Posted: 16 April 2024

CONSULTANT: HbA1c Policy & Evidence Mapping

Project/ Mission

Point-of-care (POC) HbA1c devices hold the potential to overcome barriers to diabetes testing by providing immediate test results at primary healthcare level (PHC) from fingerstick blood. Yet, implementation of HbA1c POC devices is limited in low- and middle-income countries (LMICs). The reasons for this are thought to be multifactorial, including lack of data on impact of HbA1c POC testing on diabetes care delivery, health outcomes and cost-effectiveness.

Currently, there is limited structured information available on other barriers to HbA1c POC testing implementation, such as current state of local policy and guidelines for HbA1c testing, coverage through national and private health insurance schemes and case-examples of adoption mechanisms in the public and private healthcare sector in LMICs.

The objective of this consulting work is to conduct a situational analysis on the state of HbA1c POC testing from a global and LMIC perspective with the aim to identify recommendations and develop a roadmap for LMICs that will facilitate HbA1c POC adoption and testing implementation.

About the NCD programme

FIND's NCD programme aims to improve access to HbA1c testing through market shaping and technology assessment approaches. To date, we have put in place preferential price agreements with several manufacturers of HbA1c POC devices that are accessible to LMIC buyers[i] and available through our online platform DxConnect[ii]. Furthermore, we have mapped the landscape of available HbA1c POC devices[iii], conducted critical performance and usability evaluation of several devices to support appropriate test selection and local adoption[iv]. We now aim to strengthen HbA1c POC testing though work on policy and evidence gaps.

Key Deliverables:

The priority deliverables for this work will be a detailed report containing:

- An introduction on use of HbA1c in diabetes management; summary of global guidelines and recommendations on HbA1c testing frequency and targets in resource rich v resource limited settings; key evidence from peer-reviewed published literature on findings of use of POC on testing frequency, clinical outcomes, cost-effectiveness.
- A situational analysis on general barriers and facilitators to HbA1c POC testing implementation at:
    - Systems level (policy and guidelines at national level; quality standards: regulation and accreditation of POC; cost coverage mechanism; cost-effectiveness evidence
    - Healthcare facility and provider level (stakeholder management; diabetes management at lower levels of care; POC v lab test result perception; general service offerings; use-cases for POC machines
    - Patient level (POC v lab test result perception; awareness of availability of POC test)
- Country analysis of up to 5 LMICs on diabetes guidelines used in the country; a country's approach to POC testing in general and for HbA1c specifically; availability of a national

essential diagnostic list and POC testing recommendations at different levels of care; key evidence from peer-reviewed published literature on findings of use of POC on testing frequency, clinical outcomes, cost-effectiveness; case examples of HbA1c POC testing adoption efforts
- Conclusions & recommendations on common themes on enablers, barriers, testing strategies, end-user perspectives among the analysed countries; comparison to countries that already use HbA1c POC testing; recommendations of activities and requirements that need to be implemented at country level to allow for (wider) HbA1c POC adoption in the public and private sector.

Data should be collected via internet search and review of global and national guidelines and policies for HbA1c testing; peer-reviewed and grey literature review; interviews with members of ministries of health and key stakeholders in the LMIC healthcare sector in the testing field, as well as interviews with selected diagnostic manufacturers ; targeted rapid survey(s) for key stakeholders to assess the key barriers and possible solutions for implementing PoC HbA1c testing.

Required qualifications and experiences:

- Graduate / postgraduate degree in public health, epidemiology, medicine and/or related discipline with a solid understanding of public health.
- Minimum 3 years of demonstrated experience in the field of NCDs (preferably diabetes) at regional/ international level.
- Experience in participation of scoping or systematic reviews with data analyses for mixed method studies.
- Experience in performing interviews with key opinion leaders, and doing focus groups discussions on this topic.
- Demonstrated expertise in synthesizing relevant information from policy documents.

Advantageous skills/competencies:

- Ability to think strategically, handle ambiguity, and problem solve in a fast-paced, limited-structure, multicultural environment
- Pro-active and assertive approach, strong interpersonal and communication skills
- Proficiency in preparing clear and concise reports and presentations
- Capacity to adapt to changing projects requirements and resilience to overcome challenges encountered during the project
- Fluent in English, written and spoken

Type of role: The selected candidate will be offered a consultancy contract for 4 months at up to 100% engagement.

How to Apply:
Should you be interested, please send a summary explaining why you are interested, what attributes and skills you bring to this role and a copy of your CV **by 30 April 2024** to **ncds@finddx.org** with the title: *Application NCD programme Consultant HbA1c P&E mapping*.

Location: Globally, within 5h of CET zone

Reporting to: Senior Manager- Evidence and Policy

Please note that due to high volume of applications, ONLY short-listed candidates will be contacted. FIND is dedicated to building an inclusive workforce where diversity is valued. FIND is an equal-opportunity employer. Every qualified applicant will be considered for this role. FIND does not discriminate based on race, colour, religion, gender, sexual orientation, gender identity, genetic information, age, national origin, marital status, pregnancy, disability status, political ideology, military status, or any other attribute protected by applicable law.

About FIND: FIND is accelerating equitable access to reliable diagnosis around the world. We are working to close critical testing gaps that leave people at risk from preventable and treatable illnesses, enable effective disease surveillance, and build sustainable, resilient health systems. In partnership with WHO, other global health agencies and the G20/G7, we are driving progress towards global health security and universal health coverage. We are a WHO Collaborating Centre for Laboratory Strengthening and Diagnostic Technology Evaluation. For more information, please visit https://www.finddx.org/

[i] https://www.finddx.org/publications-and-statements/press-release/find-partners-with-manufacturers-to-improve-affordability-and-access-to-point-of-care-hba1c-testing-in-low-and-middle-income-countries/
[ii] https://dxc-marketplace.finddx.org/
[iii] https://www.finddx.org/wp-content/uploads/2022/12/20211101_lds_hba1c_poc_FV_EN.pdf
[iv] Data analysis and publications in progress