

Creating Future HIV Clinical Leaders and Strengthening the Institutional Workforce: An Innovative HIV Fellowship Programme Through a Private/Public Partnership At the Government Hospital of Thoracic Medicine (GHTM), India

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Issues

- India has an estimated 2.5 million people living with HIV and AIDS (PLHA), and Tamil Nadu is one of the states with the highest prevalence.
- The government hospital of thoracic medicine (GHTM) is India's largest HIV-care centre.
- Given the need for HIV expertise and leadership, CDC GAP partnered with I-TECH, the Tamil Nadu state government, and GHTM to create a one-year fellowship in HIV medicine at GHTM in 2005.

Description of GHTM

- Experiential learning through rotational postings in the wards, outpatient departments, laboratory, counselling centres, operation theatre, and intensive care unit.
- Fellows provide HIV care and support to more than 16,000 patients, including opportunistic infections (OIs) management, antiretroviral therapy (ART), palliative care, and psychosocial support.



Afternoon Sessions

- 240 afternoon sessions per year, taught by over 60 different HIV/AIDS experienced faculty, based on a structured curriculum with clinical, laboratory, public health, research, leadership, and training-skills components.
- Unique features include fellow-led sessions and symposia, rural-site exposure visits, debriefing sessions, daily bedside mentorship, regular advisory sessions, and research projects.

Evaluation

- Using structured tools, medical knowledge; clinical, training, and leadership skills; field work; and attitudes are evaluated throughout the year.

Innovations to the Programme

- Mid-course corrections based on debriefing among fellows and stakeholders.
- Daily bedside mentorship and monthly advisorship.
- Introduction of an honors grade.

Lessons Learnt

- The fellowship programme raised the number of GHTM medical-care providers by 60–80% (15 to 18 providers), allowing for rapid ART scale-up and the recognition of GHTM as a national centre of excellence for HIV care, support, and training.
- 75% of graduated fellows work in government or non-governmental (NGO) HIV programmes throughout the country.
- Improved quality of patient care at the hospital, based on focus-group discussion with doctors and nurses at GHTM.

Challenges

- Limited in-country expert faculty.
- Defining the roles of stakeholders.
- Developing an evidence-based, tailored curriculum.
- Promulgating up-to-date adult learning principles.
- Balancing short-term ART staffing needs with long-term human capacity development.
- Ensuring that fellows are effectively utilized on graduation.
- National accreditation.

Next Steps

- Fellowship programmes build human capacity and institutional excellence.
- Planning of appropriate accreditation and placement of graduates can help to retain them in well-defined career paths.

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Fellows attend a clinical society meeting.



Fellows consult with a clinical mentor in reading an x-ray.



Bed side mentoring by an I-TECH faculty.

