Integrated care and Pay for Performance in TB outpatient care – an adapted intervention and innovative research in Georgia

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> *Session theme: Incentive design - how does it vary and how do these variations affect outcomes; why was P4P introduced, and what local adaptions were made to the design and why?*

The TB program in Georgia faces challenges such as a high incidence of TB drug resistance, inadequate treatment adherence, systems level issues such as low coordination between specialised TB and primary care services, and weak motivation of TB care providers.

Policymakers are considering pay for performance as one of the policy options to address these challenges. However, there is no experience with P4P in any area of the health sector and the views among the policy makers on its value and appropriateness are divergent.

The Results4TB project aims at informing this policy formulation process and evaluating the policy and its implementation. It is implemented by a research team from Curatio International Foundation (Georgia), Queen Margaret University, Edinburgh, London School of Hygiene and Tropical Medicine and the Institute of Tropical Medicine, Antwerp, and is funded by the UK MRC.

The researchers worked together with the policy makers and other national stakeholders to design the intervention and its evaluation. Challenges were the complex service delivery arrangements under public-private partnership and the turnover of key personnel at the policy level. Several workshops and extensive policy dialogues were held to outline the most appropriate design of the policy. The evaluation was determined using a combination of realist evaluation, economic evaluation and trial-based methods.

The impact of the policy on adherence to TB treatment and on treatment success rates will be assessed through a cluster randomised trial, with embedded qualitative interviews, and a mapping of activity and resource use (to inform the economic analysis). Our analysis plan brings the data together using on a combined conceptual model of the intervention and the underlying dynamics of the health system. This includes a prior and post identification of the mechanisms of change and the context factors that enhance or undermine the effectiveness of the intervention.

Challenges encountered during the intervention and evaluation design process, such as complex service delivery arrangements, difficulties to establish verification function in the public financing system, high turnover of key policymakers, scepticism towards the P4P concept will be discussed.