

# Institutionalising integrated community case management (iCCM) to end preventable child deaths

A technical consultation and country action planning  
22-26 July 2019, Elilly International Hotel, Addis Ababa

## Agenda

### MEETING OBJECTIVES

The objectives of this meeting are to:

1. Review the recent learnings related to implementation of primary health care at community level including integrated community case management of childhood illness with quality and in a sustainable manner, as well as new guidelines on community health workers;
2. Refine guiding principles and develop recommendations for embedding iCCM within community health systems as core to Primary Health Care system.
3. Identify needs and gaps around sustainable financing of iCCM.
4. Review progress, key bottlenecks and priorities to update national iCCM implementation plans in the context of recent learning to guide the High Burden to High Impact response and broader child health programming, as well as Global Fund applications and other resource mobilization efforts.

### EXPECTED OUTCOME

1. A set of recommendations for institutionalizing iCCM within the broader community health systems and countries' child health policies and programmes;
2. Draft updated national iCCM implementation plans, including plans for domestic and external financing for PHC at community level

### PART I: TECHNICAL MEETING

Monday, 22 July 2019		
8.30–9.00	Registration	
9:00-9:30	Welcome and opening	WR Ethiopia, UNICEF Representative Minister of Health or delegate,
9.30-9.40	Security briefing	WHO Ethiopia
9:40-10.00	Objectives of the meeting and agenda Day 1 – 3	S. Sadruddin
10.00–11.00	<b>Session 1: Child Health Programming the era of the SDGs, PHC and UHC</b> <b>Chair (Day 1): Fred Binka and David Hamer</b>	
10.00-10.20	Child Health and Survival in the SDG era	Wilson Were, WHO
10.20-10.40	Primary Health Care at community level to achieve UHC	Maureen Kerubo Adudans and Rory Nefdt, UNICEF

10.40-11.00	Discussion	
11.00-11.30	Tea/Coffee (Photo?)	
11.30-13.00	<b>Session 2: Lessons learned from scaling up iCCM</b>	
11.30-12.00	Global Fund iCCM Thematic Review of 18 countries <i>Objective: Share key opportunities and challenges</i>	Estifanos Shargie
12.00-12.30	WHO Rapid Access Expansion Programme <i>Objective: Share lessons learned and key challenges from the multi-country iCCM programme</i>	Salim Sadruddin
12.40-13:00	Q&A	
13.00-14.00	Lunch	
14.00 – 15.30	<b>Session 3: Country experiences from scaling up iCCM within community health systems</b>	
14.00 - 14.15	Malawi	MOH
14.15 - 14.30	Ethiopia	MoH
14.30 – 14.45	Nigeria	MoH
14.45-15.00	Q&A	Facilitator (WHO)
15.00-15.15	Niger	MoH
15.15-15.30	Uganda	MoH
15.30-15.45	Q&A	Facilitator (UNICEF)
16.00 – 16.30	Tea/Coffee	
16.30 -17.30	<b>Session 4: Engaging Communities</b>	
16.30-16.50	<i>WHO Community Engagement Framework and experience from Rwanda</i>	Asiya Odugleh-Kolev
16.50-17.30	<b>Moderated panel discussion: The ‘How’ of Community Engagement and empowerment in iCCM</b>	Moderator: Aline Simen Kapeu Panel - DRC - Cameroon - Mali - Angola
16.30 - 17.45	Closing of the day	Rory Nefdt
17.45-18.15	Facilitator’s meeting	WHO/UNICEF/Chair
18.30 – 20.00	Reception	

Tuesday, 23 July 2019

9.00 – 9.15	- Recap of day one - Objectives of the day	Flavia Mpanga
9.15-11.00	<b>Session 5: Community Based Services – Guidance on Program Planning and Service Delivery</b> <b>Chair (Day 2) : James Tibenderana &amp; Nnenna Ogbulafor</b>	
9.15-9.45	WHO guideline on health policy and system support to optimize community health worker programmes Q&A	Catherine Kane
9.45-10.00		Moderator
10.00-10.30	Introduction to Planning Handbook for Program Managers and Planners	Samira Aboubaker
10.30 – 10.45	Q&A	
10.45 – 11.05	Tea/Coffee	
11.05 – 12.00	<b>Session 6: Financing iCCM</b>	Moderator: Valentina Buj
11.05– 11.45	1. Brief introductory talk by moderator 2. Estifanos Shargie (5 min) Financing aspects from Global Fund iCCM Thematic Review 2. Panel [5 min each]: lessons learned, key considerations moving ahead	- USAID: Patricia Jodrey - PMI/CDC: Lauren Lewis - Global Fund: Marcos Patino Mayer (via VC) - GFF: John Borrazzo - BMGF: Diana Measham/Abigail Pratt - DRC MOH - MoH Ethiopia
11.45 – 12.15	Discussion	
12.15 – 13.00	<b>Session 7: Procurement and supplies for iCCM</b>	Moderator: Jane Briggs
12.15-12.30	15 min presentation: - Supply chain to the last mile literature review and country case studies - Review of supply chain challenges in 24 WCAR countries	Karin Kallander  Aline Simen Kapeu
12.30-13.00	30 min Panel and discussion	  GHSC Program Cameroon Burkina Faso Uganda Malawi
13.00 – 14.00	Lunch	
14.00 – 16.00	<b>Group work: Defining guiding principles and recommendations for institutionalizing iCCM in the Primary Health Care System</b>  Introduction: Summary of key successes and challenges presented up to now by thematic area <i>[provided by rapporteur]</i> <i>Group work A: discussion on bottlenecks / challenges pertaining to the specific system component as per presentations and country experience</i> <u>9 working groups</u>	Introduction: Salim and Maureen

	<ol style="list-style-type: none"> <li>1. Coordination and policy setting</li> <li>2. Costing and Financing</li> <li>3. Human Resources</li> <li>4. Supply Chain Management</li> <li>5. Service Delivery and Referral</li> <li>6. Community Engagement (communication and social mobilization)</li> <li>7. Supervision</li> <li>8. Quality of Care</li> <li>9. Monitoring and Evaluation and Health Management Information Systems</li> </ol>	
During group work	Tea/Coffee (flexible during group work)	
16.00 – 17.30	Plenary – feedback from the groups: key issues/challenges for each health system component around ‘institutionalizing iCCM’	Eric Swedberg
	Closing of day 2	
17.30-18.00	Meeting Facilitator’s meeting	WHO/UNICEF/Chair
<b>Wednesday, 24 July 2019</b>		
8.30 – 9.00	Recap of Day 2 Introduction of Day 3 Chair : Shamim Qazi and Jessicah Nsungwa Sabiiti	Teshome Desta
9.00 – 11.00	<i>Group work B: Developing recommendations for institutionalizing iCCM</i> <i>Each group develops a mission statement and recommendations for institutionalizing the health system component in the Primary Health Care system</i>	Salim and Maureen
Flexible during group work	Tea/Coffee	
11.00 – 13.00	Plenary – Reporting by groups, discussion and agreement on the mission statement and recommendations	Andrea Bosman
13.00 – 14.00	Lunch	
14.00-15.00	<i>Group work C: Draft recommendations</i>	
		Rapporteur
15.30-16.00	Closing: part 1 of meeting	Andrea Bosman/Rory Nefdt
16.00-16.30	Facilitator’s meeting	WHO/UNICEF/Chair

## **PART II:**

**Implementation of High Burden High Impact (HBHI) approaches and integrated Community Case Management (iCCM) to accelerate reduction of child mortality Country Planning for Malaria High Burden Countries**

**Thursday, 25 July 2019**

**Section 1: High Burden High Impact Response – Getting back high burden countries on track to achieve Global Technical Strategy for Malaria 2016–2030 targets**

**Chairs: A Kalu and Rory Nefdt**

9:00 - 9:20	Welcoming remarks	WR/Pedro Alonso
9:20 - 9:30	Objectives and agenda	Kalu Akpaka
9:30 - 10:00	Background and introduction to High Burden High Impact response (the rationale, the response elements and the need to act now)	Pedro Alonso
10:00-10:30	Country engagement and operationalization of HBHI	Maru Aregawi
10:30-11:00	Coffee Break	
11:00-13:00	<p><b>Country updates on planning, convening and implementation of the HBHI approaches, follow-up activities, best practices and challenges</b></p> <p>(**presentations from countries that have conducted HBHI meetings or have advanced activities, 15 minutes each)</p> <p>Burkina Faso**</p> <p>Mali</p> <p>Cameroon **</p> <p>Niger</p> <p>DRC</p> <p>Ghana**</p> <p>Mozambique</p> <p>Nigeria**</p> <p>Tanzania**</p> <p>Uganda**</p>	NMCPs/Country representatives
13:00 – 14:00	Lunch	
14:00-15:00	Discussion	
15:00-16:00	<p>Early progress/status of implementing the strategic use of information (response element 2).</p> <ul style="list-style-type: none"> <li>○ Malaria repository database in countries</li> <li>○ Stratification (macro and micro-stratification)</li> <li>○ Impact analysis</li> <li>○ Analysis of Geographic Access to health services and distribution of mortality in the African region</li> </ul> <p>Discussion</p>	Abdisalan Noor
16:00-16:30	Coffee break	
16:30-17:30	<p>Early progress/status of implementing HBHI response element 1, 3 and 4</p> <ul style="list-style-type: none"> <li>○ Political will (response element 1)</li> <li>○ Better guidance (response element 3)</li> <li>○ Coordination (response element 4)</li> </ul> <p>Discussion</p>	<p>Maru/Alastair</p> <p>Peter Olumese</p> <p>Alastair/Melanie</p>

17:30-18:30	Ways forward to improve HBHI processes and accelerate follow-up activities	
18:30	Close of Day	

Friday, 26 July 2019

## Section 2 - Scale-up of iCCM in HBHI countries to accelerate reduction of malaria mortality

**Chairs: Fred Binka and Andrea Bosman**

9:00 - 9:10	Recap of day 4	Spes/Lynda
9:10 - 9:20	Summary of the discussion of sources and mechanisms for funding of iCCM.	Valentina Buj

### Country level planning for optimization of iCCM to accelerate mortality reduction in settings with high transmission, limited resources and limited access to services in-light of the HBHI concepts and priority outcomes (key pathways, deliverables, timeline and implementers, risks and mitigation strategies).

9:20 - 9:30	Guidance on country planning group work (the partners and 10 countries spread across the 4 groups)	Maru
9:30 - 13:00 Working coffee 10.30:11.00	<ul style="list-style-type: none"> <li>● <b>Group 1.</b> Policy, prioritization of high mortality areas for iCCM <ul style="list-style-type: none"> <li>○ Policy</li> <li>○ Criteria for iCCM prioritization of areas and operationalization</li> </ul> </li> <li>● <b>Group 2.</b> Leadership and Coordination <ul style="list-style-type: none"> <li>○ Human resources for iCCM (CHWs-profiling, remunerations and sustaining services)</li> <li>○ Financial arrangements (including Gov)</li> <li>○ Leadership and Management</li> </ul> </li> <li>● <b>Group 3.</b> Service delivery-continuum of care and quality: <ul style="list-style-type: none"> <li>○ Community &amp; Health Facility</li> <li>○ Referral facility and referral system</li> <li>○ Supply Chain Management</li> </ul> </li> <li>● <b>Group 4.</b> Surveillance of iCCM, tracking progress, outcome &amp; impact <ul style="list-style-type: none"> <li>○ Indicators, methods, tools</li> <li>○ Use of routine health facilities (outpatient consultations, hospitalisation/severe diseases, hospital deaths)</li> <li>○ Population or community-based survey</li> <li>○ Implementers</li> </ul> </li> </ul>	

13:00-14:00	Lunch	
14:00-16:00	Plenary presentation by four groups	A. Kalu
16:00-16:40	Discussion	
16:40-17:00	Brief remarks by key partners	GF, PMI, UNICEF, Other
16:40-17:00	Coffee break	
17:00-17:30	Summary and recommendations	Pedro Alonso
17:30	Close of day	
17:30-18:00	Meeting of facilitators	WHO/UNICEF/GF/PMI and other partners