ICCM monitoring in low HR/resource capacity settings
Lessons learnt from South Sudan Experience

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Population Services International
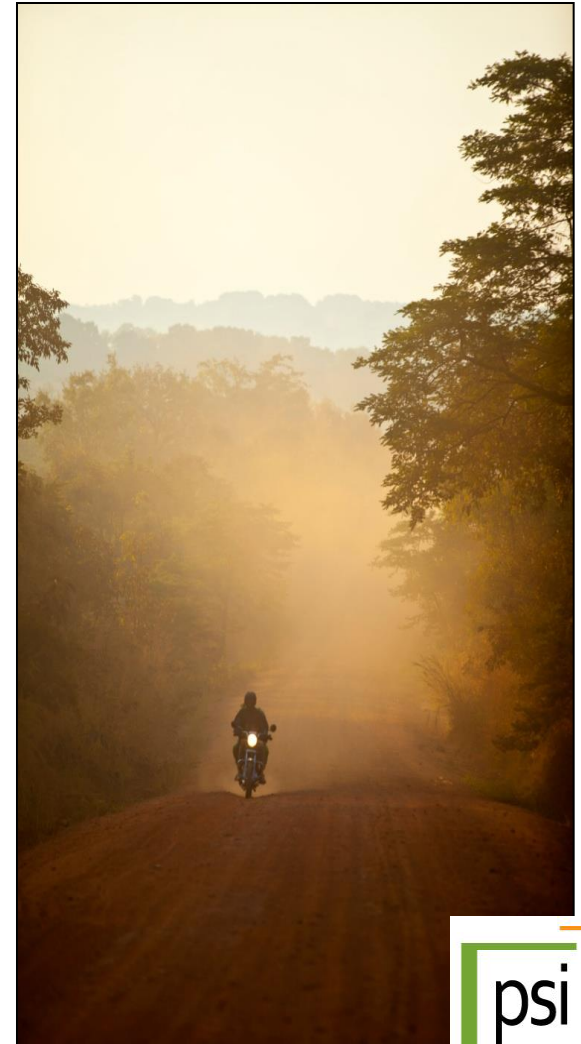
South Sudan ICCM program overview

➢ **South Sudan has one of the world highest child mortality rates**

➢ **Limited access to health services**

➢ **GF/DFID funded ICCM program delivered by a consortium of 6 NGOs**

➢ **8,000 community health workers (CHWs)**

➢ **Program covers Malaria, Pneumonia and Diarrhea (nutrition in 2014)**

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ICCM monitoring framework

➢ **Information needs;**

  • *Caseload data, stock availability data, and quality of patient care data*

➢ **Key data collection tools;**

  • *CHW patient register, CHW Supervisor checklist, Field Officer Supervision checklist*

➢ **Data electronically managed using DHIS, harmonized across 6 partners**

➢ **Workforce of almost 9,000 involved in data collection activity**
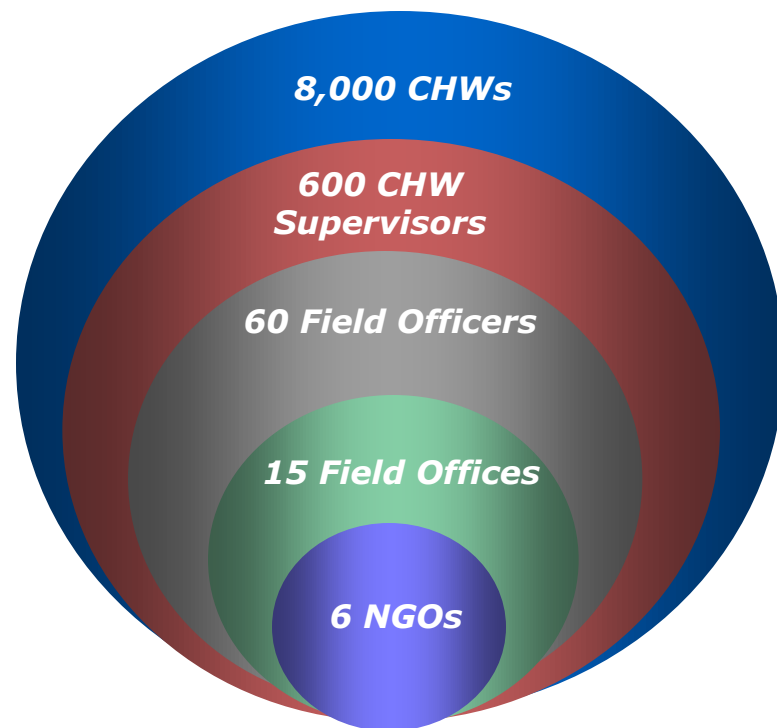
8,000 CHWs

600 CHW Supervisors

60 Field Officers

15 Field Offices

6 NGOs

5 key lessons learnt

Lesson 1: Keep the data needs simple!

Tendency for program to demand large volumes of data on a routine basis

- *Heavy burden on a low capacity workforce*
- *Poor quality data*
- *Little eventual use of data*

Access-related data

Quality-related data   **Demand-related data**

➢ **Rationalize the data burden, focusing on a minimum dataset**

➢ **Minimize the number of data collection tools**

➢ **Focus on quality over quantity – "less is more" principle**

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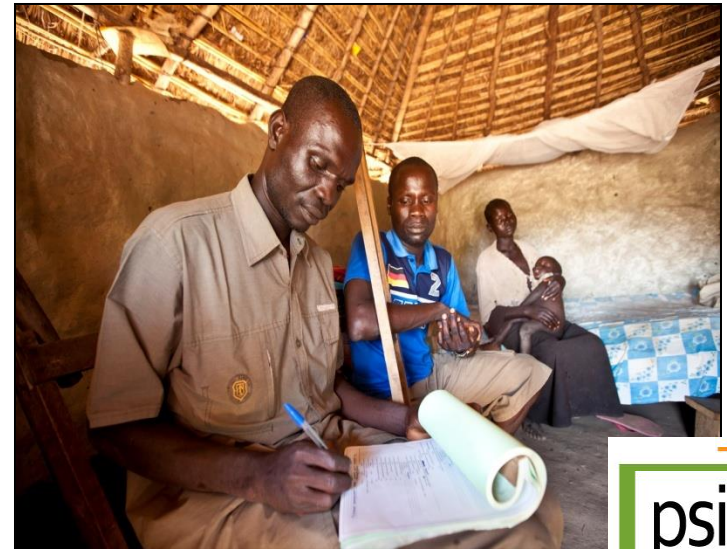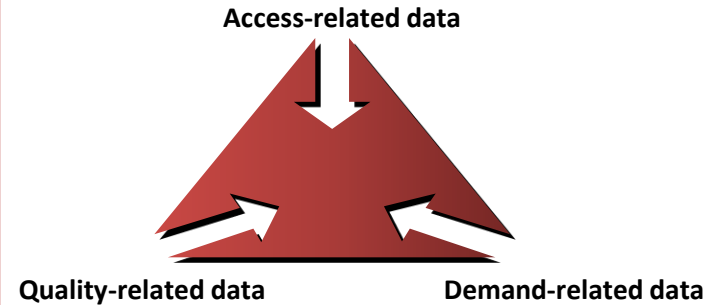
Lesson 2: Consider workforce capacity

Low literacy rates amongst CHWs (<10%)

Low capacity office staff (IT/Numeracy)

➢ **Design CHW tools taking into account literacy levels**

➢ **Apply appropriate workforce supervision ratios**

➢ **Focus on basic IT/Numeracy skills training for staff**

➢ **Link incentives with data collection!**

Assessment and Classification			
Danger Signs	Fever	Cough/Fast Breathing	Diarrhoea
DANGER SIGN PRESENT GO TO PHCU/C			

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Lesson 3: Consider links with national framework

INGOs establish parallel systems based on their own needs/capability

Poor consideration of links with national systems

CDOT

BRAC

➤ **Integrated approach to establishing info needs (MoH/implementers)**

➤ **Harmonization of data collection tools across all implementers**

➤ **Roll out of a harmonized electronic management system**

Lesson 4: Limit movement of paper files

Infrastructural challenges with regards to movement of data

Vehicle, motor cycle and bicycle break down cause further delays

➢ **Devolve electronic data entry to field office level to limit movement of paper files**

➢ **Ensure adequate availability of power and connectivity at field office level**


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Lesson 5: Simplify and visualize outputs

Data utilization can be challenging in a setting such as South Sudan

Low capacity staff are easily overwhelmed by data

➢ **Effective presentation of data vital to optimize understanding and use**

➢ **Use of visual dashboards with traffic light ratings, as well as spatial data (simple maps)**

➢ **Simplified presentation of key data – e.g. Transforming stock balances into '# of months of stock'**

ICCM Mapping - Mundri East and Mundri West County, Western Equatoria
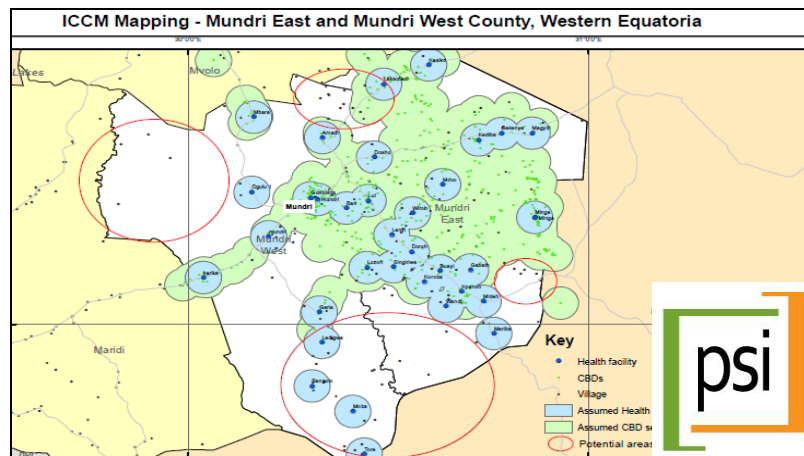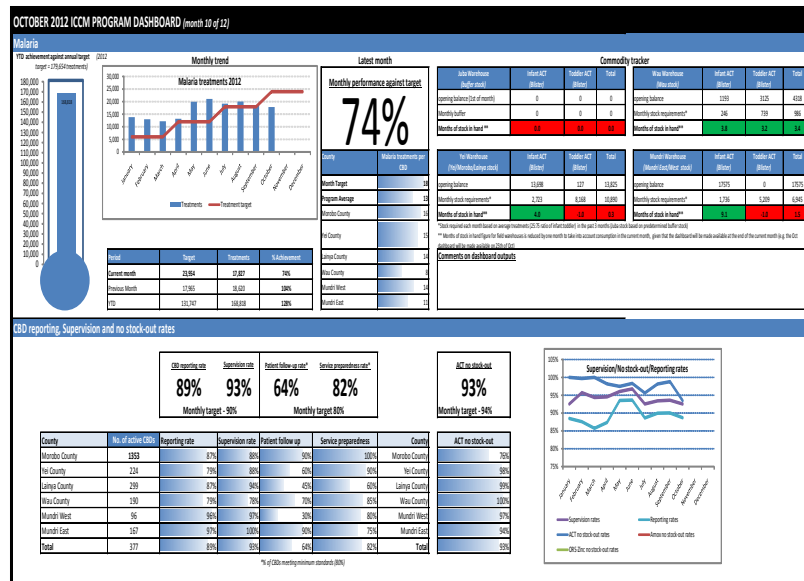
Summary:
Data collection in low capacity settings

1. **Keep it simple. Less certainly yields more - Focus on getting the <u>minimum dataset right</u>**

2. **Consider the <u>workforce capacity</u>, particularly when designing tools/systems**

3. **<u>Coordination with MoH and other implementers</u> to contribute to national systems**

4. **Carefully consider the infrastructure when determining the <u>movement of paper files</u>**

5. **Use <u>simple, visual data outputs</u> to facilitate understanding and use of data by low capacity staff**

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QUESTIONS?

iCCM 2014

Integrated Community Case Management (iCCM):
Evidence Review Symposium
3–5 March 2014, Accra, Ghana