



Institutionalizing iCCM Subgroup Meeting 11/9/20



Agenda:

- Introduction from Child Health Task Force Secretariat
- Proposals of workstreams for subgroup in 2021
- Update from iCCM Task Team
- Discussion



Institutionalizing iCCM Subgroup



Goal

The national child health strategic plans of all high burden countries include iCCM as an integral element of primary health care system, along with budgeted operational plans for iCCM.

Objectives

1. Work with CH Task Force M&E sub-group to **identify indicators for assessing institutionalization of iCCM**;
2. **Synthesize operational challenges** to scale-up/delivery of quality iCCM to inform design and implementation;
3. **Facilitate sharing of best practices** from countries to address identified implementation challenges;



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Objectives (continued)

4. Based on experience gained over the last several years facilitate development/updating of **iCCM implementation guidelines**.

5. Work with implementation science sub-group to **identify research knowledge gaps** (including those identified in the iCCM CHNRI exercise), and propose research questions to generate evidence for informing and influencing iCCM programming.

6. Work with expanding child health package sub-group for developing **standard criteria for structured expansion of community service delivery package**.

Proposed Workstreams for 2021

- 1) Development of indicators to assess institutionalization of iCCM
- 2) Country engagement
- 3) Knowledge sharing

iCCM Task Team

Country update November 2020

[Link to country mapping document \(updated routinely\)](#)

Phase II country support:

Quantifying and costing iCCM within a community health system strengthening approach and a primary health care agenda; and developing iCCM focused investments cases for resource mobilization and coordination

Country	Status	Planned deliverables
Cameroon	<ul style="list-style-type: none"> • Currently a team in country is developing a new national community health strategy (CHS) • Data collection is underway • Will use the CHPCT and include iCCM when costing the CHS • iCCM TT is providing TA to consultants working on the CHS, costing and investment case 	<ul style="list-style-type: none"> • iCCM costed within the new national CHS (using CHPCT) • iCCM investment case to complement (or annex) the larger community health investment case
Chad	<ul style="list-style-type: none"> • Initial conversations with UNICEF country office • Plans to expand iCCM in districts where UNICEF is currently working • Efforts underway to accelerate progress on CHS • iCCM TT is identify the feasibility of complementing ongoing work on iCCM and community health 	To be discussed with stakeholders in country
Madagascar	<ul style="list-style-type: none"> • CHPCT V 1.0 was completed in 2017/8; iCCM TT with UNICEF country office is reviewing and refreshing data as necessary 	<ul style="list-style-type: none"> • Refreshed CHPCT • iCCM investment case
Malawi	<ul style="list-style-type: none"> • A new child health strategy will be developed in 2021 as well as an iCCM roadmap • CHPCT has not been used previously and no recent iCCM costing • iCCM TT has identified a consultant to lead on CHPCT V2.0 and a small working iCCM working group formed to oversee this work 	<ul style="list-style-type: none"> • CHPCT initiated with iCCM fully costed • iCCM investment case
Niger	<ul style="list-style-type: none"> • Initial conversations with UNICEF country office • Interest from partners to support • CHPCT has not previously been completed despite its recognized value. Expressed interest in costing and developing an investment case • In September, UNICEF in discussion with MoH; iCCM TT to follow up on outcome of these discussions and next steps 	To be discussed with stakeholders in country

- ❖ Countries prioritized for Phase II support include a selection of HBHI countries as well as countries that expressed interest in TA from iCCM TT.
- ❖ During Phase I, there were approximately 30 countries, including countries on this shortlist, that received TA from the iCCM TT and UNICEF's HSS unit during the development of their concept notes and through iCCM TT participation in the Mock TRP

Country	Status	Planned deliverables
Sierra Leone	<ul style="list-style-type: none"> • CHPCT was piloted in Sierra Leone ~2016/7 but this needs to be updated and aligned with new policies and strategies. iCCM TT and partners to support this with the CHW TWG and steering committee • CHW policy is currently under review and this will have implications for iCCM and costing • CHS expires this year and will continue to be used until formal plans are in place to revise/update 	<ul style="list-style-type: none"> • CHPCT initiated with iCCM fully costed (this, once the CHW policy is finalized-anticipated before end of 2020) • iCCM investment case
South Sudan	<ul style="list-style-type: none"> • CHPCT V 1.0 was completed in 2018; iCCM TT reviewing and refreshing data as needed 	<ul style="list-style-type: none"> • Refreshed CHPCT (building on 2018 work) • iCCM investment case (this will complement the existing BHI investment case)
Uganda	<ul style="list-style-type: none"> • Child Survival Strategy is being finalized • iCCM guidelines are currently under revision and this process is being led by a consultant • iCCM TT shared the CHPCT and will provide TA for costing iCCM and iCCM focused investment case 	<ul style="list-style-type: none"> • CHPCT initiated with iCCM fully costed and based on the revised guidelines • iCCM investment case
Zambia	<ul style="list-style-type: none"> • CHPCT V 1.0 was completed in 2019; revisions will be made to include iCCM and update data, including LiST analysis 	<ul style="list-style-type: none"> • Updated CHPCT • iCCM investment case
Zimbabwe	<ul style="list-style-type: none"> • Used the iCCM gap analysis to cost iCCM (March 2020); this was used to inform the CHPCT which is being finalized. These data will inform the investment case • A presentation, using data from the iCCM gap analysis and informed by the CHS, was prepared to support MoH and CCM with grant making 	<ul style="list-style-type: none"> • Completed iCCM gap analysis • Supported CHPCT and inclusion of iCCM • Presentation on iCCM investment and how to optimize resources • iCCM investment case

Community Health Planning and Costing Tool (version 2.0)

Resources:

1. Handbook:



2. [Financing Community Health Programs for Scale and Sustainability](#)

Proposed Workstreams for 2021

- 1) Development of indicators to assess institutionalization of iCCM
- 2) Country engagement
- 3) Knowledge sharing



Resources



Engage with the **co-chairs**:

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Subgroup information, recordings and presentations from previous meetings and webinars are available on the subgroup page of the Child Health Task Force website:

www.childhealthtaskforce.org/subgroups/iccm

**The recording from this meeting will be available on this page later today*

A screenshot of the Child Health Task Force website. The page features the organization's logo in the top left corner and a navigation menu with links for "ABOUT", "SUBGROUPS", "COUNTRY WORK", "NEWS", "EVENTS", and "RESOURCES". The main article is titled "Understanding Child Health in the Context of COVID-19" and is dated "Apr 17, 2020". The article text states: "The most significant threat to global child health from SARS-CoV-2 is unlikely to be related to COVID-19 in children, but rather the socio-economic consequences of a prolonged pandemic."¹ A photograph shows a healthcare worker in a hospital setting. Below the photo, a caption reads "Photo credit: Kate Holt/MCSP". The article continues with a section titled "What We Know" and a list of bullet points: "Children of all ages are susceptible to COVID-19, with more cases being reported in younger children and infants.¹", "Children with COVID-19 express milder symptoms than adults, but the prevalence of COVID-19 in children is not well documented. This may be due to the fact that children are not as likely to be tested.²", and "While pediatric COVID-19 is often milder than that in adults, it can progress to severe disease in some cases.³".

Check out the Task Force Child Health & COVID-19 web page for additional resources!

Suggestions for improvement or additional resources are welcome. Please email childhealthtaskforce@jsi.com.