

# STRATEGIC PLAN

[For the period April 2017 to March 2022]

 ${\bf Approved\ by}$  The Doctors for You Governing Body on this day of 17 April, 2017

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### **Executive Summary**

Over the last 10 years, Doctors for You have done significant work in Strengthening Public Health Interventions, Disaster Response cum Risk Reduction and Research in Public Health Topics. Having completed one decade in operation, DFY is now working on reaching out to more and more people making quality services accessible to people from most backward communities. While we provide answers in the form of this five-year objectives and strategies, we know that the most effective organisations in the twenty-first century will continuously refine their strategies as the external landscape evolves and new lessons are learned. In this spirit, our strategic plan is intended to be a dynamic road map, defining a clear "destination" – where we want to be in 2022– and encouraging flexibility and creativity throughout the journey over the coming decade.

This plan is intended to drive positive change within the organisation and the community while also embracing continuity. The plan provides a sharper focus to our work in the form of three community-impact objectives, driven by the community's needs and priorities. The plan strongly reaffirms the our historical commitment to helping vulnerable fellow men to have access to a high quality of services in Health, Livelihood and Education. The plan strengthens our commitment to donors, nonprofit organisations, and community leaders as essential drivers of innovation and positive changes in our community.

As we implement this strategic plan, The DFY will work with local communities, donors, and leaders who will help us craft the tactics and activities that will best achieve our community-impact objectives.

### Introduction

The purpose of this strategic plan is to articulate the long-range direction and priorities for DFY.

The objectives and strategies described in this document have been approved by our Governing body members and will guide the organisation's efforts and investments over the coming five years.

### **Board Authorisation of Strategic Plan:**

SI No	Name of Board Member:	Date Signed:
1	Dr Ravikant Singh	6th April 2017
2	Dr Rajat Jain	5th April 2017
3	Dr Vineet Maheshwari	10th April 2017
4	Mr Saket Jha	6th April 2017
5	Dr Nidhi Singh	6th April 2017
6	Dr Mridul Kumar Deka	12th April 2017
7	Dr Anurag Mishra	5th April 2017

### **Organisational Description:**

Doctors for You (DFY) is an international humanitarian organisation from India working extensively amongst vulnerable communities affected by disasters, epidemics, violence, conflicts and exclusion from health care system. DFY is also committed to reduce disaster risk to human society and elevate sufferings by building inner resilience and capacities of the community for sustainable development during emergencies and non-emergency times. Guided by vision of "Health for All" DFY works towards providing sustainable, equitable, effective and efficient health care services to the most vulnerable individuals and communities. The work of DFY is guided by humanitarian principles of humanity, impartiality, and neutrality. It offers services and assistance to people based on need, irrespective of race, class, caste, country, religion or gender.

Registered in Mumbai, India as a registered society (Reg No. F- 56886 (Mum)) DFY is also registered as a charity organisation exempted (tax) under 501 (C) 3 in USA. Currently, DFY is working on some ten projects across India (Assam, Bihar, Delhi, Gujarat, Haryana Madhya Pradesh, Maharashtra, Jammu & Kashmir, Rajasthan, Tamil Nadu& Uttar Pradesh-given alphabetically) and 1 in Nepal. DFY has major role in delivering health care services in general and maternal & child-health in particular to vulnerable communities apart from strengthening health systems & emergency medical aid to people affected by natural disaster, conflicts and epidemics.

From Bihar flood response in 2008 to relief and support in Chennai, DFY has committed to deliver quality health services and humanitarian aid to all people affected by crisis irrespective of any consideration. From a humanitarian health care provider in emergency situations Doctors For You has evolved to be one of the most reliable and trusted organisation across the Indian States in disaster preparedness, capacity development programs and health system strengthening. Over the years, DFY has reached many thousands of people both in crisis and in non-crisis with vast range of health care facilities. Team DFY comprising of expert doctors, disaster/emergency response managers and social workers is committed to bridge the gap between people and health care services.

DFY received several recognitions from various international communities for our contribution in the field of medical humanitarian response. DFY received the *SAARC Award for 'Outstanding contribution to humanitarian works in the aftermath of the disasters'* for our Bihar Flood Response work in 2008 and further, DFY also received the prestigious British Medical Journal Group Award in 2011 for the *'best Medical team in crisis zone'*.

### **Mission Statement**

Providing sustainable, equitable, effective and efficient health care services to the most vulnerable individuals and communities.

## **Vision Statement**

"Health For All"

## **Our Values**

Rapid response

Reaching the unreached

Accountable to our Partners, Donors & Communities

Community Participation in decision making

Neutrality & Non-Political

# **Goals and Strategies**

Goal 1	To Strengthen RMNCH+A Program across India
Objectives 1.1	Strengthening Primary Health services at the grassroots
Strategy 1.1.1	Increasing coverage & quality of ANC, PNC, Immunization and early childhood care for under 5yrs children
Strategy 1.1.2	Training, Capacity building and Health system strengthening
Strategy 1.1.3	Using Innovation, Technology & grassroots actions for public health services delivery
Objectives 1.2	Strengthening Reproductive Child & Adolescent health services
Strategy 1.2.1	Increasing access to essential micronutrient and Vitamin A supplementation
Strategy 1.2.2	Improving quality of ANC, Intra partum, PNC & Family Planning services
Strategy 1.2.3	Scaling up Adolescent Reproductive & Sexual Health (ARSH) clinic and Adolescent Health programs
Strategy 1.2.4	Increasing and Improving emergency obstetric and neonatal care services including timely access to emergency C-sections
Objectives 1.3	Increasing access to Primary & Secondary level health care services to marginalized community
Strategy 1.3.1	Setting up more Primary Health Centers for marginalized communities like Urban Poor, Rural & Tribal Population
Strategy 1.3.2	Up gradation of existing Primary Health Centers to provide secondary level services like Surgical & Specialty care
Strategy 1.3.3	Construction of Doctors For You Maternal Child health and surgical specialty care hospital
Goal 2	To combat Maternal & Child Malnutrition
Objectives 2.1	Scaling up of Community based management of Malnutrition program
Strategy 2.1.1	Setting up CMAM programs for SAM/MAM children with community based therapeutic center
Strategy 2.1.2	Partnership with Govt., NGO's & CSO's for strengthening malnutrition program
Strategy 2.1.3	Capacity building, training and handholding of ICDS program staffs for management of SAM / MAM children

<b>Objectives 2.2</b>	Providing Nutritional support & Micronutrient supplementation to pregnant and lactating mothers
Strategy 2.2.1	Increasing access to Iron folic acid & Multivitamins during pregnancy and lactation
Strategy 2.2.2	Provide additional nutritional supplementation in the form of Take Home Ration (THR) during pregnancy and lactation
Strategy 2.2.3	Behavior change communication (BCC) & Awareness program on Importance of Nutrition during pregnancy
Strategy 2.2.4	Improving nutritional status & Hemoglobin level of Adolescent girls
Objectives 2.3	Integrated and comprehensive community development with focus on WASH, Food security, access to health services and creating livelihood opportunities for marginalized communities
Strategy 2.3.1	Construction of Toilets & Behaviour Change Communication for making localities Open Defecation Free (ODF)
Strategy 2.3.2	Creating Livelihood opportunities through various skill development programs for most marginalized communities
Strategy 2.3.3	Improving WASH facilities in Schools & Communities through various programs
Goal 3	To Strengthen & Improve access to NCDi (Non Communicable Diseases & Injuries ) care services
Goal 3 Objectives 3.1	·
	Diseases & Injuries ) care services
Objectives 3.1	Diseases & Injuries ) care services  Setting up NCDi care services  Start of community based chronic disease screening program especially for Hypertension & Diabetes
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Strategy 3.2.5	Capacity building & Training of doctors, nurses & community workers for screening, detection and treatment of Oral, Breast & Cervical cancer
Strategy 3.2.6	Strengthening Cancer Research & Cancer registry at state and regional level
Objectives 3.4	Improving trauma care & Road safety in India
Strategy 3.4.1	Research study on Trauma care & Improving Trauma outcome to prevent morbidity and mortality post RTA
Strategy 3.4.2	Improving Road Safety measures and bring Policy changes at state level
Strategy 3.4.3	Strengthening Trauma & Emergency care across India
Goal 4	To Prevent & Control the Antimicrobial resistance (AMR) particularly drug resistance Tuberculosis
Objectives 4.1	Creating awareness on Anti-microbial resistance (AMR) in India
Strategy 4.1.1	Creating awareness about AMR among Medical students and practicing health professionals including doctors, dentists, nurses and pharmacists
Strategy 4.1.2	Creating awareness about AMR among general public and prevent misuse of Antibiotics
Strategy 4.1.3	Research for better understanding of AMR problems in various states of India
Objectives 4.2	Prevention & control of Drug Resistant Tuberculosis in India
Strategy 4.2.1	Program on prevention & control of drug resistance (MDR/XDR/TDR)Tuberculosis in India
Strategy 4.2.2	Strengthening RNTCP program delivery mechanism on ground in India
Strategy 4.2.3	Research study and knowledge management on Drug resistant Tuberculosis
Objectives 4.3	Improving Adherence & completion of Drug Resistance Tuberculosis treatment regimen
Strategy 4.3.1	Providing Nutritional & Psychological support to Drug Resistant Tuberculosis to improve adherence and treatment outcome
Strategy 4.3.2	Strengthening diagnostic and Imaging facilities to improve T.B care in India
Strategy 4.3.3	Program on HIV & T.B co-infection
Goal 5	To build a disaster resilient health system

Objective 5.1	Objective: To provide uninterrupted quality health services during crisis	
Strategy 5.1.1	Capacity building to make health facilities disaster resilient	
Strategy 5.1.2	Regular mock drills in health facilities	
Strategy 5.1.3	All implementation plans to have DRR component in the planning process	
Strategy 5.1.4	All service providers to be well trained in providing uninterrupted quality health service in adverse circumstances	
Objective 5.2	To build a disaster resilient community in terms of health needs	
Strategy 5.2.1	Community service providers to be trained in handling crisis situations	
Strategy 5.2.2	Establishing a robust and resilient communication and surveillance system to cope with crisis	
Strategy 5.2.3	Minimum Initial Service Package (MISP) to be prepositioned in hazard prone areas	
Strategy 5.2.4	WASH facilities to be made resilient to crisis	
Strategy 5.2.5	Nutritional security to be ensured in times of crisis	
<b>Objective 5.3</b>	To have a resilient governance system	
Strategy 5.3.1	Advocacy with local authorities to establish partnership models	
Strategy 5.3.2	Technical knowledge sharing to make both government and private facilities disaster resilient	
Strategy 5.3.3	Capacity building and training of both government and private sector health providers in DRR	
Goal 6	To build a resilient education system	
Objective 6.1	Objective: To build resilient education facilities	
Strategy 6.1.1	Hazard vulnerability mapping of facilities in disaster affected areas	
Strategy 6.1.2	Capacity building of education providers and beneficiaries in DRR	
Strategy 6.1.3	To prepare mitigation plans to minimize the effect of disasters	
Objective 6.2	Objective: To have a resilient education delivery system in crisis	
Strategy 6.2.1	To have contingency plans in place in order to provide uninterrupted education services in times of crisis	
Strategy 6.2.2	To have a mechanism to cope with loss of educational materials in crisis	

Strategy 6.2.3	To have preventive measures to minimize loss or destruction of educational documents and materials	
Strategy 6.2.4	To priorities education as a basic need in times of crisis in the planning process of DRR	
Goal 7	To have a resilient livelihood system	
Objective 7.1	Objective: To have a resilient livelihood options for vulnerable communities	
Strategy 7.1.1	To ensure minimum wages livelihood in times of crisis	
Strategy 7.1.2	To have a livelihood system that is less prone to disruption by disasters	
Strategy 7.1.3	To have a livelihood structure that is inclusive of DRR components	
Strategy 7.1.4	To have a cadre of community workers to create awareness about resilient systems of livelihood	
Objective 7.2	Objective: To have resilient agriculture system	
Strategy 7.2.1	Advocacy with the government to ensure new technology is made available to farmers to make their crops resilient to different local hazards	
Strategy 7.2.2	Ensure adherence to norms that are aligned with SFDRR and SDG's	
Strategy 7.2.3	Ensure adequate compensation in case of loss of livelihood due to disasters	
Goal 8	To carry high quality research that has an impact on Public Health Interventions on the ground and at policy level in line with DFY's strategic goals	
Objectives 8.1	Cultivate and sustain an integrated multidisciplinary environment that facilitates excellence in research and community engagement.	
Strategy 8.1.1	Adopt and maintain innovative technological resources that support research and community engagement.	
Strategy 8.1.2	To provide leadership in coordinating and setting priorities for the public health community	
Strategy 8.1.3	Maintain physical learning environments that support research and creative activities and community engagement.	
Strategy 8.1.4	Develop and engage in high quality research that is expected to make a difference to public health outcomes.	
Objectives 8.2	Educate and prepare the next generation of researchers and practitioners to effectively meet the public health-related needs of individuals and communities.	

Strategy 8.2.1	Promote integrated multidisciplinary approaches to research in public health and health during emergencies.
Strategy 8.2.2	To form a collective voice to influence policy and advocate for public health
Strategy 8.2.3	Increase access to public health education & research in India
Objectives 8.3	Conduct, manage, disseminate and translate research and creative activity to advance knowledge and health.
Strategy 8.3.1	Conduct and disseminate research and creative / innovative activities
Strategy 8.3.2	Develop a system for knowledge management enabled in data protection and management
Strategy 8.3.3	Conduct research and creative activity in partnership with community organizations and institutions.
Strategy 8.3.4	Conduct research and creative activity in partnership with other institutions both domestically and abroad.
Strategy 8.3.5	Develop and engage in high quality research that is expected to make a difference to public health outcomes that is conducted in an ethical manner and in accordance with the appropriate research permissions.
Strategy 8.3.6	To provide a platform for public health practitioners and researchers for networking and knowledge sharing
Strategy 8.3.7	Develop and engage in high quality research that is relevant to current research priorities (see section 1.1).
Strategy 8.3.8	Develop and engage in high quality research that is conducted collaboratively with those likely to be affected by the research by linking researchers with policy-makers, practitioners and the public.
Strategy 8.3.9	Maintain internal funds that support in the area of research and creative / innovative activity.
Strategy 8.3.10	Demonstrate success in acquiring extramural funding for research and creative / innovative activity.
Strategy 8.3.11	Develop and engage in high quality research that is expected to make a difference to public health outcomes.

# **Funding The Ambition**

DFY must match its ambitions to overcome the challenges to the resources that are available. We have put a much greater strategic emphasis on building resources at the each level in order match our collective ambition and organizational requirements.

The biggest part of our program spending will be allocated to our work on Goal 1: To Strengthen RMNCH+A Program across India (about 35-40%), Followed by Goals 2, 3 and 5: The other goals will account for the rest (about 20-25%). It is important to note that ensuring SDG's 1, 3, 4, 6, 11 and 16 will run through all our work in all six goals.

The goals will work within existing budget allocations –the unrestricted element (i.e. adjusted for inflation). Any ambition for more spending for a specific initiative will be contingent on raising new funds or re-alignment of internal resources during the life of the plan.

In the short-to-medium term, we will invest significantly more on fundraising and cost-effectiveness (building on our Single Management Structure work) and look for greater savings across the system. In the short term this may slightly reduce the total resources available for work on goals, in order to strengthen finances and achieve greater impact in the medium-to-long term. It is anticipated that there will be greater resources available for programming in the latter part of the five-year Plan period and beyond.

Doctors For You in line with its founder's commitment and vision should never accept any funding from Tobacco or Alcohol or Weapon manufacturing agencies in India or Abroad.

### Appendix A - Description of Strategic Planning Process Used

This document is developed through bottom-up approach. Starting with the inputs from group staff and field team in-charge, this document was developed through a 2 day residential conference organized in Dec 2016 in Delhi attended by all management level staff of Doctors for You. The draft recommendations where subsequently submitted to Governing body in early 2017 and the governing body in annual summit in Mumbai finalized the plan in consultation with Patrons, Advisors and subject experts.



### **Appendix B -Goals for the Chief Executive:**

The CEO of the organisation is empowered to ensure that adequate measures are taken in achieving the goals that are set by the organisation. In doing so, the CEO will be responsible for supervising and monitoring of various projects and suggest interventions to achieve the goals set for particular sectors. In this regard, the CEO will be supported by the Governing in his decisions and the Governing body will act as a mentor in achieving

the goals of the organisation within the stipulated time frame. The Governing body will also take into considerations any changes in implementation strategy of any project not aligned with organisational that are suggested by the CEO. The CEO will be overall in-charge of all projects and will take full responsibility for their completion in the given time and will also be responsible for delays caused if any. The CEO will play a crucial role in developing the implementation strategy of various projects undertaken by the organisation and will submit a report on ways to make them sustainable and resilient to disasters.

### **Appendix C- Monitoring and Evaluation of Plan**

### Responsibilities and Frequencies for Monitoring and Evaluation

The responsibilities of monitoring and evaluation would be as to the immediate supervisor of person responsible for the implementation of the task. The mechanism used for the same would be.

### **Monitoring:**

- Monitoring based on ground inspection by external monitors: The project will also employ external monitors to inspect the implementation of each component of the project and give their feedback and recommendations which will be used to further improve the quality of service delivery of each component of the project.
- Program Evaluation and Review Technique (PERT) and Critical Path Method (CPM):
   The project will use the program evaluation and review technique for continuous monitoring of the project. This will ensure flexibility in project implementation using time specific goals and targets and identification of gaps and lags in implementation of different project components. The critical path method will be used to identify the crucial components of the project during the implementation to ensure adequate resources for

critical components. A system of regular reporting of each component of the project will be put in place so that the overall progress of the project can be monitored at any given time.

#### **Evaluation:**

- Formative Evaluation: The project will use formative evaluation techniques to evaluate the early phases of the project. The pre-implementation phase will be the main focus of this evaluation.
- Summative Evaluation: Summative evaluation of the project will be done to determine if the project objectives have been met or not. The achievement of the project objectives will form the basis for continuation of the project model in other areas and possible continuation of the project in the target area.
- Outcome Evaluation: Outcome evaluation of the project will be done by comparing the baseline data before the implementation of the project and the outcome data after the implementation of the project. This will give a clear picture on the changes brought about by the project in the target area.
- Impact Evaluation: An impact evaluation of the project will also be done to determine
  the long term effects of the project in the target area and identify ways to minimise
  negative impacts and maximise positive impact in all future endeavors.

The procedure to be followed after the completion of M&E on Status of Implementation is as follows,

Results of monitoring and evaluation will be in writing, and will include:

1. Answers to the "Key Questions While Monitoring Implementation of the Plan"

2. Trends regarding the progress (or lack thereof) toward goals, including which goals and objectives

3. Recommendations about the status

4. Any actions needed by management

**Procedure for Changing the Plan** 

In case of any changes to the plan, following question needs to be answered,

1. What is causing changes to be made?

2. Why the changes should be made?

3. What specific changes should be made, including to goals, objectives, responsibilities

and timelines?

**Appendix D - Communicating the Plan** 

Note that certain groups of stakeholders might get complete copies of the plan, including appendices, while other groups (usually outside of the organisation) might receive only the

body of the plan without its appendices.

Consider:

✓ Publish portions of plan in newsletter, and advertising and marketing materials (brochures, ads etc.).

✓ Train board members and employees on portions of the plan during orientations.

✓ Include portions of the plan in polices and procedures, including the employee

Rawkant

manual

For Web publication

By Order

DOCTORS FOR YOU GOVERNING BODY

