Project.

A tripartite MoU was signed in September 2022, involving NHM-MP, Swasti, and HSTP, further



facilitating NHM approvals and departmental sensitization meetings. On December 8th, 2022, an introductory sensitization meeting of District Taskforce committee was organised, involving relevant government departments, academic health institutions, and civil society organizations. The team has also conducted virtual consultations across key pillars, including Health, Water, Food/ Nutrition, and Environment and Sanitation. HSTP, with Swasti, developed frameworks to generate detailed questions for discussions with technical experts. Two rounds of expert consultations were held for each domain. Based on the consultations, a list of indicators was prepared for each domain and on consultation with the government, a list of 50 indicators was finalized. An analysis was done for data availability for each indicator and the indicators were divided into two sets based on data available and where data mechanism needs to be established. A two-day state level consultation was held under NHM leadership to finalize the indicators and data collecting mechanisms. A GIS mapping of various facilities under each of the 5 domains is being prepared for Bhopal. A final state consultation and roadmap is being finalized for dissemination.



Bhopal Healthy City Project in Planning Stages

Healthy City: Mysuru

In collaboration with Karnataka Health Promotion Trust and St. Johns Research Institute, HSTP has been conducting formative research in Mysuru since 2021. Interim findings from both quantitative and qualitative components were discussed, leading to the development of intervention design options.

In FY23, a meeting was held between HSTP, KHPT, and SJRI on July 14, 2022, where the interim findings from the study were discussed and the way forward for implementation proposal development was outlined. Despite challenges

posed by the COVID-19 outbreak in early 2022, the study was completed, and findings were presented by KHPT and SJRI later that year, in September. Stakeholder consultations at the district level in November 2022 helped refine intervention design options. The final reports for the comprehensive primary health care system assessment study were submitted by end of March 2023. Close collaboration with Karnataka Health Promotion Trust has allowed to produce an intervention design proposal, which was well-received by Mysuru City Corporation and District health officials. The next phase of the project is implementation of the model.

Governance – Policy

- Convergence of key departments
- Local context and need incorporated in programs
- Decentralised administration and local leadership strengthened
- Health in all policy – impact assessment of policy
- Vision and planning for overall city health

Determinants

- Civic amenities and water services – water, sanitation, and hygiene
- Environment and climate change – transportation, green cover, pollution, industrial waste
- Public utility services and common spaces – parks, congestion management, cycle tracks, disabled and child friendly, cycle tracks, disabled and child friendly



Recommendations for strengthening primary healthcare at the community, facility and policy level in Mysuru from formative research conducted by HSTP in collaboration with KHPT and SJRI

Health Services

- Ensure basic health care – Strengthen primary health care delivery – infrastructure, consistent services and supplies
- Address capacity gaps and improve quality of care – Skill building
- PPP model, digital solution and innovation to improve coverage and quality

Community

- Health awareness to health literacy
- Community participation and ownership in health care – Strengthen Urban Local Bodies
- Strengthen outreach services and focus on vulnerable – migrants, poverty, elderly, workplace

Human Resources for Health

Building Capacities to Reach Health Goals

To strengthen the healthcare quality, accessibility, and availability across the country, HSTP works to build the capacities of the health workforce and enhance the quality of policies concerning it. By focusing on bolstering the competency of Frontline Workers (FLWs), HSTP is dedicated to elevating the skills and expertise of vital healthcare providers, aimed at delivering effective and high-quality care. It is also committed to nurturing leadership qualities among health managers, empowering them to catalyse positive transformations within the healthcare system. Strengthening HRH policies is another integral part of the system since issues such as forecasting, deployment, career progression, compensation, and retention of health workers continue to pose significant hurdles within the Indian healthcare system.

HSTP's strategic partnership with the Government of Meghalaya that was initiated in FY23 focuses on conducting in-depth assessments of issues such as rural healthcare worker retention, transfers for human resources for health (HRH), and specialist cadre shortages. Comprehensive reviews of global, national, and state HRH policies were performed, leading to recommendations for specific strategies and policies to mitigate Meghalaya's HRH challenges. This is the first phase of our intervention in the state. We also propose to support the state of Chhattisgarh on putting in place the policies on specialist cadre and Public health Cadre.

Leadership Development Program for Officials in the State Health Department

The Indian healthcare landscape is rapidly changing, and this warrants effective leadership and program management. High-performing health systems rely on robust leadership and management teams to drive program implementation and meet their objectives within defined timelines. Given that Indian State Governments possess in-depth knowledge of local contexts, needs, socio-economic realities, and priorities, having a workforce equipped with strong leadership and managerial abilities is crucial for implementing and effectively communicating change to achieve their objectives.

In partnership with Athulya Performance Facilitators Private Limited (Athulya), HSTP has developed a leadership development program known as "**Creating Incredible Performances (CIP)**" aimed at enhancing the performance of mid-level health officials in the public sector. This program focuses on strengthening the managerial and leadership skills of public health officials, empowering them to facilitate healthcare transformation within their respective states. Participants undergo training using experiential learning methods to internalize and apply the CIP framework to achieve their goals.



Leadership Development Program - Participant in action

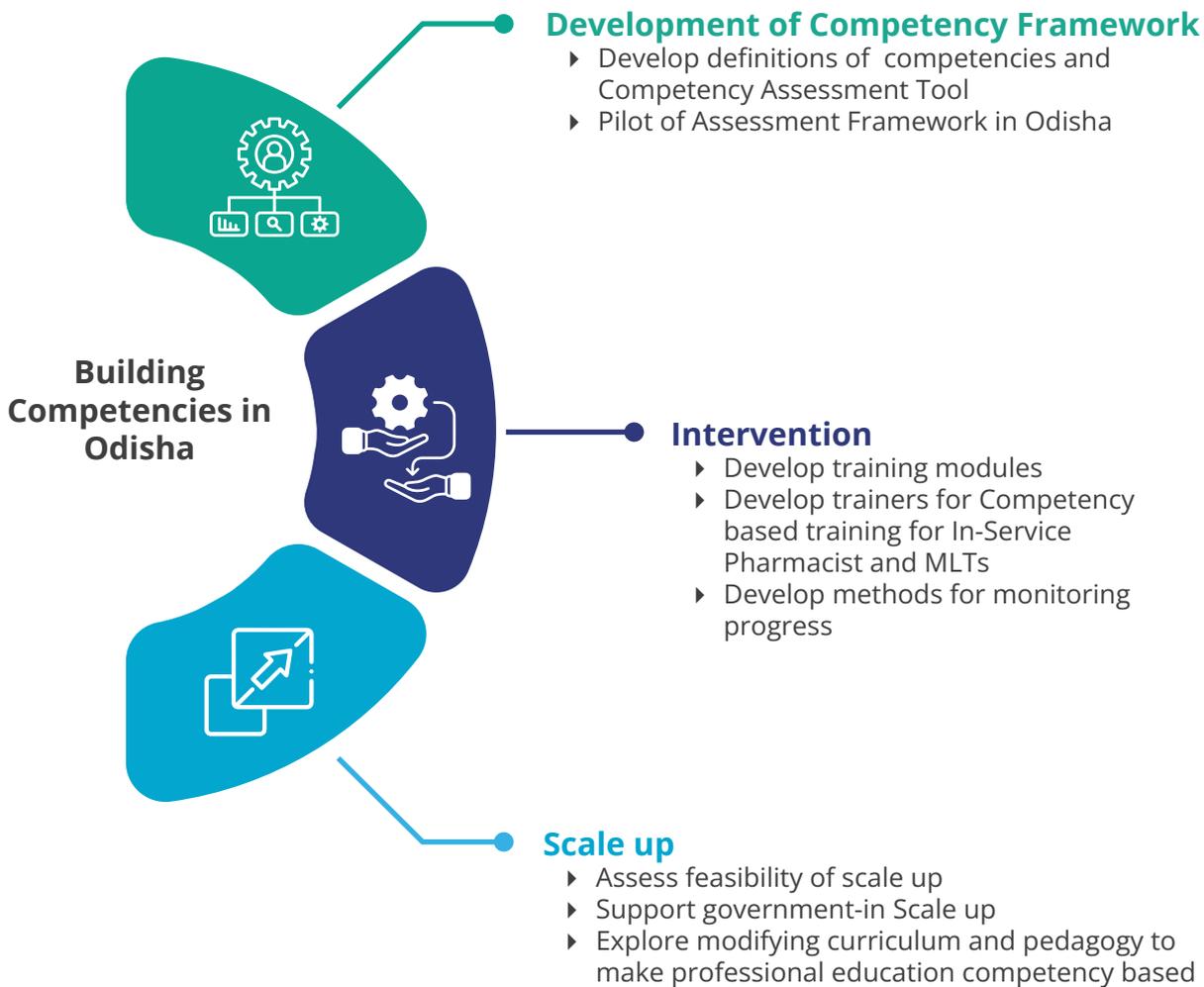
Creating Incredible Performances

In FY23, the inaugural cohort of the CIP program was launched and successfully conducted in Odisha from September 2022 to January 2023. This pilot initiative included two workshops and weekly virtual mentoring sessions for each participant, facilitated by Athulya. A total of 28 district-level medical officers and program managers completed their training by January 31, 2023. Looking ahead, HSTP is committed to train another cohort of leaders in 2023, develop coaches from the first and second cohort, and support the state in building in house capacity for training multiple cohorts. These coaches from the state will then lead the expansion of training programs within the state.

Know More >>

In partnership with the state Government of Odisha, the HSTP intervention has initiated the process of improving the competencies of providers in primary healthcare settings, the current focus being on the pharmacist, and medical laboratory technologist (MLTs). As explained in the diagram below, the exercise will spread over three phases. The first phase was completed in FY23.

Know More >>



Health Information

Bringing Technology to Health Systems Strengthening

Digital Health

In recent times, healthcare has undergone a transformative shift with the advent of digital health technologies. These innovations have the potential to strengthen healthcare systems, and HSTP has taken a planned step towards supporting central and State governments in their digital transformation journey.

HSTP has been focused on the digital transformation of healthcare systems using an integrated lifecycle approach. This approach involves a comprehensive strategy that aims to optimize all aspects of a person's life cycle, from conception to death. The approach has further adopted both patient-centric and system-centric digital health interventions to improve the quality, safety, and efficiency of healthcare services. HSTP will incorporate artificial intelligence, business intelligence, and big data analytics to improve the efficiency and agility of public health systems. The team is working closely with digital health experts and stakeholders to introduce comprehensive digital solutions that are tailored to the requirements and demands of healthcare providers, facilities, and patients. The goal of the HSTP is to tackle the critical health issues faced by healthcare systems in our intervention states and equip them with digital health technologies.

In addition, an innovative concept and framework for a revamped reporting system at the sub-center level for ANMs began to take form. This pioneering system aims to streamline data collection by allowing ANMs to input data for

multiple health programs (HMIS, RCH, IHIP) effortlessly, reducing duplication and improving compatibility. An envisaged dashboard for ANMs adds another layer of utility to the system. In-depth visual workflow documentation and a concept note were shared to senior health officials at MoHFW.

Health Informatics

Substantial progress was made in the field of Health Informatics during FY23. The focus was on creating state-specific factsheets that intricately depict the performance of each state concerning vital health indicators, encompassing Population Projections, Health Infrastructure metrics, and Health Outcome data. These factsheets were curated using a diverse range of secondary data sources, including RHS, SRS, Census, NFHS, NSO, and HMIS datasets. Additionally, the project ventured into the re-evaluation of NSS data, commencing at the district level and extending further down the hierarchy.

Efforts to craft a workflow design for referral linkages, with the aim of crafting customized funding proposals for a range of donor agencies, were set in motion. This intricate design places a premium on referral management and encompasses a broad array of scenarios, guaranteeing holistic patient care from the initial treatment stage through post-referral care, including empanelled/non-empanelled, public, and private health facilities.



Essential Medicines

Improving Access to Medicines at Primary Health Centres

Access to essential medicines is a major determinant of health outcomes as it plays a crucial role in preventing and treating diseases and keeps chronic conditions under control. Hence, it is important that public health facilities have essential medicines available to patients at the point of care so that they do not have to pay for medicines out of pocket. HSTP adopts a comprehensive approach to evaluate access to medicines, considering the perspectives of multiple stakeholders. This approach includes an understanding of supply chain processes, procurement, distribution, logistics, and the viewpoints of both healthcare providers and beneficiaries regarding the availability of medicines at the facility level.

Enhancing Access to Medicines in Odisha

In partnership with Odisha State Medical Corporation, HSTP initiated the work to improve access to essential medicines at primary healthcare centres. The initiative involves developing assessment tools to analyse and enhance the supply chain, logistics, and availability of essential medicines at these centres.

Investigating Out-of-Pocket Expenditures:

Collaborating with the Asian Institute of Public Health (AIPH) University, HSTP conducted a comprehensive study to identify factors contributing to higher out-of-pocket expenses in Odisha's public health facilities. The study findings will help HSTP suggest measures to strengthen the overall drug management system and ensure its availability in the state.

Sharing Best Practices

Working closely with Odisha State Medical Corporation Limited (OSMCL) and the Department of Health, HSTP examined the structure, functioning and processes for the state's procurement and supply chain management of drugs. Best practices from other medical corporations have also been studied to derive lessons for strengthening the Odisha drug supply chain model. HSTP submitted intermediate recommendations to the Department of Health, Government of Odisha for their consideration.

LIST OF DRUGS TO BE AVAILABLE AT SDH NILGIRI, BALASORE											
SL.NO.	NAME OF THE MEDICINE	AVAILABILITY YES/NO	SL.NO.	NAME OF THE MEDICINE	AVAILABILITY YES/NO	SL.NO.	NAME OF THE MEDICINE	AVAILABILITY YES/NO	SL.NO.	NAME OF THE MEDICINE	AVAILABILITY YES/NO
ANTI HELMINTHICS			ANTI FILARIAL DRUGS			GASTROINTESTINAL DRUGS			DIURETICS		
1	Susp. Albendazole	✓	48	Tab. Diethyl Carbanthiazine Citrate	✓	39	Tab. Pantoprazole	✓	134	Iv Mannitol 20%	✓
2	Tab. Albendazole	✓	ANTI FUNGAL DRUGS			90	Cap. Omeprazole	✓	135	Inj. Frusemide	✓
ANTI ALLERGIC DRUGS			49	Clotrimazole Lotion	✓	91	Syp. Prometazine	✓	MISCELLANEOUS AGENT		
3	Tab. Prednisolone	✓	50	Tab. Fluconazole 50mg	✓	92	Syp. Dicyclomine	✓	136	ACT Combi Pack > 1 Yr	✓
4	Tab. Levocetirizine	✓	51	Tab. Fluconazole 150mg	✓	93	Susp. Domperidone	✓	137	ACT Combi Pack 1 - 4 Yrs	✓
5	Tab. C.P.M.	✓	ANTI HYPERTENSIVE DRUGS			94	Syp. Ondansetron	✓	138	ACT Combi Pack 5 - 8 Yr	✓
6	Tab. Cetirizine	✓	52	Tab. Labetalol	✓	95	Susp. Atacand	✓	139	ACT Combi Pack 9 - 14 Yr	✓
7	Syp. Cetirizine	✓	53	Tab. Losartan 50mg	✓	96	Tab. Ondansetron	✓	140	ACT Combi Pack Adult	✓
8	Inj. Noradrenaline	✓	54	Tab. Atenolol 50mg	✓	97	Tab. Domperidone	✓	141	Tab. Riluzole	✓
9	Inj. Dexamethasone	✓	55	Tab. Amlodipine 5mg	✓	98	Tab. Dicyclomine	✓	142	Sterile Water 10ml	✓
10	Inj. Hydrocortisone	✓	56	Inj. Labetalol	✓	99	Tab. Rabeprazole	✓	143	Sterile Water 5ml	✓
11	Inj. Pheniramine Maleate	✓	ANTI PROTOZOAL DRUGS (ANTI-AMOEB)			100	Tab. Ranitidine	✓	144	Phenyl	✓
ANTIBACTERIAL DRUGS			57	Tab. Ornidazole 500mg	✓	101	Tab. Antacid	✓	145	Bleaching Powder	✓
12	Tab. Ofloxacin 100mg	✓	58	Susp. Metronidazole	✓	102	ORS 4.3gm	✓	146	Tab. Folic Acid	✓
NON OPIOID ANALGESICS											



FY23 OVERVIEW

Health Financing

Health Financing & Planning: Empowering Effective Investment Strategies

Health Financing and Planning (HFP) vertical at HSTP aims to generate evidence on existing practices in health financing in the states through a comprehensive analysis of health budgets, and their utilization to identify gaps. The objective is to help the states and districts to understand and document their financial management practices, assess their efficiency, identify ways of optimising their financial management, reduce out-of-pocket spending as a source of financing and using planning as a tool to improve efficiency of expenditure. The team also develops comprehensive time bound health plans for improving health outcomes and reduce inequities in the intervention states.

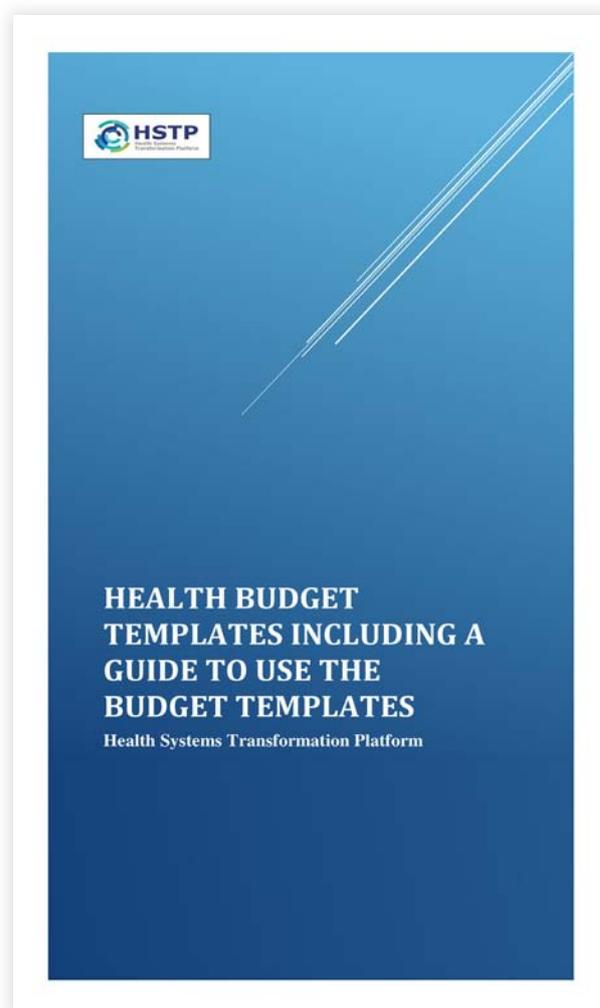
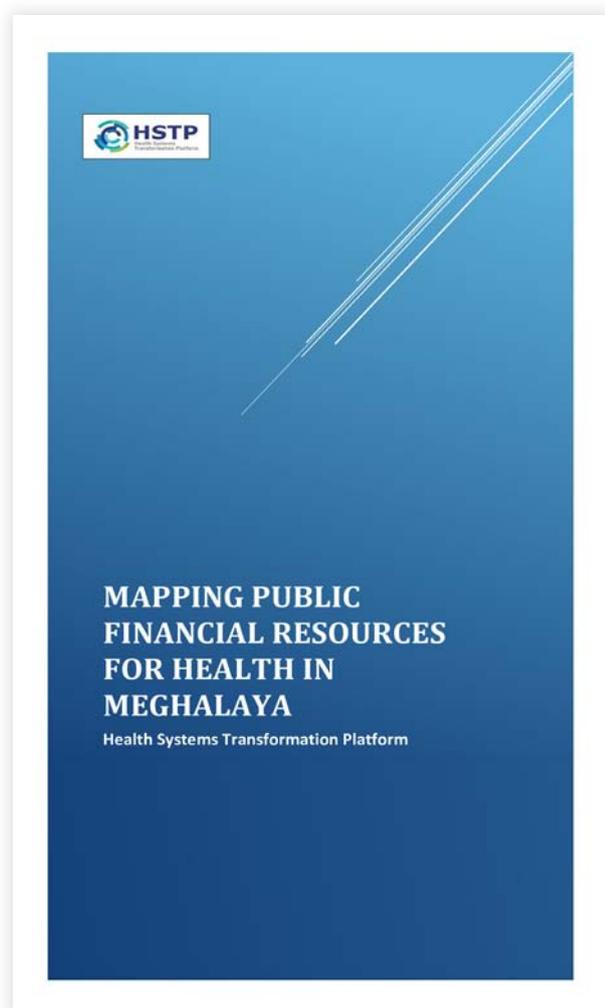
Health Financing and Planning in Meghalaya

On invitation from the Government of Meghalaya, HSTP is partnering the state to strengthen the

health system in the state. As a part of this engagement, HSTP is supporting the Department of Health and Family Welfare (DoHFW) in the state to develop a long-term investment plan for government financed health services. The partnership entails conducting relevant research to support decision making for policy and program implementation, building capacities, design, and validating interventions. In the first phase of our work as strategic partners to the state government, HFP team at HSTP conducted a detailed analysis of the state's health budget and the findings were presented to the state's health and finance departments. Following up on this, the state sought HSTP's assistance in formulating a long-term health sector plan aligned with state health objectives, the National Health Policy, 2017, and Sustainable Development Goals 2030. The HFP team will work closely with the state to develop need-based planning and financing for its health sector.

[Know More >>](#)

FY23 OVERVIEW



Health Assurance

A Comprehensive Approach for Access, Efficiency, and Financial Protection

Our approach to Health Assurance, with a particular focus on advancing Universal Health Coverage (UHC), aims to enhance access to healthcare services, while concurrently bolstering financial protections for individuals and families. We contribute to the development of knowledge products through rigorous research, customise solutions, and build the capacity necessary for fine-tuning the implementation of health schemes in partnership with state governments.

This approach has yielded tangible outcomes, including improved and efficient scheme implementation and increased utilization by beneficiaries. The strategy extends to making the knowledge products available for wider dissemination. This will in turn enhance the effective implementation of government-funded health schemes, ultimately leading to increased service utilization by beneficiaries and a significant reduction in out-of-pocket expenditure. We envision a positive impact on communities by significantly reducing the financial burden on beneficiaries when accessing scheme services, moving us closer to the goal of Universal Health Coverage.

Support to Biju Swasthya Kalyan Yojana (BSKY), Government of Odisha

HSTP has been supporting the Biju Swasthya Kalyan Yojana (BSKY), Government of Odisha, since 2018. This ongoing collaboration has

yielded substantial program enhancements rooted in evidence-based practices, alongside the creation of knowledge resources and training modules aimed at benefiting clinical and program personnel. With HSTP's assistance, Odisha has moved to health assurance from health insurance mode with a third-party administrator support since 2021.

In FY23, HSTP conducted a thorough program review, to come up with findings and recommendations, as well as a roadmap to take the work forward. The review and plans were presented to the CEO of BSKY.

Know More >>

Support to Rajasthan State Health Assurance Agency for Strengthening Chiranjeevi Yojana (Health Insurance Scheme)

HSTP is in consultation with the RSHAA to collaborate on improving the scheme implementation. With the intention of drafting a scope of work to cover research and training, two meetings were conducted with RSHAA officials in the year. In January 2023, HSTP conducted two training programs on capacity building for medical audits.



Leadership and Governance

Health Systems Governance: A Path to Strengthening Healthcare

Our approach to Health Systems Governance underscores the vital role of governance as one of the six building blocks of a health system. Governance is a dynamic and intricate political process, pivotal to the seamless functioning of the system.

Considering that, HSTP is committed to providing technical assistance to governments, regulatory bodies, and stakeholders in the Indian healthcare landscape. With Health Systems Governance, HSTP aims to improve the regulation and governance of healthcare services to increase people's access to quality, rational, and affordable care by:

- Addressing information and power asymmetry
- Establishing transparent and accountability mechanisms
- Regulating provider behaviour and correct undesirable trends and distortions
- Protecting public safety and promote rational, affordable, quality care

Organisation and Delivery of Home Healthcare

The emergence of home healthcare has gained momentum worldwide as a response to various factors such as nuclearization of families, urbanisation, the aging population, and the preference for personalized care in familiar settings. In India, while the concept is growing, it faces challenges such as standardization of services, regulatory frameworks, and ensuring equitable access. In FY23, HSTP carried this space with an exploratory qualitative study entitled **"Home Healthcare: Emerging Phenomenon in India"**.

The study gives an overview of how home healthcare is organised and delivered, with respect to the services, providers and users, and the interaction between them. Aiming to facilitate a dialogue about this phenomenon, the report of the study was released, and the key findings shared during a webinar held on 15th March 2023. Nearly 90 practitioners, researchers, students, and academicians participated in the webinar. The panel comprised of representatives of the Ministry of Health and Family Welfare, Government of India; Kerala State Planning Board, Government of Kerala and HelpAge India

reiterating the importance and relevance of the study as a need of the hour. The findings of the study and the discussion during the webinar will feed into HSTP's future work on the issue.

[The study report is available here](#)



Fostering Policy Dialogue

Creating a safe space for policy dialogue about health systems in India is crucial for informed decision-making. It brings together diverse perspectives and expertise to address complex healthcare challenges and improve the overall effectiveness and equity of the system. It promotes collective problem solving and helps recognize windows of opportunity to drive change.

To ensure such a space is thriving and abuzz, HSTP organised and actively participated as experts on several knowledge exchange and Government platforms, advisory committees, and panels to re-emphasize strengthened health systems in India throughout FY23.

01 'Cries that have no Tears: Understanding Elderly Patients' Rights in India': A webinar was organised on 29th September 2022, where panellists were medical practitioners, legal professionals, patients' rights activists, and caregivers of the elderly. They shared their views and experiences on elderly patients' rights concerning health care (patient autonomy, right to privacy, right to informed consent) and avenues for their redressal. The report of the webinar is available [here](#)

02 Policy Dialogue with Former Bureaucrats: A two-day policy dialogue was organised in New Delhi on 10-11 November 2022. The policy dialogue brought together ten former health secretaries and other stakeholders, including the government and associated institutions, the private sector, practitioners, researchers, and partners to reflect on India's health system. The discourse facilitated sharing of insights based on the rich and varied experience of former policymakers; provided a platform to current policymakers, researchers, health managers, academicians, and public health practitioners to engage with former policymakers; generated alternate and novel ideas to strengthen the health system of the country; and identified areas for future health systems research and practice. The report of the Policy Dialogue is available [here](#)



Policy Dialogue with Former Bureaucrats

03 "The Role of Decentralisation in Health in India": A conference was organised at Hotel Ashok, Chanakyapuri, New Delhi on 27-28 February 2023 where reports of two studies on decentralisation and health were released. While one study was conducted by Health Action by People (HAP), Thiruvananthapuram and Health Systems Transformation Platform (HSTP); the other was done by Janaagraha, Bengaluru.

Gracing the conference as Chief Guest was Mr. Hardeep Singh Puri, Hon'ble Minister of Housing and Urban Affairs, Government of India. Mr. Manoj Joshi, Secretary, Ministry of Housing and Urban Affairs, Government of India addressed

the participants in the inaugural session. With nearly 100 participants from different parts of the country, the conference enabled sharing of varied perspectives. The deliberations at the conference focussed on the role of democratic governance at local level in enhancing health outcomes in the country. The report of the conference is available on this [link](#).



Mr. Hardeep Singh Puri, Hon'ble Minister of Housing and Urban Affairs, Government of India addressing the audience

04 Lancet Global Health Commission Report on Financing Primary Healthcare: An event was organized on 17th February 2023 to disseminate the report. Panel discussions were organized inviting experts from India and the world. The discussions ranged from "Financing of Primary Healthcare in Asia and India", "Primary Healthcare Financing in the World Health Organization (WHO) Southeast Asia Region with a focus on India", "Managing Finances for Primary Healthcare", "Financing Primary Healthcare in India – Public Financial Management challenges", to "How costing studies contribute to designing Primary Healthcare reforms" providing the audience valuable insights into the issue at hand.

[Read More](#)

05 "Dialogue with Policy Makers": The experience of two former bureaucrats were captured as audio-visual content and uploaded to the HSTP website for ease of access. The two videos feature Mr. J. V. R. Prasada Rao, Secretary, Health and Family Welfare, Government of India (2002 to 2004) and Director, NACO (1997 to 2002), and Ms. Rita Teautia, Chairperson, Food Safety and Standards Authority of India, FSSAI (2018-2021) respectively. While Mr. Rao narrates his experience as a policy maker and the factors that contributed to the successful implementation of the National AIDS Control Programme, Ms. Teautia talks about the several transformational changes that took place in FSSAI during her tenure. Both the videos are of great value as policy case studies in academic courses and training programmes.

Capacity Building

Enhancing Stakeholder Capabilities

With the aim to build the capacity of researchers & practitioners to develop and implement HPSR, HSTP has taken on the role of creating a community of Health Policy and System Researchers in India. Our training programs, tailored to the Indian context, aim to build these capacities with a focus on knowledge and skill transfer through creating immersive experiences in real-world settings.

India Health Policy & Systems Research Fellowship

The fellowship program was launched in January 2021. This initiative of HSTP aims to enhance the capacity of mid-career public health professionals in health policy and systems research (HPSR) methods to strengthen evidence-based policymaking in health. Organised in collaboration with a global network of eminent partners, the fellowship envisages to identify twenty fellows each year. Each cohort is trained in HPSR methods through a blended-training program that includes practical experience of conducting an HPSR study.

The second cohort selected in year 2022 has taken to study topics ranging from Multimorbidity Management in PHCs, Digital Technology for Health Service Delivery, Systemic Complexities in Non-Communicable Disease Services, Inappropriate Antibiotic Use, Menstrual Health-Friendly School Campuses, Gender-Responsive Pathways for Adolescent Sexual Health, Cross-Sectoral Collaboration for Zoonotic Diseases, Stock Out of Essential Drugs, to Health System Responsiveness. Depending on the nature of the study, the geographic areas covered specific districts, to state-level systems, and national systems. The program brings together a diverse discipline of researchers who are trained to generate evidence-informed solutions to influence health reforms for improving health outcomes.

The first six months is an intense online phase where the selected fellows are taken through the specificities of HPSR. This is an important phase where fellows not only learn new material, but also recognise and unlearn many of their disciplinary biases. The second cohort completed the online phase and made their jury presentations to a panel comprised of global and national HPSR experts (core faculty, supported by external reviewers), before proceeding to the year-long implementation phase

FY23 OVERVIEW



Glimpses from India HPSR Fellowship Program - Cohort 2022

Core Faculty

Bruno Marchal

Institute of Tropical Medicine, Antwerp

Devaki Nambiar

George Institute for Global Health India

Dorothy Lall

Christian Medical College, Vellore

N Devadasan

Course Director, India HPSR Fellowship

Prashanth NS

Institute of Public Health, Bengaluru

Rakhal Gaitonde

Achutha Menon Centre for Health Science Studies

Sara Van Belle

Institute of Tropical Medicine, Antwerp

Sumit Kane

Nossal Institute for Global Health

External Reviewers

Asha George

University of Western Cape, South Africa

Bart Criel

Institute of Tropical Medicine, Antwerp

Kerry Scott

Johns Hopkins Bloomberg School of Public Health

Mathew George

Central University of Kerala

Pragati Hebbar

Institute of Public Health, Bengaluru

Seye Abimbola

The University of Sydney

Upendra Bhojani

Institute of Public Health, Bengaluru

Rama Baru

Jawaharlal Nehru University

Ritu Priya

Jawaharlal Nehru University

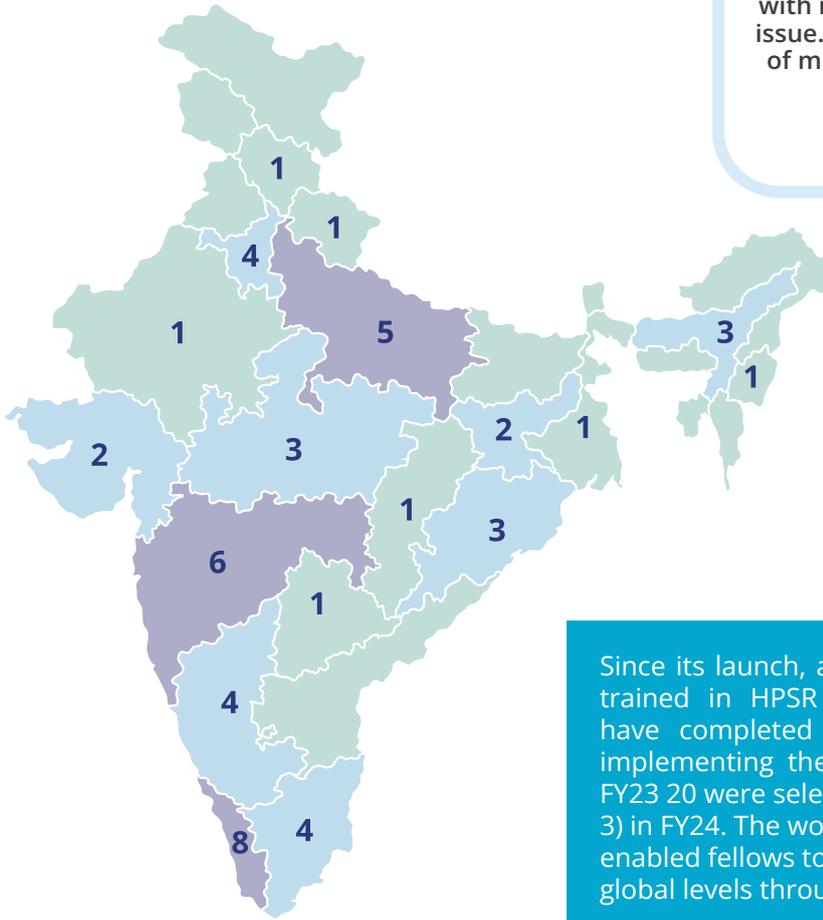
“

It is a delight to see the remarkable progress we have made in the program. This is an exciting journey of working collaboratively, learning together, supporting the development of HPSR and the next generation of HPSR researchers in India.

Sumit Kane, Professor, Nossal Institute of Global Health, University of Melbourne

”

**Where Our Fellows Come From
(Cohort 1,2 & 3)**



“ HPSR training tuned me to approach the health-related issues/events in a comprehensive way. With this approach, I feel more confident and try to engage with multiple stakeholders to address the issue. HPSR made me realise the influence of multiple players in every health issue.

Kalaiselvi
Fellow, Cohort 2

Since its launch, a total of 58 researchers have been trained in HPSR by the program. 10 researchers have completed their studies (Cohort 1), 18 are implementing their HPSR studies (Cohort 2) and in FY23 20 were selected to undergo the training (Cohort 3) in FY24. The worldwide network of the program has enabled fellows to make an impact at the national and global levels through their collaborations.



Focused Group Discussion captured during research study by Anuj Ghanekar, Cohort 1

HSTP – Health Journalism Fellowship 2022

To build a media discourse that makes health systems a social and political priority beyond times of crisis, HSTP launched the Health Journalism Fellowship in 2022. The first batch spread over six months (October 2022 to April 2023) saw each selected journalist receive a grant of Rs 1,00,000. A two-day orientation training workshop was organised at the HSTP Office, New Delhi on 20-21

October 2022 to provide the health journalism fellows with guidance from subject matter experts, former bureaucrats, policymakers, and senior journalists. The fellowship has enabled four young journalists publish 12 media articles covering public health concerns of the particularly vulnerable tribal groups, survivors of acid attacks, sex workers and the transgender community, and the teaching and practice of Ayurveda. The media articles were published in Down-to-earth, India Spend and The News Minute.



Photo from fieldwork by Ms. Sneha Richhariya for Indiaspend



Photo from fieldwork by Ms. Aishwarya Mohanty



Photo from fieldwork by Ms. Sneha Richhariya for Indiaspend



Photo from fieldwork by Ms. Aishwarya Mohanty

Partnering with the States

Health Systems Strengthening

In India, health is a state subject and more than 65% of government spending on health care is incurred by the state government. Although the requirements and the capacity of each state is different, and the demand for improved health, sustained health outcomes, lower cost are high and common in the country. HSTP has the unique experience of how public health systems work and the depth of expertise to address some of the most pressing challenges the states face in supplying to these demands.

HSTP offers the capacity for state health system analysis, generates evidence for reforms based on the analysis, assists states to implement the reforms and enhances the capacity of Indian researchers to carry out Health Policy and Systems Research. In FY23, we worked in strategic partnerships with the states of Odisha and Meghalaya.



Odisha

HSTP in partnership with the Harvard TH Chan School of Public Health and the Indian Institute of Public Health has conducted a comprehensive assessment of the Odisha Health Systems. The findings from this assessment highlighted emergent issues and the significance of reducing out-of-pocket expenditure (OOPE) in healthcare, with which the state government was aligned. Subsequently, HSTP developed a policy brief that delved into the utilization of healthcare resources, both before and after the onset of the COVID-19 pandemic. This policy brief served as a foundation for further discussions and planning. The process of selecting interventions was carried out in consultation with the state government, ensuring that our efforts were closely aligned with the needs and priorities of Odisha's healthcare landscape.

Health Assurance: Support to Biju Swasthya Kalyan Yojana (BSKY)

HSTP's unwavering commitment to supporting the Biju Swasthya Kalyan Yojana (BSKY), Government of Odisha, has been an integral part of our mission since November 2018. The program is dedicated to evidence-driven program enhancements, knowledge product development, and training programs for clinical and program personnel.

Throughout FY23, HSTP maintained its active engagement with BSKY, culminating in a comprehensive program review presented to the CEO of BSKY. This review led to crucial recommendations for refining claims processing and implementing robust fraud detection, prevention, and control measures, which have now been accepted for design and development in close consultation with the IT department.

HSTP also developed a detailed implementation roadmap to facilitate the seamless integration of these enhancements within the state health agency. Simultaneously, discussions between HSTP experts and the State Health Assurance Society (SHAS) team have revolved around optimizing pre-post hospitalization benefits within the scheme, with the aim of bolstering financial protection through BSKY benefits and aligning with broader health system objectives.

Human Resources for Health: Leadership Development Program for Officials in the State Health Department

HSTP's leadership programme, developed in collaboration with Athulya Performance Facilitators Private Limited (Athulya), was piloted in Odisha. This program involves capacity building of health managers to improve their performance. The process entailed two workshops and individual mentoring by facilitators for three months with each participant. The training workshops are being co-funded by the state government.

28 district wing officers/ medical officers in charge from three districts (Khurda, Koraput

and Sundargarh) participated in the first training workshop. In September 2022, individual coaching for all 28 participants began in virtual mode, while in December, a one-day mid-program in-person group coaching was conducted. Out of the trainees 61% achieved incredible goals. The valedictory ceremony was conducted in February 2023 with the objective of celebrating and acknowledging the achievements of the participants. At this program, the participants also shared their experiences of the three-month journey with higher officials of the Department of Health and Family Welfare, Odisha. The programme was welcomed by the Government of Odisha who have agreed to internalise the programme through the State Institute of Health and Family Welfare.



Pilot Leadership Development Program in progress

Human Resources for Health: Building Competencies

The Odisha Health Systems Assessment found that the competencies of the primary health care team needed further development, especially in the areas of diagnostics, prescription, and referrals. To reach the ultimate goal of providing quality primary healthcare, a pressing need for building in-service competencies in the Primary Health Care Workforce in India was evident.

The HSTP intervention aims to improve the competencies of providers in primary healthcare settings. While the initial focus is on the pharmacists and medical laboratory technologists, it is to be expanded later to the community health officers, staff nurses, and medical officers. The

intervention is to be spread out in three phases starting with the development of competency framework and moving on to intervention and scaling up. In FY23, HSTP has developed the competency framework for pharmacists and medical laboratory technologists and has completed their assessment as well. Based on the lessons learnt during this process, HSTP has developed competency-based training packages.

a. Building Pharmacist Competencies: To develop the Competency Assessment Tool (CAT), HSTP collaborated with the Indian Pharmaceutical Association, Pharmacy Wing-SCB Medical College, Cuttack, and KIIT School of Public Health Bhubaneswar. The collaborative developed, validated, and customised the tool according to the needs of the state through a physical expert and stakeholder consultation on 14th November 2022, in Bhubaneswar. The Bilingual CAT (English and Odia) was pre-tested, and the finalized version was used to assess the in-service Pharmacists' competency in four districts, i.e., Angul, Balasore, Jharsuguda, and Raigada. This assessment helped identify the competency gaps. The competency-based training manuals have been developed to bridge these gaps.

b. Building Medical Laboratory Technologists Competencies: To develop the CAT based on the competencies of the medical laboratory technologists (MLT), HSTP partnered with the Indian Confederation of Medical Laboratory Science and the Department of Pathology and Laboratory Medicine of All India Institute of Medical Sciences, Bhubaneswar. This CAT was validated and customized through the physical expert cum stakeholder consultation held on 18th November 2023 in Bhubaneswar. The bilingual (English and Odia) CAT was further pre-tested and used to assess the MLT's competencies in four districts, i.e., Angul, Jharsuguda, Ganjam, and Gajapati. HSTP, along with its collaborators developed competency-based training manuals to bridge the gaps identified by the assessments.



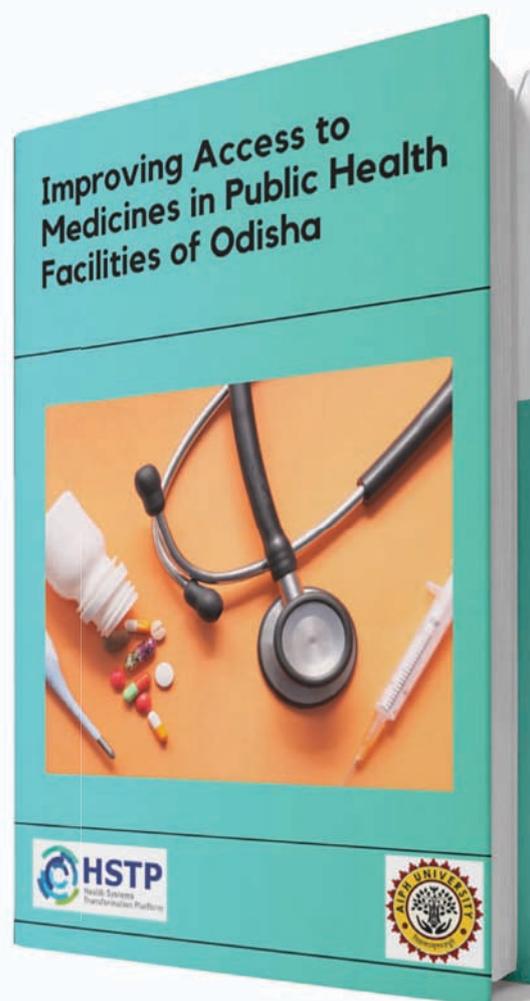
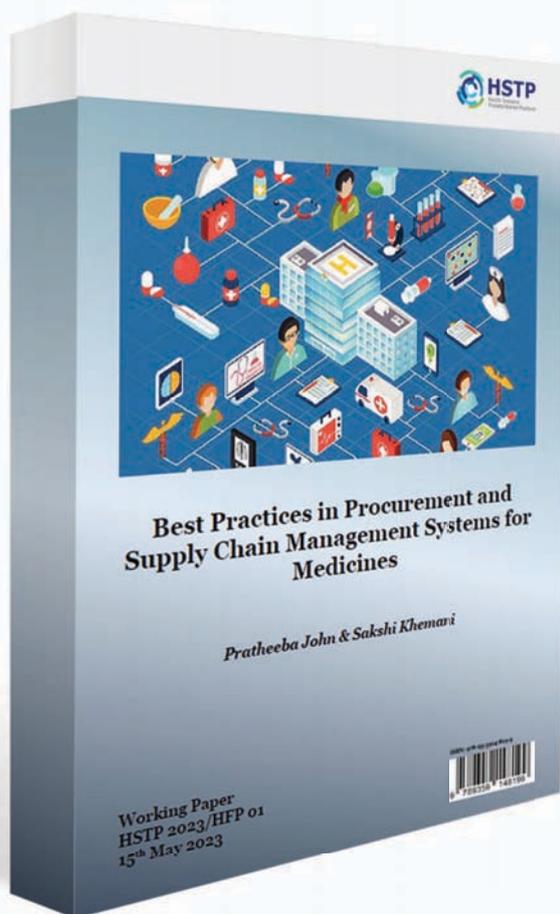
Developing the competency framework

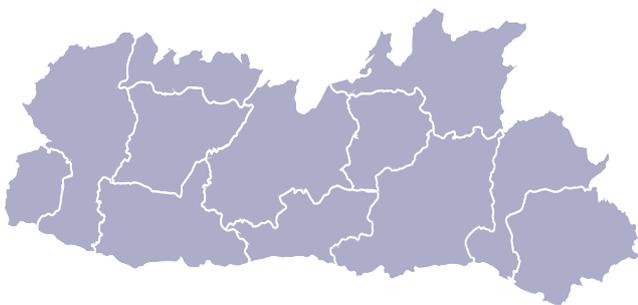
Improving Access to Medicines at Public Health Facilities

In a strategic partnership with the Asian Institute of Public Health (AIPH) University, HSTP has embarked on the journey to enhance access to medicines in Odisha's public health facilities. A study has been initiated to identify the factors contributing to higher out-of-pocket expenses for patients in these facilities. The study was conducted in four sample districts - (i) Balasore (ii) Angul (iii) Jharsuguda and (iv) Rayagada chosen based on their geographic location. The study adopted a mixed method approach using both quantitative and qualitative techniques to obtain the relevant information for the study. Assessment tools were developed, and data

was meticulously gathered from a diverse array of stakeholders, including sampled health facilities, drug warehouse managers, medical practitioners, pharmacists, and the beneficiaries themselves. This data collection made way for a comprehensive analysis of the factors affecting the availability of essential medicines in public health facilities and scrutinize prescription practices within the state.

Moreover, Odisha State Medical Corporation Limited (OSMCL) and the Department of Health are actively implementing intermediate recommendations made by HSTP, drawn post studying state nuances, as well as successful practices of medical corporations in Tamil Nadu and Kerala.





Meghalaya

As strategic partners to the Government of Meghalaya to strengthen their health system, in FY23 HSTP's engagement with the state expanded. Our support areas in the state now include health financing, resource planning for health and human resources for health. We conduct relevant research to support evidence-based decision-making for policy and program implementation, building capacities, designing, and validating interventions. The objective is to bridge the existing gaps within the health system, strengthen health service delivery and improve health outcomes in the state.



Health Financing and Planning

For Health Financing and Planning (HFP), HSTP's approach begins with secondary desk research involving a comprehensive health situation and expenditure analysis, utilizing publicly available data from reliable sources and state-provided budget data. Following this, in-depth discussions are held with relevant stakeholders and policymakers to incorporate contextual factors, identify health system challenges, and determine priority areas for enhancing overall health outcomes. In collaboration with the Government of Meghalaya, HSTP aids the state in crafting need-based planning and financing strategies for the state's healthcare sector.

A detailed analysis of the state's health budget revealed resource allocation gaps and expenditure patterns and the findings were presented to the state's health and finance departments. In response to these insights, the state sought HSTP's assistance in formulating a long-term health sector plan aligned with state health objectives and in line with the National Health Policy, 2017, and Sustainable Development Goals 2030. This process involves a situational analysis to grasp key health concerns in the state, and subsequently, the Health Financing and Planning team develops time-bound plans and frameworks for Internal Performance Agreement tailored to state priorities and goals.

Human Resources for Health

HSTP is supporting the Government of Meghalaya to identify and address the HRH challenges in the state. The team has conducted a comprehensive review of the HRH situation within the states' public health system, identifying key challenges like poor retention of primary health care workers in rural areas, the need for norms for transfers and postings of HRH and lack of specialist cadre within the health system. Following this, HSTP conducted a comprehensive secondary review of HRH policies/strategies that exist globally, nationally and in states. We shared resource documents recommending specific strategies and policies that the Government of Meghalaya should adopt to address the HRH challenges in the state.

Publications

 Rajeev Sadanandan co-authored:

- ▶ “Local government stewardship for TB elimination in Kerala, India”, Public Health Action, Volume 13, Supplement 1, 1 March 2023, pp. 44-50(7)
- ▶ “Decentralisation, health and Sustainable Development Goal 3”, Public Health Action, Volume 13, Supplement 1, 1 March 2023, pp. 51-56(6)
- ▶ “Re-engineering primary healthcare in Kerala”, Public Health Action, Volume 13, Supplement 1, 1 March 2023, pp. 19-25(7)
- ▶ “The burden of dengue and force of infection among children in Kerala, India; seroprevalence estimates from Government of Kerala -WHO Dengue Study”
- ▶ A chapter on Policy Framework for Health of Senior Citizens in India in the Handbook of Aging, Health and Public Policy

 Pallavi Gupta and Sonali Randhawa. Home Healthcare: Emerging Phenomenon in India. Health Systems Transformation Platform, New Delhi. 2023.

 Dr Rahul Reddy co-authored the paper on improving OOPE estimation methods for India.

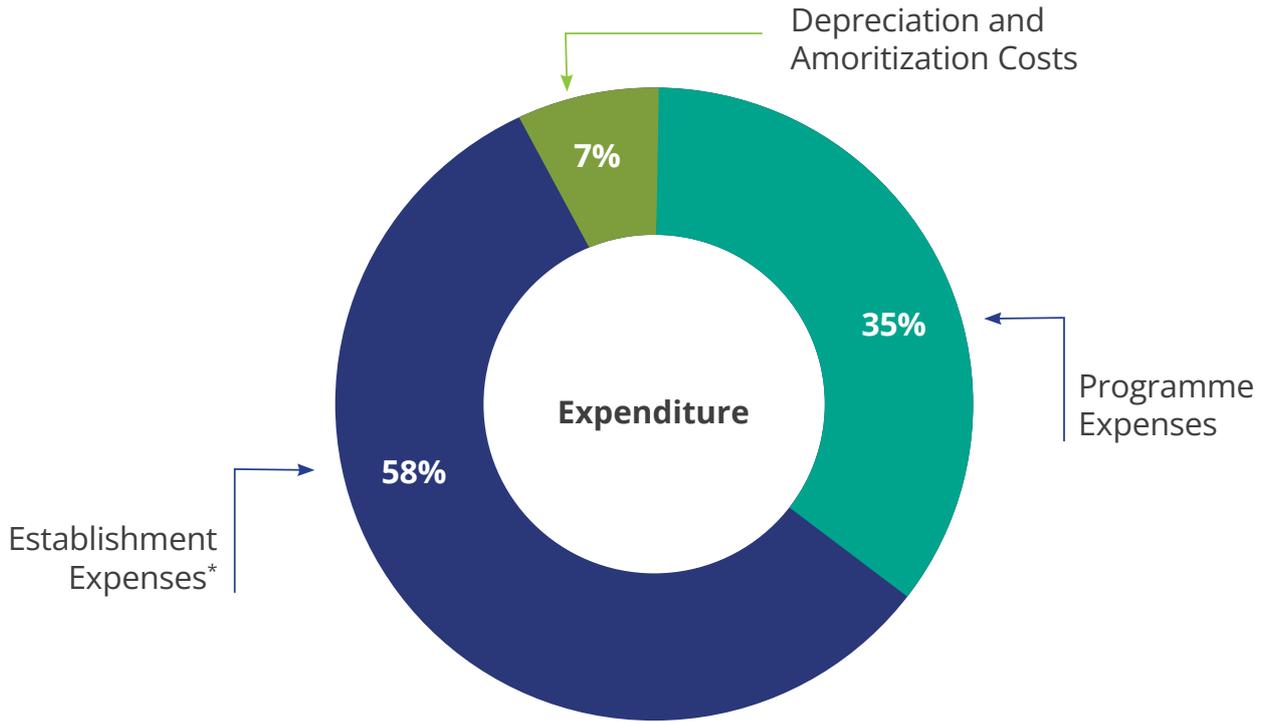
 Dr Sudheer Kumar Shukla (2023) co-authored an article entitled ‘Estimating funds required for UHC within Indian States’ published in The Lancet Regional Health-Southeast Asia.

 Dr Sudheer Kumar Shukla (2023) co-authored a chapter-article entitled ‘Multiple Chronic Conditions as Predictors of Inequality in Access to and Use of Health Services Among the Elderly in India’ in Handbook of Aging, Health, and Public Policy: Perspectives from Asia (pp. 1-29). Singapore: Springer Nature Singapore.

 Sanjeev Kumar co-authored an article on “How to work with intangible software in public health systems: some experiences from India” in Health Research Policy and Systems, BMC

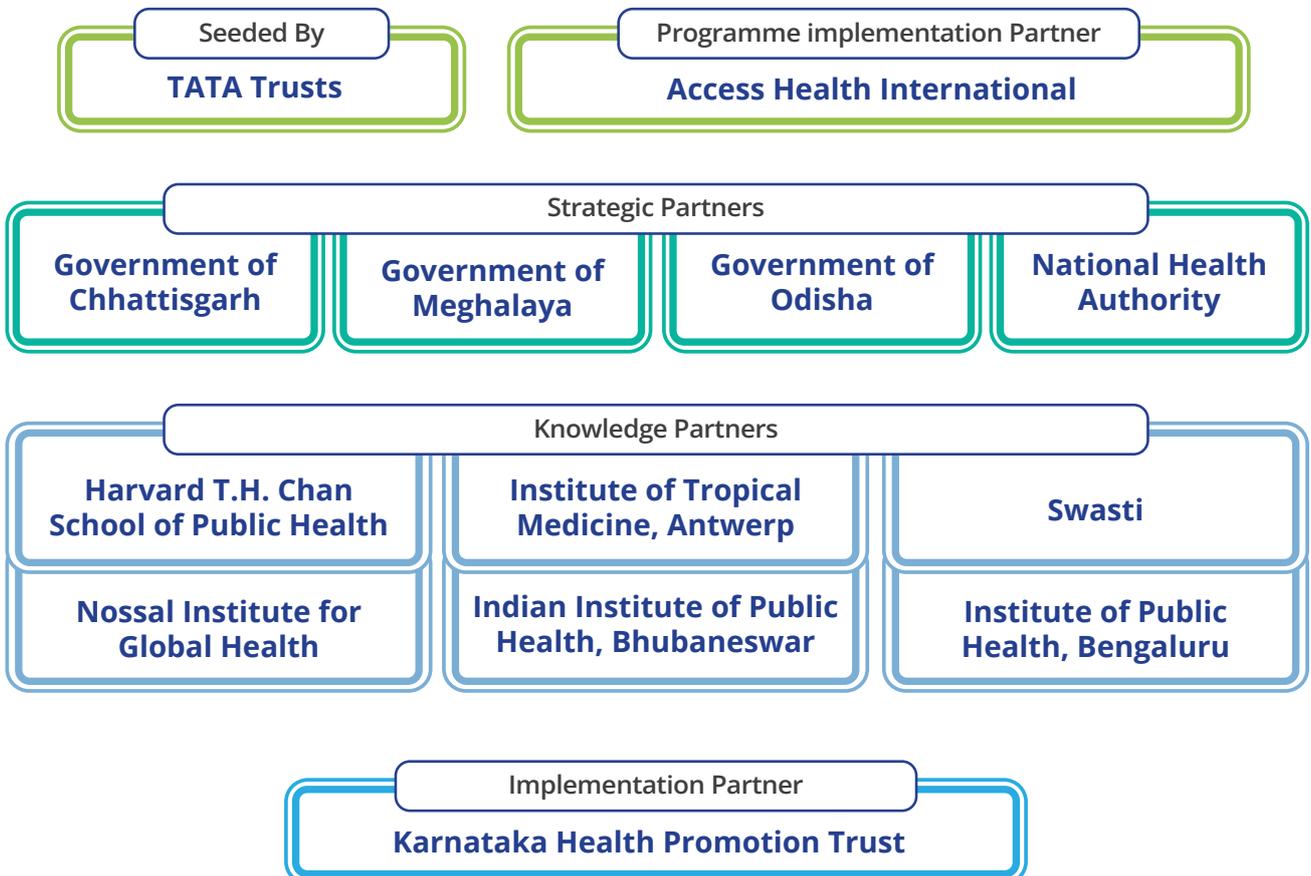
 Sanjeev Kumar Co-authored a article on “Enhancing Competencies of Pharmacists in Primary Care Setting in LMICs” in PLOS Blogs

Financials



*Establishment Expenses: HSTP provided technical and implementation support to AHI programmes

Our Partners



Looking Ahead

Generating evidence on health policy and systems is a long-haul effort. HSTP has laid the foundation of research to generate such evidence, to build capacity of researchers and demonstrated partnerships with governments by which the evidence will be used by policy. On this foundation HSTP is poised to build up a significant body of work in health systems governance, health financing and planning, health assurance, access to essential medicines, comprehensive urban healthcare, NCD management and prevention, digital health systems, and the One Health approach.

For any further information, please reach out to:

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