



Supply Chains  Community Case Management

Data Dashboards to Monitor Trends in CCM Supply Chain Performance and Product Availability at the Community Level

**USAID Bureau for Global Health
Coordinating Agencies' M&E Working Group Meeting**

M&E of Community Based Health Programs

May 16, 2012



SC4CCM

- Identifies innovative, affordable and sustainable solutions to the supply chain challenges faced by CHWs when treating childhood illness in remote communities
- Implemented in Ethiopia, Malawi & Rwanda
- 5 year project funded by the Bill & Melinda Gates Foundation



Data Dashboards: a key SC4CCM M&E tool



Dashboards aggregate program data from various sources into a simple central database, used by field staff first and accessible to all staff



About Dashboards

- **Excel** format
- Organized according to M&E framework
- Tracks **simple frequencies** and shows **trends over time**
- Used to **generate data visuals** to facilitate decision making
- Includes baseline and midline data, and program targets



Dashboard View

MALAWI									
Summary Book: Outcome indicators									
		Baseline		Y1Q1	Y1Q2	Y1Q3	Midline		TARGET
		N	%	%	%	%	N	%	%
151	Non-intervention								
152	% HSAs reporting special trips to collect from drugstore ("bad practice")								
153	EPT			44%	#DIV/0!	#DIV/0!			75
154	EM			0%	0%	#DIV/0!			
155	Non-intervention								
156	Average time (hours) between SMS order and receipt								
157	EPT			10 days, 17:58:10	0:00:00	0:00:00			3 days
158	EM			4 days, 21:18:05	0:00:00	0:00:00			3 days
159	Non-intervention								
160	ToC Box 5: HSAs are motivated to perform their roles in the CCM product supply chain								
161	<i>HSA indicator</i>								
162	% HSAs who receive feedback after supervision (past 30 days)								
163	EPT	44	61%	100%	#DIV/0!	#DIV/0!			
164	EM	56	75%	75%	#DIV/0!	#DIV/0!			60-70
165	Non-intervention	39	69%						
166	% HSAs who receive feedback on managing products (of those who receive supervision)								
167	EPT	35	57%	100%	#DIV/0!	#DIV/0!			
168	EM	45	80%	50%	#DIV/0!	#DIV/0!			
169	Non-intervention	35	69%						
170	% HSAs who receive feedback on managing products (of those who receive feedback)								
171	EPT	27	74%	100%	#DIV/0!	#DIV/0!			
172	EM	42	86%	67%	#DIV/0!	#DIV/0!			75-85
173	Non-intervention	27	89%						
174	QUALITATIVE NOTES (Quarter 2)								
175	Objective 2								
176	Add notes below from monitoring logs related to implementing interventions. Includes observations not regularly captured with monitoring tools, such as district and partner actions affecting our work								
177	Strengths:								
178									
179	Weaknesses:								
180									
181	Opportunities:								
182									



Dashboard Inputs



Dashboard Inputs

- Mobile data collection during monitoring visits generates **EpiSurveyor** outputs which are in excel format
- In Malawi, cStock generates **cStock Reports**
 - cStock is a rapid SMS, open-source, web-based **logistics management information system** for routine management and monitoring of community-level essential medicines

→ **Both are inputs to the Excel dashboard**



Dashboard Inputs

- Inputs are added to the Excel dashboard through a simple **copy and paste** process. Cleaning, formatting and pasting is done by field staff.
- Formulas embedded in the dashboard use input data to generate statistics **without additional manipulation**
- This process enables routine data to be integrated into the dashboard and used in **real time** to strengthen monitoring with **minimal burden** on program staff



EpiSurveyor



You are logged in as
mnoel@jsi.com

Account Upgrade Info Home API Settings SMS Settings Logout

Save Save As Export Open New Preview

Design Data Analysis Map Share Log

Displaying data for Mw_District5

Show All Start Date 2011-07-22 End Date 2012-04-26 Refresh

New Record Upload Data Delete Data Export Data

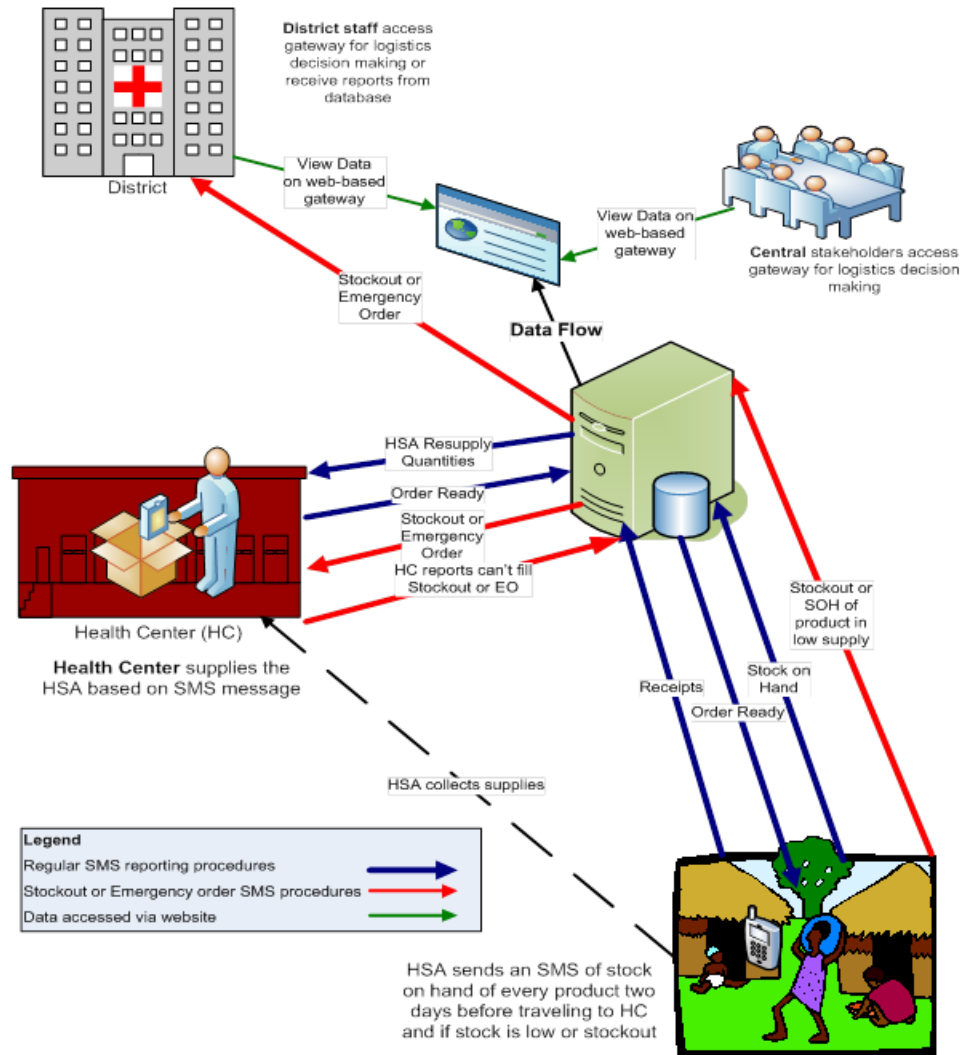
First Previous Next Last

<input type="checkbox"/>	Edit	UserId	DateStamp	District	Group	Date	AccessCstock	TimesAccCstock	WhyNoAccCstock	lowstockalerts	TakeActionLS	
<input type="checkbox"/>	21	mnoel@jsi.com	2012-04-26 15:38	Machinga	EPT	2012-04-26	yes	3-5 times per week	na	yes	yes	
<input type="checkbox"/>	23	mnoel@jsi.com	2012-04-26 15:37	Machinga	EPT	2012-04-26	sometimes	3-5 times per week	na	yes	yes	
<input type="checkbox"/>	20	mnoel@jsi.com	2012-04-17 16:59	Nsanje	EM	2012-04-17	yes	1-2 times per week	na	yes	yes	instructs the sup
<input type="checkbox"/>	22	mnoel@jsi.com	2012-04-17 16:55	Nsanje	EM	2012-04-17	yes	1-2 times per week	na	yes	yes	instructs supervi
<input type="checkbox"/>	15	mnoel@jsi.com	2012-04-05 11:33	Mulanje	EPT	2012-04-05	no	~	new coordinator, not trained in ept	no	~	
<input type="checkbox"/>	19	mnoel@jsi.com	2012-04-05 10:01	Nkotakota	EM	2012-04-05	yes	1-2 times per week	na	yes	yes	liase wit

Collecting monitoring data using mobile phones/Episurveyor optimizes survey time, reducing time CHWs have to spend with interviewers, away from routine tasks



cStock M&E reports



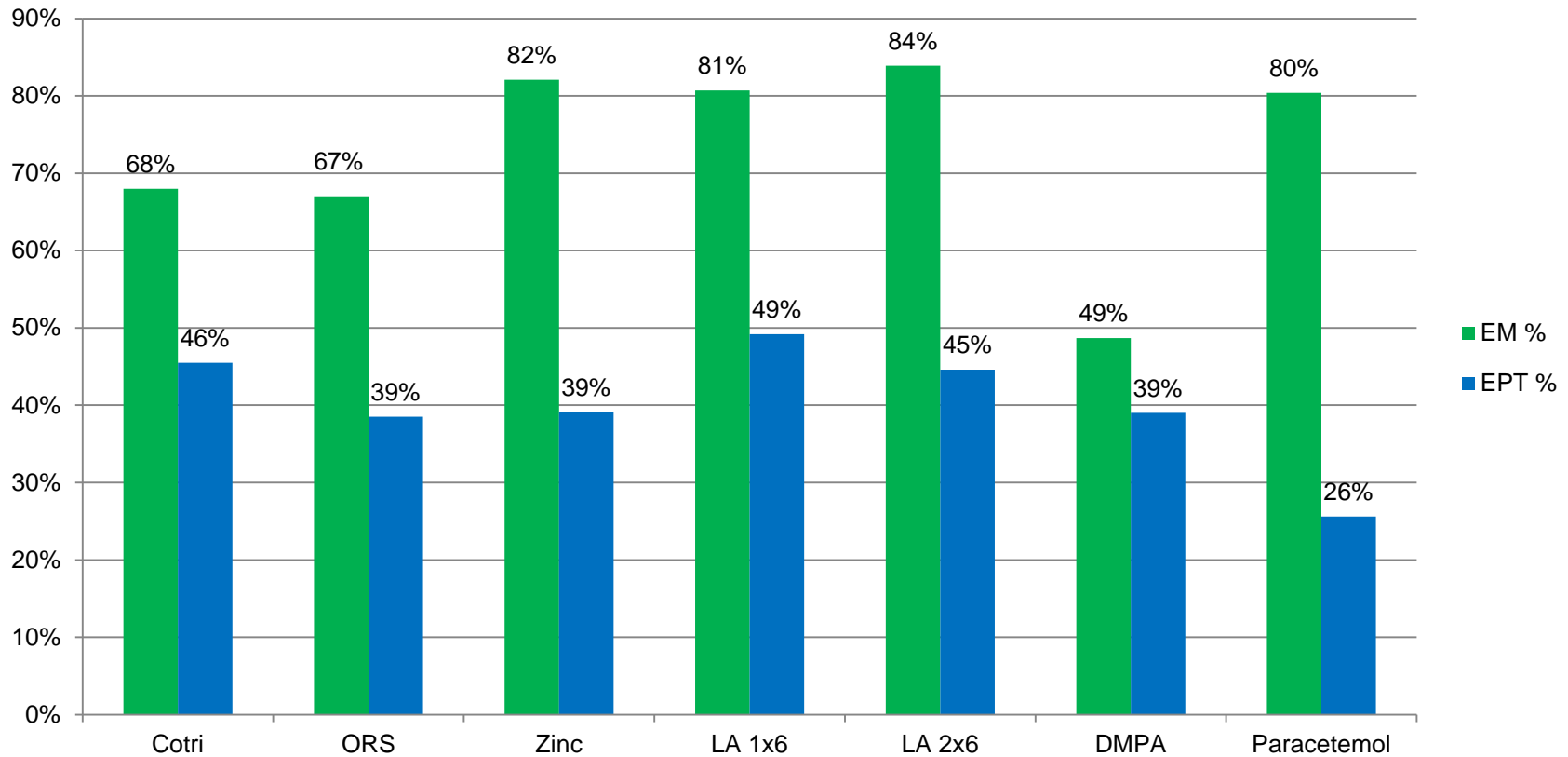
HSA sends an SMS of stock on hand of every product two days before traveling to HC and if stock is low or stockout



Dashboard Outputs: Examples



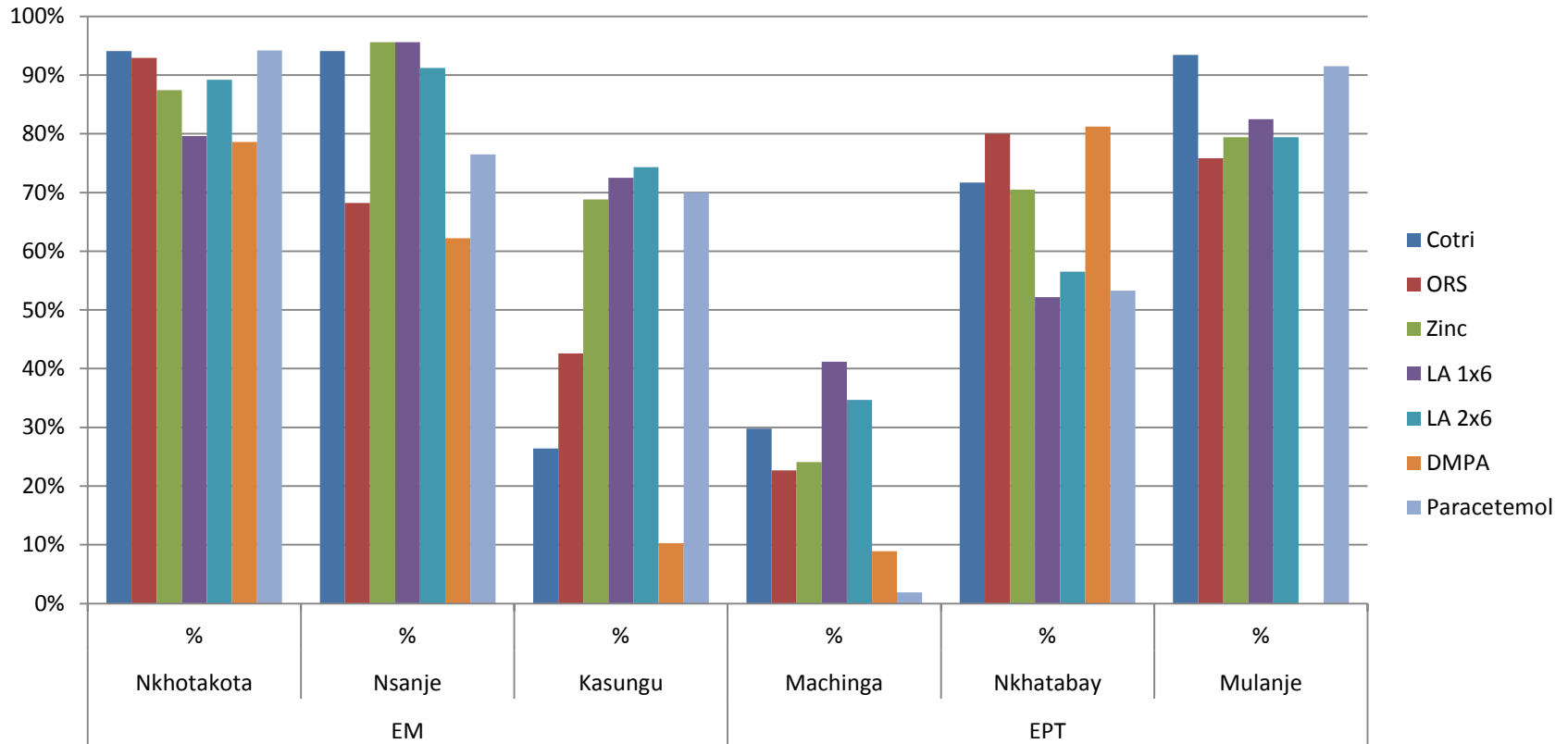
HSA with no stockouts over past 30 days of Q1 (Dec), by group



*Source: cStock M&E report



HSA with no stockouts over past 30 days of Q1 (Dec) by product, district and group



*Source: cStock M&E report



Lessons

- Simple system **does not require programming expertise** to build and utilize
- Excel format facilitates **participatory, concurrent analysis** by field & HQ staff and MOH counterparts and enables **capacity building** of local staff in M&E



Challenges

- Promoting **accurate interpretation** of data among both program staff and stakeholders
- Constant need to **re-check formulas** during data entry
- Challenge of displaying the **sample size** for all monitoring levels
- Slightly **slow functionality of excel** as the volume of data increases which may affect scalability.



Dashboards & Communities



How can dashboards foster the use of M&E information by program staff involved in the project

- Keep demands on CHWs for data collection basic, consider existing burden/education levels
- Use existing infrastructure (i.e. mobile phones if CHWs have them)
- If adding data requirements to CHW work load, include ‘high-touch’ support to reinforce value of collecting data correctly, and using it to make improvements



How do we ensure community health workers are not overburdened with information collection to feed into the dashboards?

- Program field staff collect periodic monitoring data through site visits, gain efficiencies from mobile data capture
- M&E draws on data already collected as part of learning interventions
- Field staff are the first point of assembly and analysis for dashboards, building capacity and data ownership
- Dashboards help teams in different locations share, discuss and interpret data together



How do we minimize unrealistic expectations of M&E of community health systems?

- Extrapolation of community level data to broader country health systems to better inform national supply levels is possible but requires close coordination and careful interpretation
- Custom dashboards require dedicated support, and are more appropriate for small research endeavors than large scaled up programs



Recommendations



Custom Excel dashboards are optimal for **small scale community programs** implemented in a sub-region or group of districts.



Recommendations: why dashboards

- Operations research projects (like SC4CCM) benefit from a **central M&E data repository** for visualizing data, facilitating discussion, and guiding intervention support to optimize intervention performance
- Provides a **snapshot** of the most important data rather than capturing all data from a project
- Helps the project **monitor progress** towards goals/objectives and also identify potential problems
- Can look at both **historical** and **real-time** data
- Saves **time** and **resources** as one does not have to spend time looking through multiple data files



Thank you!
Questions?

Visit sc4ccm.jsi.com
for more information