Leaving no Patient Behind: Use of Health Facility-level Granular Logistics Data to Drive Program Performance and Improve Patients Experience

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Context

The paper discuss how investment of health equity is a key component to ensure that those who live with HIV/AIDS receive appropriate access to health services. The paper also highlights the importance of effective logistics data management to address the last-mile logistics issues across the countries including the people living with HIV/AIDS. More specifically, this paper discusses the importance of using site-level data to identify the sites with specific needs such as capacity issues, stock-outs, communication issues, or reporting issues. The strategy consisted on using site-level data to identify the sites and then focusing on improving the coordination among stakeholders.

Activity Description

Activity Impact

The intervention described in this paper focuses on ensuring all facilities receive commodities as the services delivery points, as a way to contribute to equity in health. This is an illustration of how high-performing supply chain function can improve health outcomes.

Facilitators

The facilitators of this success include:

- Effective communication among stakeholders is key to success
- Partnership with stake holders
- Committed staff within institution
- Leadership at national and subnational level
- Coordination and leveraging of synergies

Challenges

- Accessibility to facilities in conflict prone area – regular call-in to collect and discuss data
- Quality data with gaps – data triangulation (comparing logistics data with service data)
- Keeping the workforce motivated
- The inability to visit all sites and provide feedback on the data analysis

Lessons Learned

In our experience, a high-performing supply chain system function can boost resilience, enhance quality of care and increase satisfaction of service providers.

The pursuit of health equity is a bigger struggle in the fragile political and security environment.

The cost of running effective supply chain systems increased significantly for zones with difficulty of access.

The availability of quality logistics data is critical to ensure health equity – No logistics data, no commodities.

Insecure environment caused additional stress on the health systems

Evidence

This interventions had a significant contribution on the clients experience:

- Multi-month dispensing (MMD) of antiretroviral:
  - Sustained coverage at 27%.
  - With more than 80% on MMD refills schedule.
  - This indicates that the clients can now visit health facility only twice a year.
- Increased Viral Load Coverage (VLC):  
  - The VLC coverage jumped from 34% to 50%.
  - This indicates that half of the clients have their viral load documented.
  - This is the result of a combination of improved clinical services and better logistics performance, with increased availability of VL reagents.

The Theory of change used was the following:

- IF the visibility of site-level logistics data
- THEN the programmatic outcomes will be improved in all health facilities and patients will have:
  - Increased timeliness of service delivery

The approach prioritized the use of routine logistics data to inform decision making with a focus on equity. The paper identifies the benefits of continuous monitoring of logistics data and its impact on improving program performance.

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