

Operations Research Subgroup Teleconference

February 1st, 2016 at 9 am EST

Participants: Anna Bryant, Tanya Guenther, Nick Oliphant, Debra Prosnitz, Jane Briggs, Karin Kallander, Kerry Ross, David Hamer, Stefan Peterson, Dyness Kasungami

SCM Subgroup Participation in OR Subgroup

- Please take a look at the SCM Subgroup Terms of Reference which are on the website. The objective of the Subgroup is to support implementation of CCM at scale to strengthen supply chain systems in country. The Subgroup also collaborates with the PSM Subgroup of the FTT. There are resources on CCMCentral about quantification, resupply mechanisms, use of supply chain data, and mHealth.
- The Subgroup also tries to raise awareness about SCM in iCCM programs through webinars. Thus far, the Subgroup held one webinar about quantification and supply chain, another one with issues of waste management. In the workplan, there is a large portion of activities dedicated to documenting and disseminating best practices. At next teleconference, want to discuss lessons learned for implementation related to CCM (SC4CCM with Sarah Andersson). The group is also trying to conduct a mapping of all the different supply chain activities, and trying to explore supply chain data for decision making. How is the data being used that we recommend people collect at the district level?

Chairing

- Stefan is stepping down as chair, and Karin will be the new co-chair of the group. He will be assuming his new role as Chief of Health Section of Unicef.

mHealth research on iCCM and experiences linking data captured with DHIS2

- Unicef and BU are conducting a study with the Unicef/Zambia Office, working with national MOH counterparts on a cluster-randomized control study to strengthen the flow of commodities and improve supervision. They are working to track cases of CCM and child illness cases at the facility level by adapting the in-country system. They have worked with a small local research organization (Akros Research) and a team at the University of Oslo to reprogram DHIS2 from the current malaria focus that is being used for MACEPA work in the country, and add in pneumonia, diarrhea and supervision components (DHIS2 is now fully functional). 40 CHWs working in CCM have been introduced to it now, and data collection will begin within 2 weeks. In Zambia, community data was often mixed with the health center data. Now, there will be a consistent documentation of the referrals and case mix of uncomplicated infections at the community level (in the context of this study).
- In Zambia there are community health assistants (CHAs) who are paid, and then there are volunteer community health workers (VCHWs). There are very few in this area – CHAs end up working more in health facilities. This study pertains to VCHWs.
- Many OR Subgroup members would be interested to see the cost of the program. A cost analysis is planned as part of the study to determine the incremental costs per child treated of the enhanced mHealth interventions.

In-Scale Mozambique Project (Karin)

- In Mozambique and Uganda Malaria Consortiums' inSCALE project is giving community health workers (CHWs) phones with which they can send their weekly reports, receive immediate automated feedback on performance and access a closed user group with their supervisors in order to increase communication and support. Every month a motivational performance related SMS is sent out, and supervisors receive weekly automated actionable SMS for CHWs who are performing at high or low standards. Through the use of this

mobile health (mHealth) application, community health workers are expected to feel an increased sense of connectedness to the health system and to their CHW peers. Through the increased support they will be receiving, CHWs will hopefully feel appreciated for the work they do and have an improved sense of status within their community. The closed user groups are also expected to address some of the potential drawbacks in supervision, increasing frequency of communication between the CHW and their supervisor but also reducing the cost of travel where potentially unnecessary. Supervisors will be able to provide more targeted face to face supervision based on performance and conduct over the phone supervision on a more regular basis. In Mozambique CHWs are provided with smart phones (Samsung Galaxy Y) programmed with a inSCALE CommCare tool for decision support, immediate feedback and multimedia audio and images to improve adherence to protocols. The tool also allows CHWs to send patient data to a server and to keep a register of patients who can be tracked over time. The indicators submitted can be used to monitor the performance of CHWs by providing automated, timely, digestible reports with targeted follow-up actions for CHW supervisors. The intervention was evaluated through a cluster randomised controlled trial.

- Malaria Consortium, through DFID funding through Unicef, is now taking the APE CommCare intervention to further scale, and are working with Dimagi to expand the scope. Additional modules for supply chain management, HIV/TB counselling, pregnancy and referral tracking, an APE performance dashboard and a bridge between the system with DHIS2 is being included in the new package that is being designed this year.

Discuss proposed Cochrane review

- Cochrane review is looking at iCCM approach/adoption by countries. The title has been reviewed with Cochrane; the team is developing protocol now, but the broad objective is to assess the effectiveness of iCCM as an integrated approach to improve quality of care, reduce under-five mortality and increase effectiveness.
- Currently, the investigation team is conducting proposed landscape analysis of DHIS2 usage. Looking at which countries have DHIS2 systems and the status (pilots, scale, what data is being collected, etc.). Initially, they are looking at mhealth interventions that are being implemented at the pilot level or how they are being integrated into DHIS2. The first data collection is being led by Savitha Subramanian (MMEL Advisor at MCSP), who started a draft brief which includes 14 countries from Africa (prioritizing programs that including scaling up iCCM through the GF NFM). The Subgroup intends to use the Global Fund iCCM meeting as an opportunity to debrief with some of the participants, and will take advantage of the CCM Task Force as an opportunity to reach out around the groups.

Workplan for 2016

- To be discussed during next OR Subgroup call.