cStock
Average reporting rate by month

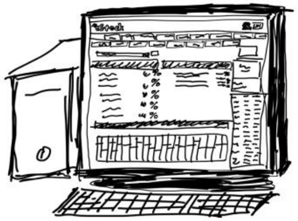
JSI RESEARCH & TRAINING INSTITUTE, INC.

cStock Malawi

INSTITUTIONIZALING CSTOCK

Malawi cStock Approach

Simple mHealth tool for reporting and resupply



User friendly dashboards for monitoring supply chain performance

Product Availability Teams (PATs) working together to reduce stock outs

cStock Malawi Results

Better data

>80%

Reporting rates with cStock

Improved efficiency

50%

Reduction in lead times with cStock

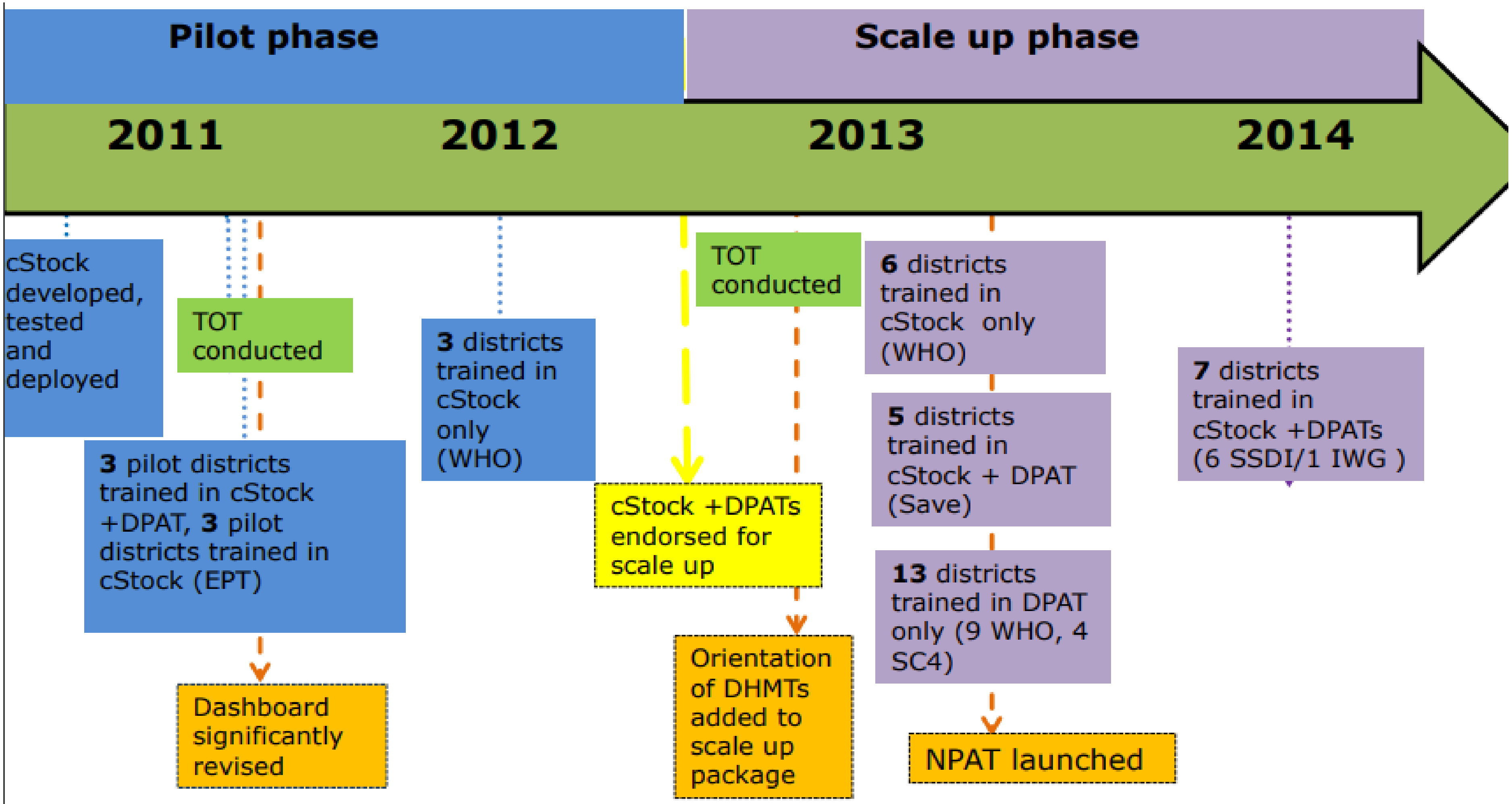
Sustainable and cost effective

<1% of the total CHW program cost

"cStock has eased our jobs….it doesn't take much time you can just use your phone from your home to report. It is a smart and easy system." *- CHW Supervisor, Malawi*

"We don't have stockouts because the meetings help us. If we have a problem, there is a protocol we follow. We resolve the issues." *- Health Facility, Malawi*

Project Approach



Pilot phase

Scale up phase

2011

2012

2013

2014

cStock developed, tested and deployed

TOT conducted

3 pilot districts trained in cStock +DPAT, **3** pilot districts trained in cStock (EPT)

Dashboard significantly revised

3 districts trained in cStock only (WHO)

cStock +DPATs endorsed for scale up

TOT conducted

Orientation of DHMTs added to scale up package

6 districts trained in cStock only (WHO)

5 districts trained in cStock + DPAT (Save)

13 districts trained in DPAT only (9 WHO, 4 SC4)

NPAT launched

7 districts trained in cStock +DPATs (6 SSDI/1 IWG)

Cumulative No. districts trained	**6**	**9**	**21**	**28**
HSAs trained	**638**	**971**	**2208**	**2943**

Designed for Scale

Project was focused on addressing supply chain challenges and was not a technology project, therefore the whole system was considered

Used existing infrastructure, i.e. HSAs and supervisors used their personal basic phones and districts had access to computers and Internet

Minimized routine data collected to two data items: stock on hand and receipts data

Integrated

Streamlined and integrated the technology into existing reporting and resupply processes

Linked reporting to resupply of health products motivating HSAs to report

Employed an iterative process for the dashboard design to ensure it was acceptable and user friendly

Intervention design include strengthening data use whereby product availability teams were introduced to meet regularly to monitor data and take actions

Broad Ownership

Engaged MOH and partners from the outset to design the innovation

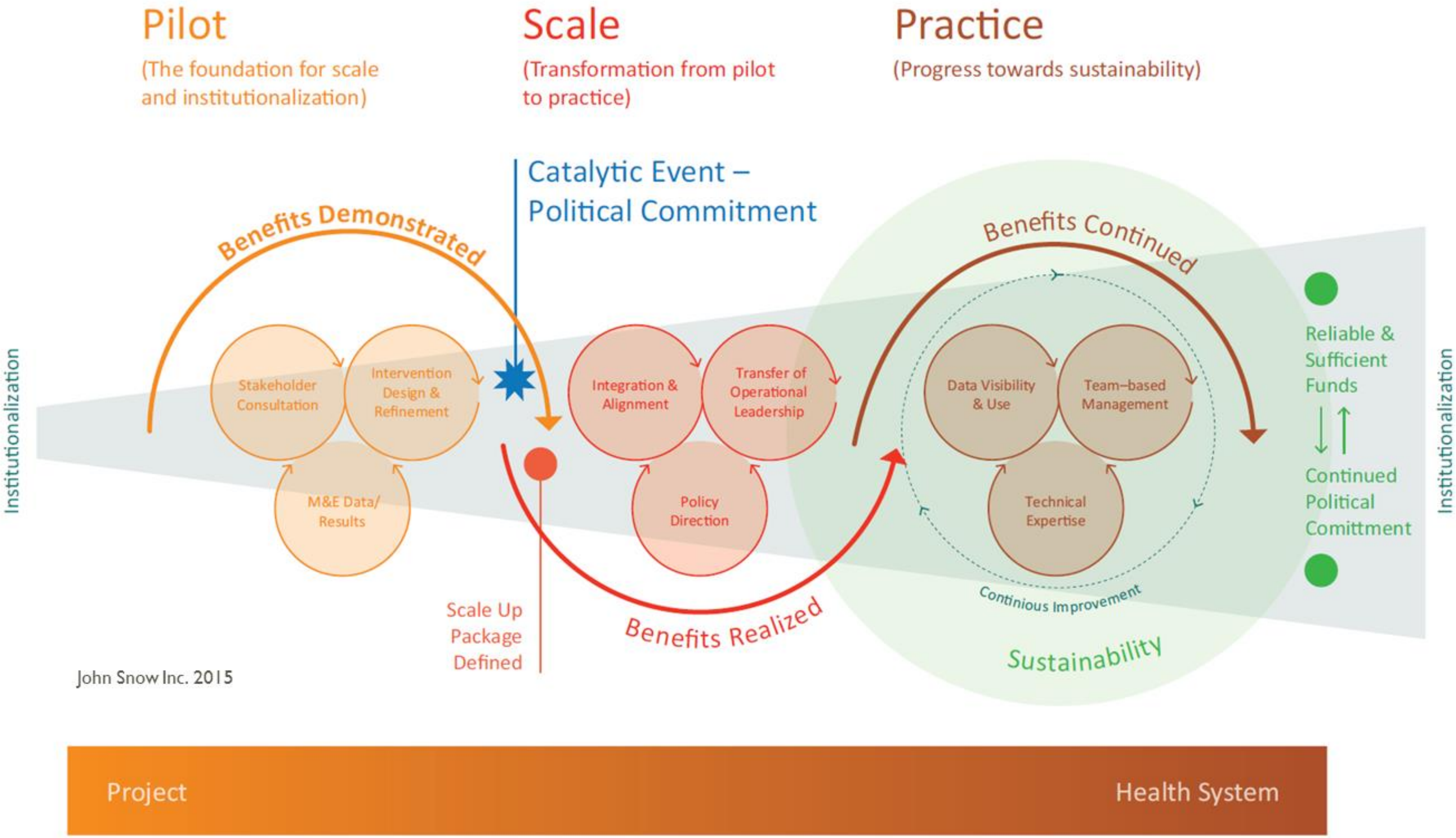
Continued to share monitoring and evaluation data throughout the pilot and scale up

Gained MOH endorsement early in the process

MOH took the lead to mobilize partners to support scale up to districts outside the pilot

Developed a transition plan with stakeholders two years before the project ended

Project Approach



Pilot
(The foundation for scale and institutionalization)

Scale
(Transformation from pilot to practice)

Practice
(Progress towards sustainability)

Catalytic Event –
Political Commitment

Benefits Demonstrated
Stakeholder Consultation
Intervention Design & Refinement
M&E Data/ Results
Scale Up Package Defined
Integration & Alignment
Transfer of Operational Leadership
Policy Direction
Benefits Realized
Benefits Continued
Data Visibility & Use
Team–based Management
Technical Expertise
Continious Improvement
Sustainability
Reliable & Sufficient Funds
Continued Political Comittment
Institutionalization
Institutionalization
Project
Health System

John Snow Inc. 2015

cStock in 2018

cStock plus PATs were scaled up to all 30 districts by October 2014.

cStock continues to be funded by Global Fund

MOH manages cStock, following up with users

MOH with support from Save the Children expanded cStock to include vaccines at health facility level in 2015

USAID