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**Gayaza –Ziroobwe Road. P.O BOX 16501, Kampala, Uganda**

**+256 772 009040; +256 784990087; email:** [**patientsorganization@gmail.com**](mailto:patientsorganization@gmail.com)

[**www.ugandapatientsorganization.org**](http://www.ugandapatientsorganization.org)

**ROJECT TITLE: CAPACITY Building FOR hospital-BASED HCP TO integration and UTILIZE HTA IN DISEASE interventions IN uganda**

## 1.0 Project Description

This project is needed to build capacity for professionalism in Health Technology Assessment (HTA) while ensuring high-impact; affordable health technologies reach the people who need them most, recognizing the potential of advocacy to impact Uganda’s health research development and innovation systems. This project also aims at performing a critical analysis of existing hospital based HTA initiatives to improve methods, instruments and processes to evaluate technology in hospital settings. It will also enable an environment for research in access to lifesaving technologies and innovations in Uganda. The project also seeks to pilot disease based HTA for cancer in partnership with Uganda Cancer institute (UCI), at Mulago Hospital. The Hospital based HTA will contribute to building a national ecosystem for HTA in and for hospitals in which such initiatives can improve the start of new hospital-based HTA programs, facilitate easier collaboration between initiatives and liaison with national/regional HTA agencies, learning and strengthening especially the HTA piloted at infectious diseases Institute in Mulago national referral hospital.

1. **Background**

There are glaring gaps in evidence based healthcare service delivery, public policy and decision making in Uganda especially related to patient centered health care. As a result, the number of people suffering from one or more diseases is rapidly increasing. The existing systems of care do not adequately address these increasing conditions. To adequately address this issue, complex health technologies, such as disease management programs, or specialized palliative care services are needed. Health Technology Assessment (HTA) will enable comprehensive patient-centered care, integrated ( as opposed to simultaneous but independent) assessment of complex health technologies that will enable:

* Effectiveness and economic, socio-cultural, ethical and legal issues
* Patient preferences and patient specific moderators of treatment
* Contextual settings and implementation plans.

It is noted that many individuals and organizations are involved along the pathways from basic research to application and diffusion of technology in health care. This involves researching, innovating, investing in, developing, testing and introducing as well approving, marketing, promoting, making decisions on managing, implementing, receiving, and paying for health care technologies. With the introduction of Health Technology Assessment (HTA), it will inform and support rational decision making in policy and practice, and ease the the process of policy and clinical decision-making around the introduction and diffusion of health technonlogies at all levels of healthcare delivery, including pharmaceuticals, devices, dignostics and treatment and other clinical, puiblic health and organizational interventions.

HTA is a multidisciplinary field that addresses the health impacts of technology considering its specific healthcare context as well as available alternatives. As a field of scientific research HTA entails a systematic evaluation of properties, effects, and or impacts of health technology. It may address the direct intended consequences of technologies as well as indirect unintended consequences. HTA involves a range of technologies, from for instance good sanitation, to the application of informatics and biotechnology in diagnosis and therapy. Its purporse is to promote health and combat disease, through relevant and available evidence and knowledge as well as the direct and indirect consequences. The Contextual factors addressed by HTA include , economic, organizational, social and ethical impacts. The scope and methods of HTA may be adapted to respond to the policy needs of a particular health system. Health care decision making requires the right evidence at the right time. Everyday there are new health technologies available that can improve patient outcomes and refine health system efficiency. In view of the above , UAPO proposes to pilot Hospital based HTA focusing on HIV/AIDS and TB management

**2.0 Aim of the Project**

The overall aim is to provide decision makers with contextualized assistance on how to make sound investment decisions on innovations to ensure that good value innovative health technologies reach clinical practice. The project will help to Increase HTA Visibility in Ugandaa by providing an opportunity for a formal connection of health technologies (HTs) and build a new working relationship among healthcare professionals and health system strengthening as well as effective involvement and engagement of patients /consumers and health care professionals for follow up on existing HTs and assessing the new HT innovations**.**  It will strengthen the HTAi strategy developed by Infectious Disease Institute (IDI) and Ministry of Health to complement national HTA initiatives and also generate information and tools to facilitate the implementation of hospital-based HTA initiatives in hospitals countrywide and regionally, improve quality and efficiency of current activities, while helping hospital decision-makers to make sound investment plans. A hand book with best practices and accompanying tool kit for high quality hospital based HTA will be developed.

**3.0 Rational**

Hospitals are the main entry for new and innovative health technologies (HTs). Hospital based HTA is the implementation of processes and methods of health technology assessment at hospital level. Understanding HTA at a hospital setting means providing decision makers with contextualized assistance and how to make sound investiment decisions on innovations to ensure that good-value innovative health technologies reach clinical practice.

Hospital-based HTA aims at

* Tailoring HTA to specific hospital circumstances (Comparators, how care is organized in the hospital , etc)
* Focus closely on health technologies that are of specific interest for the hospital
* Timely adjustment to hospital context

UAPO will use HTA as a tool to review existing technologies in HIV and TB management at Mulago Hospital. It will also provide evidence of the value these technologies can deliver to patients and their families, health systems stakeholders and to society more broadly, as well as promote public’s right to proper healthcare and contribute to the establishment of health and medical standards related to the assessment of health technolgy through a systematic analysis and evaluation of the technologies applied.

**4.0 Goal**

Adapting the Hospital based-Health Technology will help perform a critical analysis of the existing hospital based HTs and strengthen the intiatives to improve methods, instruments and processes for evaluating technologies in hospital settings. In addition, Hospital based HTA will foster cooperation among decentralised and hospital based HTA activities, as well as use and impact of excellent quality HTA in hospital setting.

It will make available pragmatic knowledge and tools to facilitate adaption of Hospital based initiatives , and help explore innovative synergies that address best practices in health policy and technological decision-making, and opportunities for integrating HTA in Uganda’s health system

1. **Objectives**
   1. building capacity for hospital-based HTA focused on HIV and TB management
   2. Provide an avenue for collaboration and sharing of information and expertise in the area of HIV and TB management
   3. Popularizing HTA in regional referral Hospitals,

**6.0 Target Audience**

This pilot phase will focus on hospital based health technology focusing on patients, health care providers, decision makers, administrators, clinicians, epidemiologists, pharmacists and biotechnicians

**7.0 Project activities:**

* Develop a curriculum for capacity building an advocacy
* Develop a data base for existing HTs in Uganda in consultation with hospital management teams
* Design questionnaires for conducting interviews with patients and healthcare professionals and decision makers
* Conduct a survey of existing data on health technology in 9 referral and select not for profit hospital
* Compile Soft copies of the curriculum and data base to be shared with project team
* Conduct one day seminar for 90 health care professionals in HIV and TB, selected from 5 regional referral hospitals, and 4 private not for profit hospitals ( 10 from each) including patient leaders to introduce the project
* Compile word document report to be shared with HCP and all the participants through email
* Develop Statistical data to be shared at an organized workshop for validation,
* Document patient testimonies in hospitals
* Engage one health economist to synthesize the evidence collected on HTA in hospitals
* Compile data collected for dissemination among stakeholders
* Develop a hand book with best practices and accompanying tool kit for high quality hospital based HTA
* results
* Engaging media personnel on HTA issues
* Courtesy visits to Hospital administrators and managers to share result
* Hold one day workshop to share project results
* Report writing and Dissemination of project outcomes through email, social media (twitter, on face book) and website

1. **Expected results and impacts**
   * Enable a patient centered assessment
   * Build a case for HTA integration in and for Hospitals
   * Ensure the structured integration of all issues
   * Bring forward a more comprehensive HTA strategy that will complement national HTA initiatives across the health system levels in Uganda
   * Generate information and tools to facilitate the start of hospital –based HTA initiatives in referral hospitals countrywide
   * Improved quality and efficiency of current activities while helping hospital decision-makers to make sound investment in health technology
2. **Expected Outcomes**
   * A Hospital –based HTA committee on HIV/AIDS and TB established at each of the participating referral and private hospitals to oversee matters related to HTA and in accordance with national HIV and TB policies
   * Develop a logic model template to provide a concise graphical overview of the complex concepts of HIV/AIDS and TB
   * A sample tested guide for assessing the effectiveness, socio-cultural, ethical, economic and legal issues, patient preferences, the context and implementation of the technology as well as integration of these issues
   * A pilot data base for the hospitals – based on HIV/AIDS and TB products
   * Integrating HTA in the management of HIV/AIDS & TB
   * A Hospital forum for communication among the target group of individual professionals and patients aimed at facilitating timely introduction and appropriate access to healthcare technologies of proven value and limiting use of technologies that are absolute, offering unacceptable value for money and or pose unacceptable risks

## 9.0 Timeline/Schedule : 6 months (October 2019-March 2010)

* ***October-November 2019***
* Hold 3 project implementation meetings with team
* Conduct a survey of existing HTs and practices in 9 hospitals (5 referral and 4 not profit )
* Conduct one day seminar of 90 including health care professionals in HIV and TB, and cancer, selected from the hospitals including patient leaders
  + Design questionnaires for conducting interviews with patients, healthcare professionals and decision makers
* ***Dec-2019 –Jan- 2020***
  + - * Document patient testimonies related to HTs in and outside hospitals
      * Develop a data base for hospital based HTA initiatives and products in Uganda.
      * *E*ngage one health economist to synthesize the evidence collected on HTA in hospitals
      * Engaging media personnel on HTA
      * Compile data collected for dissemination among stakeholders
      * Courtesy visits to Hospital administrators and managers to share the raw data
      * Report writing
  + ***Jan-March 2020***
* Hold One –day project evaluation meeting
* Develop a hand book with best practices and accompanying tool kit for high quality hospital based HTA .
* Establish stakeholder advisory groups including patients, carers and health professionals at national level
* Develop a logic model that provides coincide graphical overview of the complex concept of palliative care
* Disseminate project results among team members and selected key participants for verification by email
* Hold one day workshop to disseminate and validate project report
* Hold a high profile HTA meeting in Kampala to disseminate project results
* Disseminate information on UAPO and partners websites, face-book, and twitter ( social media)

**10.0 Budget**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **Description** | **Qty** | **No. Days** | **Rate @USD** | **Amount @USD** |
| **1** | Engage 3 volunteers to conduct a survey on and assessment of existing health technologies on HIV and TB in 5 referral hospitals and 4 private not for profit Hospitals | **3** | **9** | **50** | **1,350** |
| **2** | Conduct one day awareness seminar on HTA for 90 including health care professionals in HIV and TB at the hospitals including patient leaders | **90** | **1** | **40** | **3600** |
| **3** | Facilitate 2 people to develop a logic model template to provide a concise graphical overview of the complex concepts of HIV/AIDS and TB | **2** | **3** | **30** | **180** |
| **4** | Facilitate 2 people to conduct interviews with patients and healthcare professionals and decision makers on HTA knowledge attitudes and practices | **2** | **10** | **20** | **400** |
| **5** | Serve a meal at a one-day media event of 20 key media representatives on HTA issues | **20** | **1** | **30** | **600** |
| **6** | Hire one health economist to synthesize the evidence collected on HTA in hospitals | **1** | **5** | **100** | **500** |
| **6** | Facilitate 5 data analysts to analyze Data collected | **5** | **2** | **50** | **500** |
| **7** | Serve to 40 professionals at a two- day workshop patients to disseminate project results/outcomes and impacts , and develop and HTA strategy and work plan | **40** | **2** | **55** | **4,400** |
| **8** | Online Dissemination of results: website update , social media and emailing to key health care professionals and decision makers and the public | **1** | **-1** | **120** | **120-** |
| **9** | Ground transportation for survey team to referral hospitals | **3** | **9** | **30** | **810** |
| **10** | Facilitate one person to coordination activities | **1** | **10** | **30** | **360** |
|  | **Total** |  |  |  | **10770** |

**11.0 Work plan**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Timelines** | **Nov-19** | **DEC-19** | **Jan-20** | **FEB-20** |
| **Activity** |  |  |  |  |
| 1. Design survey questionnaire on Existing HTs for HIV & TB in , Hospitals | **x** | **x** |  |  |
| 1. Conduct the survey Existing HTs for HIV & TB |  | **x** |  |  |
| 1. Conduct one day seminar in 9 referral hospitals on HTA to introduce the concept of HTA |  |  | **x** |  |
| 1. Develop a logic model template for concise graphic overview |  | **x** | **x** |  |
| 1. Design Questionnaire for conducting interviews with patients, decision-makers and healthcare workers at the Hospital | **x** |  |  |  |
| 1. Document Patient testimonies |  | **x** | **x** |  |
| 1. Conduct Interviews with HIV and TB patients & Health care providers and decision makers on HTA needs |  |  | **x** |  |
| 1. Engage media on HTA issues |  |  | **x** |  |
| 1. Analyze data and information collected |  |  | **x** |  |
| 1. Health Economist hired to Synthesize the evidence collected |  |  |  | **X** |
| 1. Hold a two day workshop to disseminate the data and information/project results among HIV and TB professionals and decision makers – develop an HTA strategy and workplan |  |  |  | **X** |