



Could this be the start of a revolution?

Today, leDA is deployed in almost 40% of healthcare centres in Burkina Faso. Discussions are well under way regarding the transfer of the responsibility and management of the leDA project to the Ministry of Health.

The extensive geographical coverage, integration into the national information system, high level of coverage and strong support by health workers for the project represent a unique and fundamental opportunity for the introduction of new health policies, guaranteeing almost immediate wide-scale deployment.

What has been observed so far in the field of digital health is only the beginning of a revolution. The opportunities for digitalisation are numerous and will change the way healthcare services are delivered and managed.

Developments carried out/under way in Burkina Faso

- Development of powerful algorithms using Artificial Intelligence to assess the quality of medical consultations in real time and to assist medical team in their management of health districts
- Connection to rapid diagnostic tests (point-of care tests)
- Support for epidemiological surveillance and health risk reduction
- Introduction of advice on feeding children (Infant and young child feeding)
- Ante- and post-natal care: development and roll-out of a maternity module
- Implementation of online dashboards for chief medical district
- Link to the civil registry

Potential and future developments

- Integration of the module for the Community Management of Acute Malnutrition (CMAM)
- Management of drug supplies to avoid frequent stockouts
- Expanded Programme on Immunisation (EPI)
- Expansion to include other illnesses
- Management of data for all patients, thus contributing to the implementation of universal health coverage

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leDA: using technological innovations to improve primary healthcare

Studies have shown the importance of digital solutions in improving the quality of healthcare.

LONDON SCHOOL OF HYGIENE & TROPICAL MEDICINE



leDA

Improving primary health care outcomes through mHealth



Terre des hommes
Aide à l'enfance.

The Integrated eDiagnostic Approach (leDA) is being implemented countrywide in Burkina Faso

The digital technological solutions available today offer an unprecedented opportunity to transform and improve primary healthcare.

Terre des hommes (Tdh) develops digital tools in rural areas to improve the quality of healthcare for children under the age of five. Tdh has been working on the “leDA” programme in Burkina Faso since 2010, a digital healthcare solution which aims to improve the Integrated Management of Childhood Illnesses (IMCI) through the digitalisation of the WHO/UNICEF clinical protocol.

Today, leDA includes both consultation tools (to assist with diagnosis, improve the quality of care, and provide e-learning) and tools to assist with the management of the health information system (dashboards for various indicators, data collection and analysis).

With the aim of creating sustainable impact on the quality of care provided to children, Tdh works closely with the Ministry of Health, the key players in the health system, and research institutes.

Over
200,000

children examined
each month

4.4 M

consultations carried out in
total on 2.2 million children

92%

of consultations on children
under the age of 5 are
carried out with leDA

39%

of primary healthcare centres
in Burkina Faso already use
leDA technology

Figures for Burkina Faso, January 2019

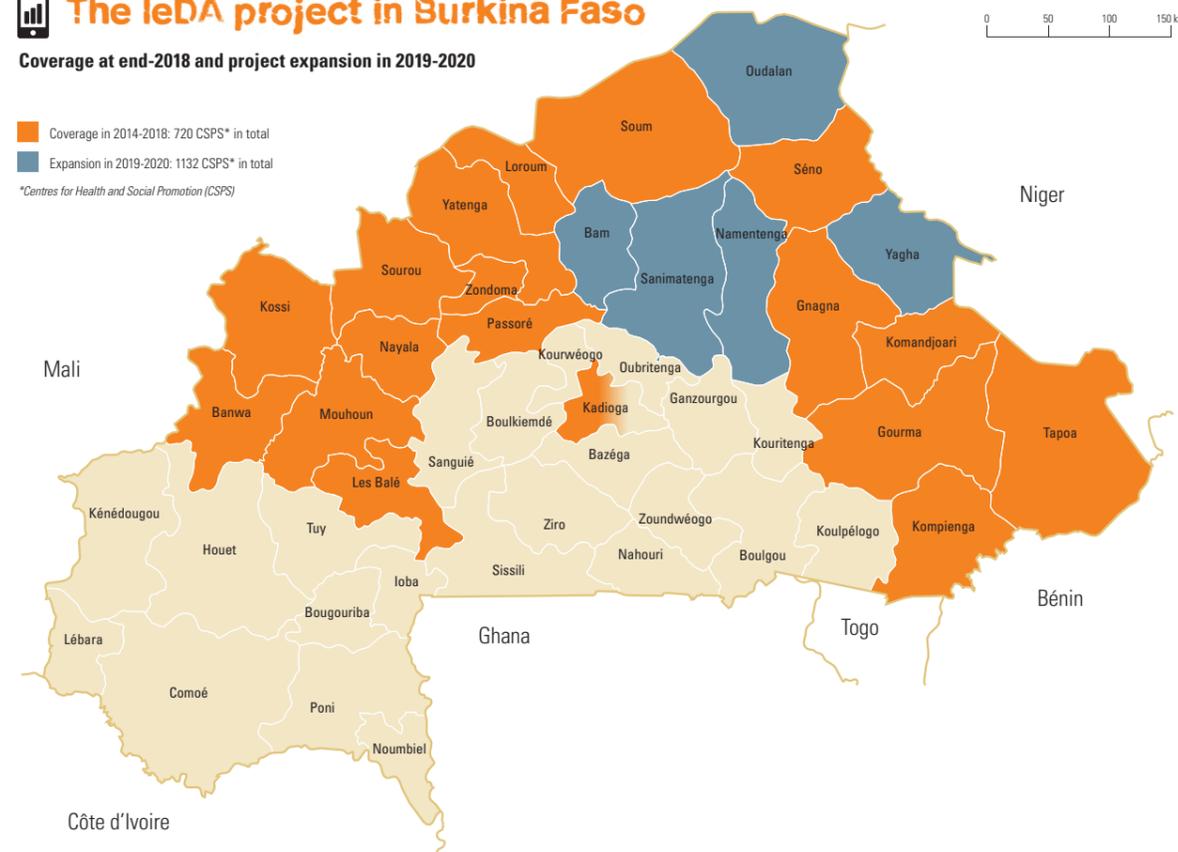
Direct connection with the national health statistics on DHIS2 (District Health Information System 2)

The leDA project in Burkina Faso

Coverage at end-2018 and project expansion in 2019-2020

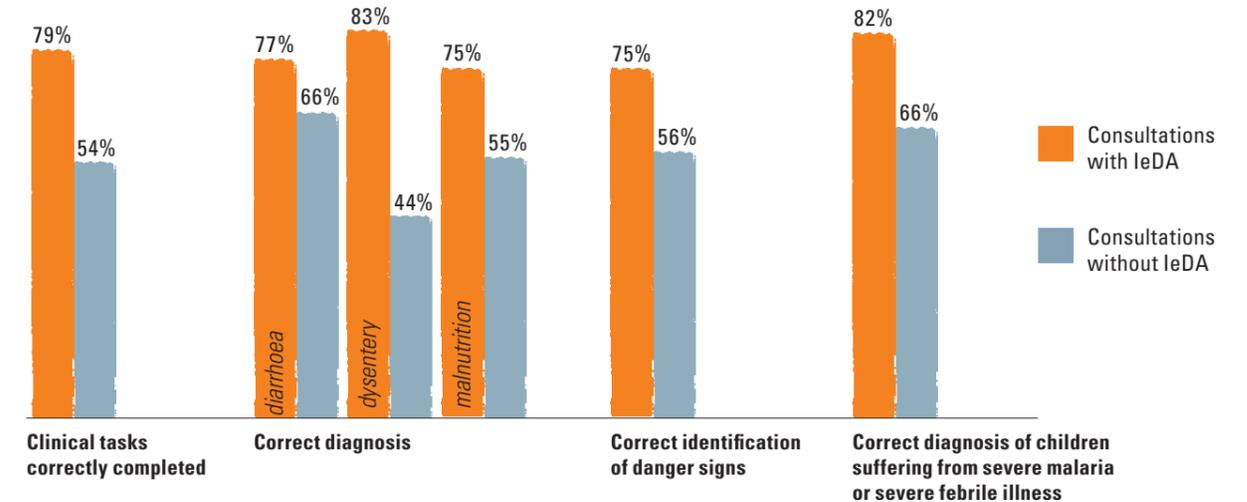
■ Coverage in 2014-2018: 720 CSPPS* in total
■ Expansion in 2019-2020: 1132 CSPPS* in total

*Centres for Health and Social Promotion (CSPPS)



Evaluations of the leDA programme show a significant improvement in diagnosis and treatment and a high level of adherence of health workers

The London School of Hygiene and Tropical Medicine (LSHTM) and the Centre Muraz in Burkina Faso have carried out a number of evaluations to assess the impact of leDA on the performance of health workers and to understand the context and mechanisms that allow their intervention to be effective.



leDA has lowered antibiotics over-prescription from 6% to 15%

Geographical expansion of the leDA project: The leDA project is currently being rolled out in Mali and is in pilot phase in 40 healthcare centres.

Acceptance of caregivers and families

Research carried out by the LSHTM, as well as by the Swiss Tropical and Public Health Institute (SWISS TPH), clearly shows that there is a high degree of acceptance by users and beneficiary families, which has resulted in the outstanding adoption of leDA.

During the evaluation, health workers indicated that the tool facilitates their daily work, particularly by providing assistance with diagnosis, thus ensuring the adherence to the IMCI strategy. The electronic register of patients also enables them to find patient files in a matter of seconds.

As for families, they stress that the tool allows for a more thorough examination of their child, and ultimately better quality of care. leDA is thus seen as a pledge of quality to provide better care for children.

“When a child comes to the centre, you can trace back any previous treatment they have received, including the date and reason for their visit.”

Nurse at a primary healthcare centre

Boulmiougou district: leDA has been rolled out at the request of the Ministry of Health staff

The Chief Medical Officer of the Boulmiougou health district was personally involved in equipping the health centres in his community with leDA technology. As the deployment in this district was not yet planned, he sought funds in his community to purchase the tablets and requested Tdh’s support with training and follow-up, thus satisfying the enthusiasm and direct demand of users in his community.

leDA reduces operating costs

The cost analysis run by the LSHTM shows that leDA’s deployment brings overall savings on a daily basis due to a reduction of costs in IMCI training time and IMCI paper forms. In Burkina Faso, thanks to leDA, net savings in operating costs are estimated to be between 33.2 \$ and 66.3 \$ per health centre per month. Further economies of scale are expected with the effective transfer of leDA to the Minister of Health.