



भारतीय आयुर्विज्ञान अनुसंधान परिषद  
स्वास्थ्य अनुसंधान विभाग, स्वास्थ्य एवं परिवार  
कल्याण मंत्रालय, भारत सरकार

Indian Council of Medical Research  
Department of Health Research, Ministry of Health  
and Family Welfare, Government of India

**Date: 07-11-2023**

## **Request for Expression of Interest (EOI)**

### **Expanding antimicrobial resistance research and surveillance activities in the secondary level hospitals**

#### **Overview**

The emergence of antimicrobial resistance (AMR) poses a significant public health crisis, in India and worldwide. This crisis is associated with increased morbidity and mortality in clinical and community settings making it a pressing issue requiring attention and action. Implementing robust antimicrobial surveillance activities and establishing an antimicrobial stewardship (AMS) program are recognized as pivotal and effective intervention in addressing the AMR crisis. The Indian Council of Medical Research (ICMR) has taken the initiative to address this gap by establishing Antimicrobial Resistance Surveillance and Research Network (AMRSN) and implementing AMS programs in tertiary care hospitals. Like ICMR, other antimicrobial surveillance and stewardship programs being undertaken in the country have also been limited to tertiary care hospitals. Hence, the data collected through these initiatives do not adequately reflect the comprehensive picture of AMR in the country, particularly from community healthcare settings. Hence, it's crucial to extend the reach of the existing initiatives to secondary care settings.

Secondary care hospitals in India are not well-equipped to document the patterns of local antibiograms and monitor antibiotic usage due to various factors like absence of good clinical microbiology lab, absence of skilled staff etc. It is therefore proposed to expand the AMR surveillance and strengthen the AMS and infection prevention and control (IPC) components in secondary care hospitals with support and facilitation from local or regional tertiary care hospitals having a prior experience of AMR surveillance and IPC and AMS implementation. By using this approach, ICMR aims to address the challenge of fewer resources and expertise, the absence of antibiogram data due to limited access to microbiological support, absence of trained ID physicians etc. in the secondary level hospitals. The overarching objective is to expand the

surveillance efforts and extend IPC and AMS interventions to secondary-care settings and also try to understand the care-seeking pathways for patients between secondary and tertiary level hospitals.

The tertiary care hospitals will work with the secondary level public and private sector hospitals and support their participation in the AMR surveillance and in implementing ICMR's AMS and IPC initiatives in the secondary level hospitals. Through this initiative it is proposed to establish mechanisms to connect secondary care facilities with tertiary care settings to create a system for comprehensive collection of quality antimicrobial susceptibility data and to support antibiotic stewardship within the secondary care hospitals. To ensure real time monitoring and track progress of data, a centralized platform for data collection would be provided by ICMR. The selected researchers shall be invited to develop a full research proposal and roll out the research project under the guidance of ICMR Hqrs. The process of development of protocol and research project implementation shall be reviewed by an expert group constituted by ICMR.

### **Objectives of the project**

- Identify the secondary level (4-5) hospitals for mentorship, support and guidance using a specific criteria.
- Build capacity for AMR surveillance, IPC and AMS at secondary level hospitals.
- Regularly monitor progress of IPC and AMS implementation using well defined indicators.
- Implement the data quality assurance mechanisms to validate the data collected in secondary level hospitals.
- Establish a feedback loop where secondary care facilities can report challenges and seek assistance from tertiary care hospitals.
- Determine pathways of care for patients with selected infectious conditions/syndromes

ICMR invites EOIs proposals that address the below-mentioned research goal

<b>Priority research goal</b>
<b>Expanding the footprint of ICMR-AMR surveillance network to include secondary level hospitals</b>

### **Expected outcomes**

- Engagement of secondary level hospitals in the AMR containment initiative
- AMR surveillance data from secondary level hospitals
- Capacity building of AMS and IPC implementation in the secondary level hospitals

- Creating structure and process of AMS and IPC in secondary level hospitals
- Establishing pathways of care for patients with selected infectious conditions/syndromes between the secondary and tertiary care level hospitals

### **Who can submit the EOI?**

The EOI can be submitted through ONLINE MODE ONLY by medical professionals who have regular employment in tertiary care hospitals (Government, private and non-Government organization) having a documentary evidence of their recognition including a DSIR certificate, having previous experience of undertaking AMR surveillance and implementing IPC and AMS programs and willing to work with secondary level hospitals.

### **Applicants (mentoring hospitals) should meet the following criteria:**

- Hospitals must have a functioning Hospital Infection control committee (HICC) in place with essential members like infectious disease physician (or any clinician inclined for AMS/HIC), infection control nurses, clinical microbiologist, pharmacist, hospital Administrator, should actively participate in conducting meetings and engage in active monitoring of hospital acquired infection rates and active monitoring of hand hygiene and compliance with other infection control practices.
- Hospital should have an antibiotic stewardship team with a well established AMS programme for last 3 years. The functional AMS program should be supporting evidence like data on compliance with hospital antibiotic policy, updated hospital antibiotic policy in-terms of frequency and efficacy of interventions done in antibiotic prescription in hospital, monitoring of antibiotic consumption for in-patient beds etc.

### **Points to be kept in mind while submitting the EOI:**

1. The EOI must address the specific research question that is mentioned in the call text.
2. The applicant should demonstrate well-established expertise and proven proficiencies in the realm of AMS implementation in their hospital.
3. Foreign collaboration is not allowed under this call.

### **Format of Expression of Interest (EOI) to be submitted**

**A. Name of the senior researcher (Principal Investigator):**

**B. Name of the institute:**

**C. Address with email id and phone no. of PI:**

**D. Type of organization:**

Government

Private  
Non-Government organization

**E. List of publications in last 7 years (since 01-01-2017)**

In prescribed format (Annexure-I) for PI/Co-PIs proposed for study should be included, where she/he was the first/last/ corresponding author). Highlight the impact of each publication e.g. inclusion in policy/protocol/programme or being cited in patents/commercialisation of results etc.

**F. List of research projects undertaken in last 5 years (since 01-01-2019) in prescribed format (Annexure- II)**

**G. Collaboration with ICMR or contribution to ICMR activities in last 5 years (maximum 250 words).**

**H. Rationale of proposed study including the choice of secondary level hospitals to be included where the implementation shall be carried out**

**I. Implementation Strategy**

Provide a clear and detailed description of the proposed study including details of the AMR surveillance mechanism and AMS and IPC implementation that will be followed. Kindly provide a detailed plan of implementation with indicators and timeline, data management plans and deliverables.

**J. Address feasibility and scalability**

Address the feasibility of the proposed study, including availability of the resources needed for implementation (Instrumentation, computational infrastructure etc), the capacity of the implementing organization, and the potential for wider adoption and scale-up.

**K. Research Team**

Summarise and justify the composition of the proposed research team, based on the expertise of the individual team members in designing and implementing the project. Also, highlight the skill set and expertise the members shall bring to the research team that shall be constituted by the ICMR Hqrs for the development of final protocol and research project implementation.

**L. Any ongoing National/International collaborations relevant to the call**

**M. Illustrative budget outline (additional to the 2-page limit)**

The final site budgets for the proposal will be developed by the selected research team(s) under the guidance of ICMR. In this EOI, provide an estimated budget outline (no budget justification

required at this stage) under the following headings: staff, recurring contingency, travel and equipment.

**N. One-page CV of the principal investigator and other key investigators (additional to the 2-page limit)**

Please provide a one-page CV of the PI and other key investigators from each identified area. Each CV should include:

- Academic and professional qualifications
- Current position and affiliation
- Up to five most relevant previous research grants
- Upto five most relevant previous publications
- Experience in undertaking projects on antimicrobial resistance from the public health perspective

**Review process:**

The EOI documents for the ICMR’s study on **antimicrobial resistance research and surveillance activities in the secondary level hospitals** will be evaluated by the Indian Council of Medical Research (ICMR). The ICMR team will screen the applications for technical accuracy and eligibility. The shortlisted teams will then collaborate to develop a detailed proposal, under the guidance of ICMR Hqrs. The proposal will be evaluated based on factors such as study design, feasibility, well established facilities, prior experience and potential for value addition to the existing knowledge. The feasibility and suitability of integration of the proposed methodology in the final proposal to be developed under the guidance of ICMR Hqrs shall also be considered while shortlisting the EOI.

**When and how to submit a proposal:**

Interested parties should fill out the Google form at the below link and submit an **Expression of Interest (EOI)** as per the format given above. The full-length research (detailed) proposal should be submitted through online mode only and no proposal in physical/hard copy/email is to be submitted. Only shortlisted PIs will be contacted.

**Link-** <https://forms.gle/D7LWGVwRGbt56b28>

**Timeline**

Activities	Date
Release of call	6 <sup>th</sup> November 2023
Last date for submission of EOI	16 <sup>th</sup> December, 2023
Shortlisting of EOIs	17 <sup>th</sup> January, 2024
Proposal Development Workshop	17 <sup>th</sup> February, 2024

Submission of a full proposal	17 <sup>th</sup> March, 2024
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**For any queries related to the call, please contact:**  
**Dr. Kamini Walia,**  
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**Annexure-I (List of publication since 01-01-2017)**

Title of publication in AMA style	Impact factor of journal	Name of policy/programme/ protocol document or patent/commercialization of products where cited.

**Annexure-II (List of projects since 01-01-2019)**

Short title of the project	Primary objective (in brief)	Type of study (e.g. RCT /Prevalence/Lab-based)	Sample size	Grant amount	Time period