



सत्यमेव जयते

Government of India

**National workshop for
Designing the Strategy for
Advocacy and
Implementation of
International Classification
of Functioning, Disability
and Health (ICF) in India
21-22 August 2008,
New Delhi**

National Workshop for Re-designing ICD 10 Training Module for Master Trainers and Non-medical Functionaries, 18 November 2008, New Delhi

National Workshop to Design a Need Based Family of International Classification (FIC-ICD-10 & ICF) Training Module, Identification of Teaching and Self-Learning Materials, and Define the Research Needs to Promote and Facilitate the ICF use in India, 4 -5 December 2008, Bengaluru



Proceedings and Recommendations



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National workshop for Designing the Strategy for Advocacy and Implementation of International Classification of Functioning, Disability and Health (ICF) in India 21-22 August 2008, New Delhi

Major Recommendations

In this National Workshop the strategy for advocating the ICF with (a) Administrators/Authorities for implementation purposes, (b) in Educational Institutions, and (c) ICF Users, were taken separately. The major recommendations of the Workshop with regard to each of these three groups are summarized as below:

A. Advocacy Strategy for Administrators & Authorities:

- 1 Identification of target group for advocacy:** The Ministries such as Ministry of Health & Family Welfare, Ministry of Social Justice & Empowerment, Ministry of Human Resource Development, Ministry of Labour & Employment, Ministry of Statistics & Programme Implementation, Ministry of Home Affairs (Office of the Registrar General, India), Ministry of Railways, Ministry of Defence and the Regulatory Bodies such as ESI, MCI, INC, RCI, Civil Society Organisations and National Level Professional Associations etc. were identified as the target group for advocacy. Each of these identified Ministries/Organisations need to identify a Nodal Officer for ICD & ICF for coordination and promotion of ICF within the concerned Ministry/Organisation. **(Action: Ministry of Health & Family Welfare and all target Ministries/Organisations at Central/State/UT levels)**
- 2. Sensitisation of Ministers of all Concerned Ministries/Organisation:** For effective implementation and use of ICD/ICF, the authorities at the highest levels in the above identified Ministries/Organisations in Centre and State/UT Governments need to be sensitised towards need and importance of information to be required and the ability of ICD/ICF in health/medical records in generation of required data to plan and formulate the effective programmes related to health sector in the changed socio-economic situation due to universal globalisation and industrialisation.. A meeting of the Ministers of all above Ministries and Organisations need to be convened for this purpose. In such meeting the State authorities may also be invited as participants. **(Action: Ministry of Health & Family Welfare)**
- 3. Identification of a Nodal Officer in above Ministries/Organisations:** Each of the above identified Ministries/Organisations will identify a Nodal Officer for ICD & ICF. The Nodal Officers so identified will be responsible for coordination between inter ministry/organisation on the matter of ICD/ICF, promotion of use of ICD/ICF in their respective Ministry/Organisation and issue directives in this regard. **(Action: All concerned Ministries/Organisations)**
- 4. Formation of Task Force:** A Task Force comprising the above Ministries/Organisations with Ministry of Health & Family Welfare as the Nodal Ministry should be formed for promotion of use of ICF. The Task Force will identify the Expected Roles & Responsibilities for each of the Target Ministries/Organisations and formulate plan of action for each of the identified Ministry & organisation. The Task Force would meet periodically and review the advocacy and implementation progress and process. **(Action: All above mentioned Ministries & Organisations at Central & State/UT levels)**
- 5. Mobilisation of Funds:** The Ministry of Health & Family Welfare being the nodal Ministry has to mobilize funds for the various activities of this Task Force. **(Action: Ministry of Health & Family Welfare of Central & State/UT Govt.)**
- 6. Orientation and In-service Training Course:** In the Orientation Training Programme for the new recruits in medical, nursing and paramedical staff, the teaching of ICD/ICF should be suitably included. For the existing officers/staff, the subject of ICD/ICF should be suitably included in all in-service trainings organised by the Central/State Governments. Refresher training courses should be organised for the present users. In such training programmes, WHO/World Bank may also be associated for technical support. **(Action: Ministry of Health & Family Welfare-Central/State, ESI, Railway, Defence)**
- 7. Collection and Compilation of Data:** The Central Bureau of Health Intelligence as the nodal agency for health intelligence in Dte. General of Health Services, Ministry of Health & Family Welfare, Govt. of India should be strengthened properly in order to equip it to enable the collection of data from different Central as well as State Government organisations and process the same for further dissemination among stakeholders. **(Action: Ministry of Health & Family Welfare)**
- 8. Creation of Awareness:** The different Ministries/organisations and medical fraternity need to be made aware of the need and importance of the use of ICD/ICF and the legal framework in this regard. For this purpose, the matter needs to be publicised through various modes. The IEC materials prepared by the expert nodal institutions like CHEB, IEC Section of the

Ministry, well prepared PowerPoint Presentations etc. could be utilised. **(Action: Ministry of Health & Family Welfare)**

- 9. Legal Framework/Mechanism for Implementation of ICD/ICF:** The Workshop felt the urgent need of the backing of the Legal Framework for effective implementation of the ICD/ICF in the country. The existing Laws relating to Health, Functions, Disabilities, Rehabilitation, Morbidity and Mortality need to be reviewed by the Task Force and an appropriate legal provision with regard to compulsory coding of health/medical records as per ICD/ICF and collection, compilation and dissemination of related data need to be made. **(Action: All concerned Ministries/Organisations of the Task Force)**

B. Advocacy Strategy for Education: The Workshop identified professionals amongst the five main disciplines, namely, Medical, Nursing, Paramedics, Rehabilitation and Social Sciences & Bio-Statistics for advocacy on ICD / ICF. The various Ministries/Departments, Organisations, Institutions and authorities who would be targeted under each of these disciplines, their roles & responsibilities, functions and implementation methodology as recommended are as under:

10. The Ministries / Departments / Institutions/ authorities identified promotion of ICD / ICF in Education:

(a) Medical

- (i) *Departments:* MOHFW, AYUSH, Department of Health Research
- (ii) *Organisation:* MCI, ICMR, AYUSH Council, DCI, NGOs (International/National), Corporate Hospitals, QCI
- (iii) *Institutions:* Medical Colleges, AYUSH College, National Research Institutes, NBE, Open Universities
- (iv) *Authorities:* Union Minister of Health, Secretaries, DGHS, State Ministers and DHS of States and Chairman & Members of Councils

(b) Nursing

- (i) *Departments:* MOHFW, AYUSH, Department of Health Research
- (ii) *Organisation:* INC, NGO (International/National)
- (iii) *Institutions:* Nursing Colleges & Schools
- (iv) *Authorities:* Union Minister of Health, Secretaries, DGHS, State Ministers and DHS of States, Nursing Advisor, Nursing Director & Principals

(c) Paramedics

- (i) *Departments:* MOHFW, Department of Health Research

- (ii) *Organisation:* Professional Bodies, NGO (International /National) Institutions: Schools and Colleges of Paramedics, NIPS, RIPS
- (iv) *Authorities:* Union Minister of Health, Secretaries, DGHS, State Ministers and DHS of States, Chairman & Members of Professional Bodies

(d) Rehabilitation

- (i) *Departments:* MOHFW, Ministry of Social Justice and Empowerment, Ministry of Rural Development, Ministry of HRD
- (ii) *Organisation:* RCI
- (iii) *Institutions:* Schools and College, National Institutes of Various disabilities
- (iv) *Authorities:* Minister of Health, Secretaries, DGHS, State Ministers and DHS of States, Chairman & Members of Councils, Central and State Coordination Committee, National Trust for Multiple Disability

(e) Social Sciences and Bio Statistics

- (i) *Departments:* Education (Psychology, Social Work, Population Sciences & Statistics)
- (ii) *Organisation:* UGC, Association of Indian Universities, NCTE, NCERT
- (iii) *Institutions:* Schools and Colleges, Statistics, Population Sciences
- (iv) *Authorities:* Principal, Chairperson, Vice Chancellor, HOI, HOD

11. Roles & Responsibilities of the authorities of Ministries/ Departments, Organisations and the Institutions identified with respect to respective discipline:

(a) Ministry/Departments: The authorities of the concerned Ministries/Departments of Central as well as State Governments are required to promote use of ICF in Education in the discipline pertaining to them as identified above and issue necessary directives in this regard. **(Action: All above identified Ministries/ Departments – Centre/State/UT)**

(b) Organisations: The concerned Organisations as identified above would work for development of appropriate curriculum and ensure their adoption by different educational institutions. They should also monitor the progress in implementation. **(Action: All above identified Organisations)**

(c) Institutions/Hospitals: The identified institutions/hospitals should also develop or adopt the appropriate curriculum as per their requirement and ensure quality and implementation of ICD/ ICF in respective institutions/hospitals. They should also evaluate periodically the knowledge and skills available in this respect in their institutions.

12. Functions for the Authorities of Departments, Organisations, Institutions and Regulatory bodies: The authorities should identify the Centres of Excellence in ICF who could function in the capacity to convince/explain/reach each Ministry.. They should also function for establishing and enhancing the International linkages with such centres, involving International experts to brief authorities of the Ministries/Organisations/Institutions/Regulatory Bodies. The EDUSAT Mechanism may be adopted for wide reach of ICD/ICF amongst concerned authorities/users etc. and take corrective measures in this direction. **(Action: All concerned Ministries/ Departments/Organisations/Regulatory Bodies)**

13. Implementation Methodology for Education: The concerned Ministries/ Departements/ Organisations should develop simplified and user friendly modules on ICD and ICF. The Information Technology might be widely used for promotion and implementation of ICD/ICF. The officers and staff of the concerned organization need to be trained and online training module might be developed. **(Action: All concerned Ministries/Department/Organisations).**

C. Advocacy Strategy for ICF Users:

14. Hospitals and their Medical Record Departments, Doctors, Nurses, Inclusive of AYUSH etc. under the Ministry of Health & Family Welfare, Non-Government Hospitals inclusive of Corporate Hospitals, Department of Women & Child Development, Ministry of Social Justice & Empowerment, Ministry of Labour & Employment, Ministry of Railways, Ministry of Defence, ESI, Public Sector Undertakings, Research Councils, Universities etc. have been identified as users of ICD/ICF and the information generated through its use on health/medical records. It was suggested that each of these identified target groups should include health professionals, professional social workers, MRD/HIS professionals, rehabilitation professionals of primary, secondary and tertiary level health facilities. **(Action: All these identified Ministries/Departments/Organisations)**

15. Roles & Responsibilities of the above identified ICF user Ministries/ Departments/ Organisations: The authorities/ heads/ CEOs should have a clear understanding of needs of ICD/ICF and have to be convinced about use of ICF as well as know-how of the process of its implementation. They should facilitate, promote, motivate and monitor the use of ICD/ICF in their respective Institutions. For the role of doctors, nursing professionals, allied health professionals, medical social workers/MRD/HIS and other paramedical professionals the main role would

be of implementation as well as advocacy. **(Action: All above as identified)**

16. Strategies for Advocacy amongst the Users of ICD/ICF: Local and regional advocacy workshops for doctors, nurses, research scientists, MRD and social workers, technicians, other paramedical staff should be organized periodically. The need for involvement of the existing state/block/district level training centres like the SIHFW, Medical colleges and regional training centres was emphasized. The existing TOTs under NRHM programme should also be oriented towards ICD/ICF. **(Action: Ministry of Health & Family Welfare and all concerned as identified above)**

17. Implementation Methodology for Users: Following methodology were suggested for their adoption in implementing the ICD/ICF amongst users:

- (i) Talks in annual meetings of Institutions and Organizations for advocacy and dissemination.
- (ii) Special recognition to the medical/nursing/paramedical professionals who promote and use ICF
- (iii) Use of e-learning and website for training and promotion
- (iv) Use of IDSP, NICD, IGNOU and Tele-medicine network for education, promotion, training
- (v) Develop training modules on ICF (Trainers/facilitators and trainees)
- (vi) To provide a small pocket version for all concerned users.
- (vii) To provide full version of ICD-10 and ICF for all facilitators and institutes.
- (viii) R & D for Exploring use of advance technology on experimental basis which could be replicated at later stage

(Action: Ministry of Health & Family Welfare & all concerned as identified above)