

MONITORING & OVERSIGHT WORKSTREAM

# **Information Session: Supply Chain and Health Services Spot Checks**

23 September 2021

This session is being recorded and will be shared on a public link for colleagues that cannot attend.

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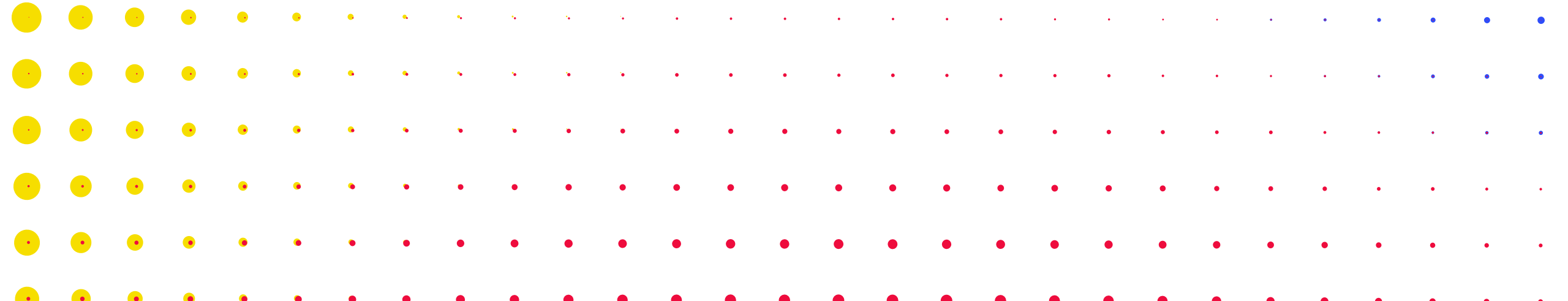
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1

# Objectives and Expected Outcomes



# Key Messages

**Operational oversight is being strengthened, with a view to improve performance and results for the people we serve.**

- Complementary initiatives are being rolled out to strengthen results and performance of HIV, TB and malaria grants, as well as C19RM.
- More frequent and better-quality data enables implementing countries and partners to anticipate issues, unblock bottlenecks and course-correct to support problem solving.
- The new tools put greater emphasis on the importance of data and data quality, increased responsibility for data ownership and accountability.

# Strengthening data collection methods to improve return on investments and value for money.

## Lessons learnt from previous Spot Checks have informed the new Spot Checks tool:

- 1** Critical to understand to what extent **C19RM investments** (~US\$ 4 billion) are **reaching the frontlines and are improving services for the people we serve**. In addition, there's an **expectation from donors** that this data collected is accurate and can show results on investments.
- 2** Supply Chain and Health Services Spot Checks rounds will benefit from using the **best aspects of previous approaches**: integrated methods, large number of countries, data collection through in-person visits, and representative sampling.
- 3** Increase **value for money** by going to market with a request for proposal (RFP) that opened-up the supplier base and helped drive down unit costs.

### The Supply Chain and Health Services Spot Checks aim to provide visibility on the availability of:

1. HIV, TB, malaria and COVID-19 commodities, and
2. Services and readiness at healthcare facilities and communities.

# What does success look like?

- 1** Integrated management of in-country supply chain performance, with MoH and Principal Recipients where applicable, through increased visibility on supply chain performance.

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- 2** Strengthened visibility of health service availability, related COVID-19 driven disruptions and impact on routine HIV, TB and malaria services, through increased frequency of data collection.

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- 3** Strengthened use of data to facilitate identification of implementation challenges and be able to work together with countries to course correct, within the framework of operational monitoring and oversight.

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- 4** Data driven investments in future funding cycles and a prioritization of activities leveraging performance data. For example, identify key gaps in service delivery, including supply chain performance based on verified data to inform decision making.

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- 5** A consistent data culture in-country and at the Global Fund.



**2**

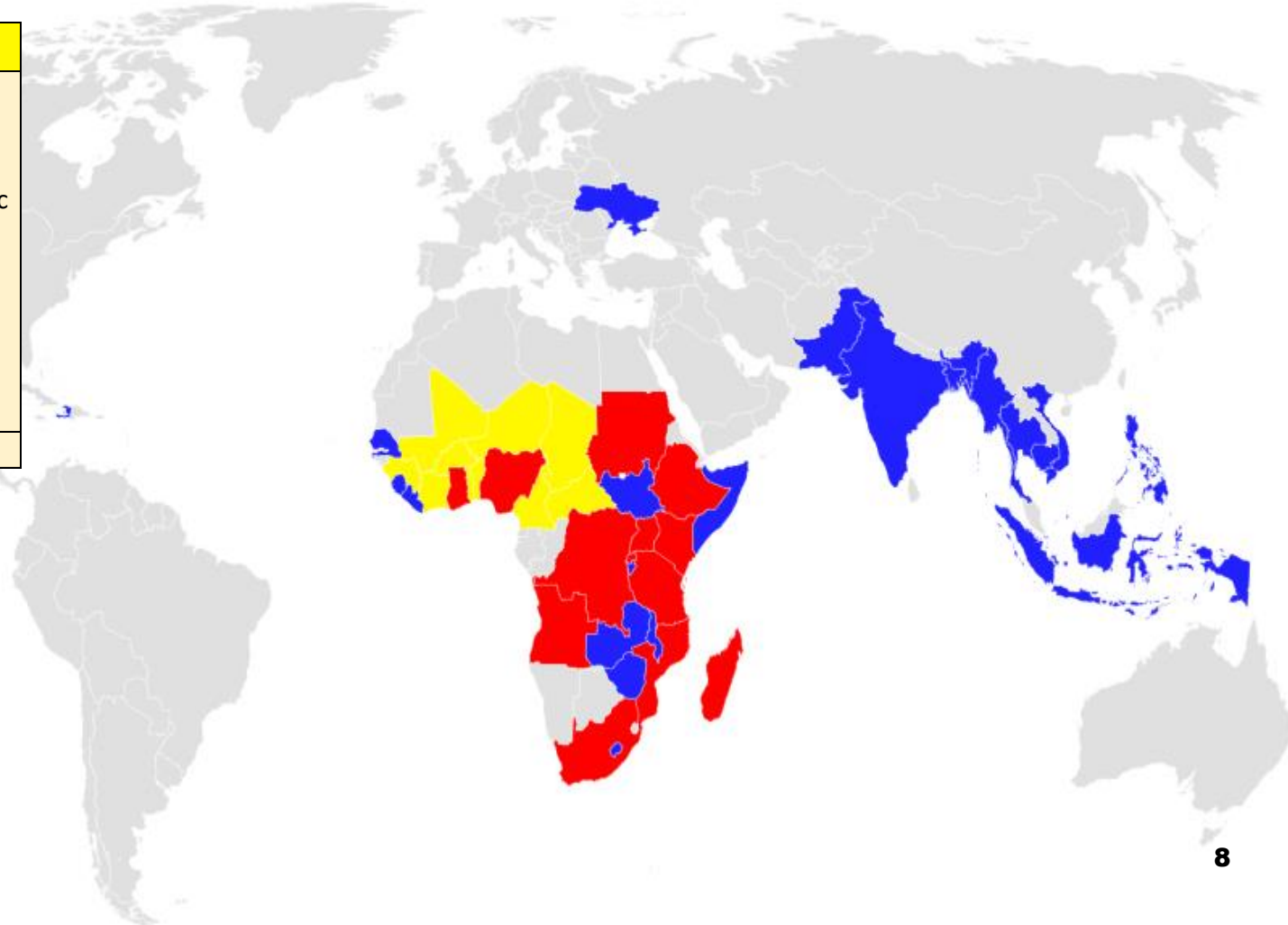
# Three Service Providers to Support our Approach

# 45 countries in scope for this effort

**Rationale for selection:** Countries with (1) Highest burden and levels of investment for HIV, TB and malaria. (2) C19RM allocation of >US\$ 20 million, = 90% of the C19RM investment envelope.

■ IQVIA Solution (Pty) LTD ■ Palladium International LLC ■ KPMG Cote d'Ivoire

Palladium International LLC	IQVIA Solutions (Pty) LTD	KPMG Cote d'Ivoire
Bangladesh	Angola	Benin
Burundi	Ethiopia	Burkina Faso
Cambodia	Kenya	Cameroon
Haiti	Madagascar	Central African Republic
India	Mozambique	Chad
Indonesia	Rwanda	Côte d'Ivoire
Lesotho	South Africa	Guinea
Liberia	Sudan	Mali
Malawi	Tanzania	Niger
Myanmar	Uganda	Togo
Pakistan	Congo (Democratic Republic)	<b>10 countries</b>
Papua Guinea	Ghana	
Philippines	Nigeria	
Senegal	<b>13 countries</b>	
Sierra Leone		
Somalia		
South Sudan		
Thailand		
Ukraine		
Vietnam		
Zambia		
Zimbabwe		
<b>22 countries</b>		





# Service Providers

The **Supply Chain and Health Services Spot Checks** will be supported by service providers selected through a competitive process.

## **IQVIA**

has presence across North, South, East and West Africa with extensive experience conducting supply chain and health facility assessments for the Global Fund and other partners.

## **KPMG Côte d'Ivoire**

provides various professional services including data collection and audit services, throughout Francophone Sub-Saharan Africa (FSA).

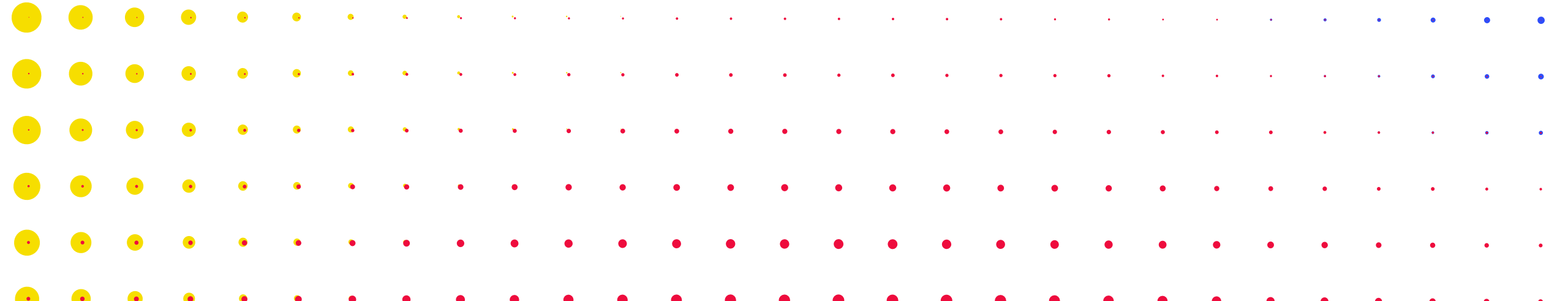
## **Palladium**

has global presence and extensive experience providing supply chain services to government, non-profit, and private sector customers and focuses on monitoring and evaluations, health, supply chain, and data analytics.



# 3

# Methodology



# Methodology

1.

## Desk Review

- Review documents.
- Potential **Key Informants Interviews**.

2.

## Sampling and questionnaire

- **Standard questionnaire**, adaptations if needed (i.e. tracer products).
- **Standard sampling** following the approach below:
  - Define geographic domains based on country population size.
  - Apply representative random sampling per domain and quarter.
  - Facility sampling yield a precision (95% confidence interval) of +/- 7% points per year.
  - Quality assurance/re assessment approach.

3.

## Data collection

- **Logistics Management Information Systems (LMIS) reviews** for tracer health products.
- **Spot checks/On site verifications** of supply chain, service disruptions and systems resilience indicators, using a digital platform.

4.

## Analysis and reports

- Data cleansing by vendors and submission to the Global Fund.  
*Service providers*
- KPI analysis and standard reports  
*The Global Fund team*
- Aggregated analysis of all countries and customized reports.

5.

## Dissemination

- Presentation and discussion of key findings internally.
- Presentation and discussion with country stakeholders (PRs, MoH, CCMs).
- Final report including mitigation plan and actions.

# The Spot Checks provide visibility of in-country supply chain performance and service availability and disruption.

## Supply Chain

### Key performance indicators:

- 1) **On-shelf availability of tracer commodities for HIV, TB and malaria (WHO Pillar 9) and COVID-19 (WHO Pillar 5,6,7)**
- 2) **On-Time-In Full (OTIF)**
- 3) **Stocked According To Plan (SATP)**
- 4) **Timeliness of Facility Reporting to Logistics Management Information Systems (LMIS)**

### Tracer products List

- **HIV, TB and malaria**
  - HIV 1st line drugs, diagnostics
  - Malaria 1st line drugs, diagnostics
  - TB 1st line drugs, diagnostics
- **COVID-19 commodities**
  - Core PPE: Masks, respirators, surgical gloves, apron, face shield
  - Diagnostics: Automated PCR tests, Ag RDTs
  - Therapeutics: Dexamethasone

## Service disruption

### Monitoring of service disruption in health facilities and community sites\*

Specific service records to collect (from 2019 to 2021)

- Outpatient department visits (OPD)
- Antenatal care 1st visits (ANC 1)
- Sick Child Services
- HIV services (ART, Tst, Prev, VL, PMTCT, KP)
- TB services (TPT, Dx, treatment, MDR, contact inv)
- Malaria services (LLIN, Dx, treatment)
- Community outreach or home-visit services
- COVID-19 services

*\*Respond to output indicator 14 COVID-19 M&E framework*

## Systems resilience

### Service Providers

- Availability, COVID-19 vaccination status, COVID-19 cases among facility workers, absenteeism, facility management, correct use of PPE.

### COVID-19 vaccine readiness

- Cold chain equipment available and functional, vaccination availability, Health Care Workers being prioritized.

### Ways of maintaining health services and counter measures

- Changes in delivery strategies for non-COVID-19, essential health services.

### Infection Prevention and Control

- Type of training received in infection prevention and controls.

### Waste management

- Training, dispose of PPE, medical, laboratory and sharps waste safely.

### Facility financing

- Operating budget, bank account availability.

### Reporting and supervision

- Completeness and timeliness of reports, comms available, supervision, use of Logistics Management Information Systems (LMIS), COVID-19 surveillance.

### Community engagement

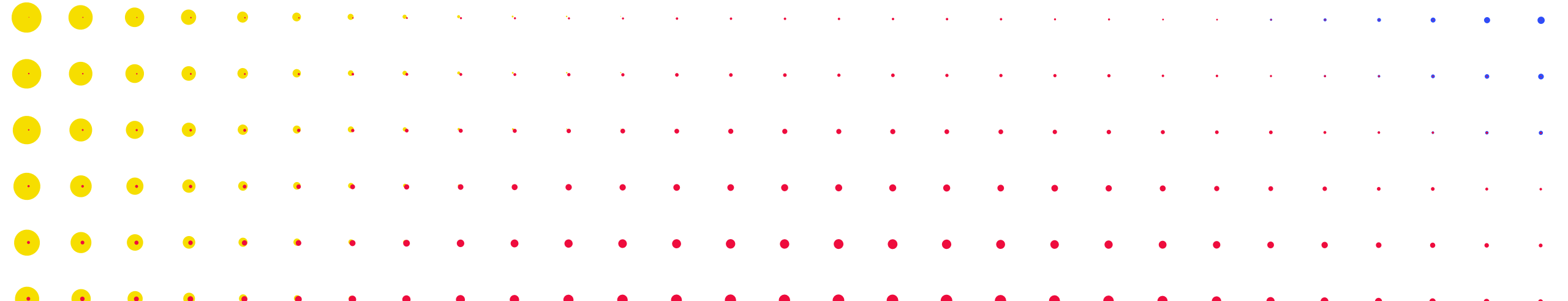
- Community representation and participation at facility.

*\*Critical complementary information on service delivery*

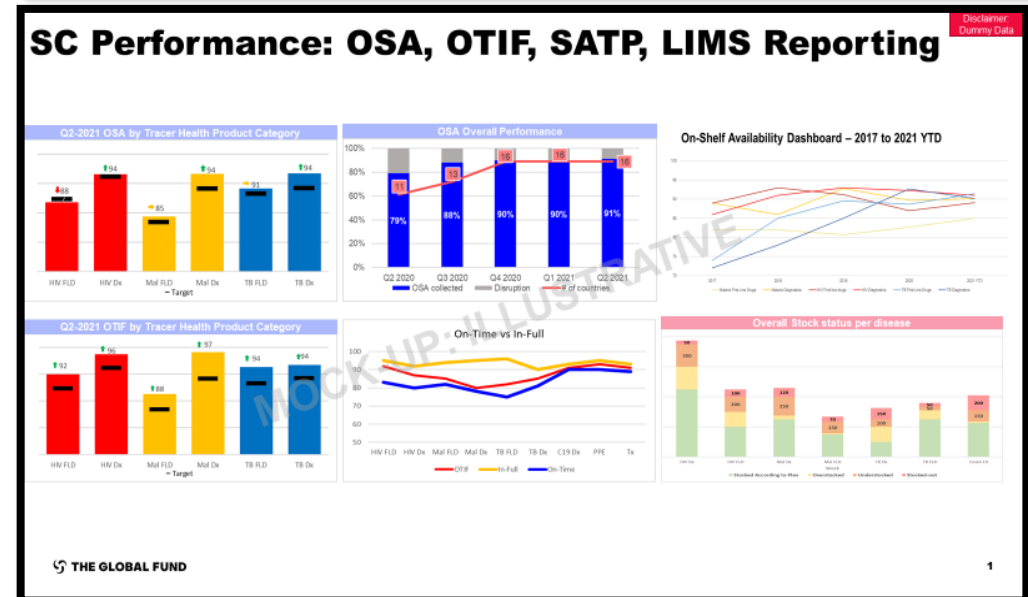
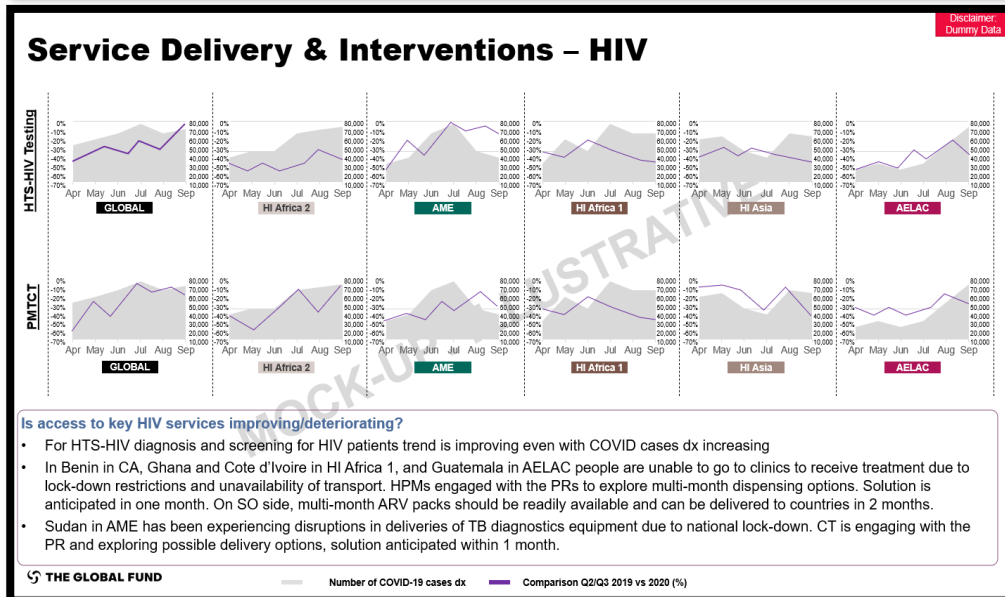
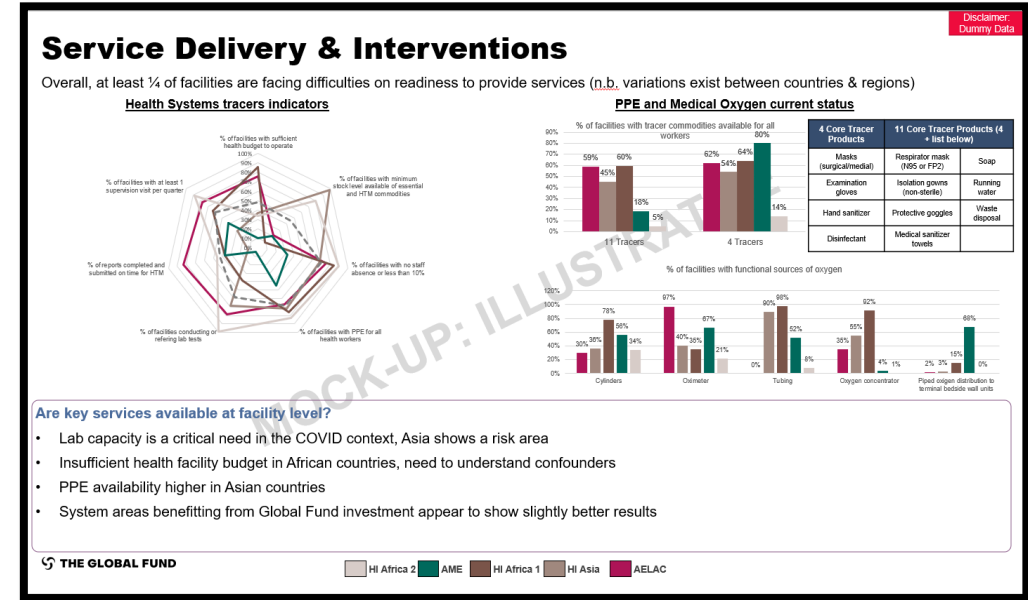
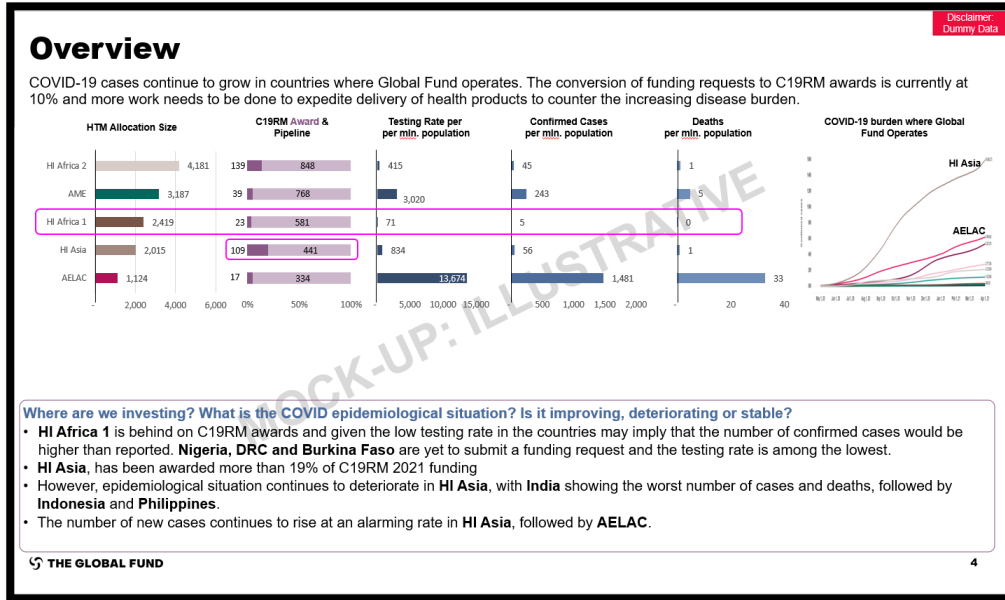


# 4

## How will data look like?



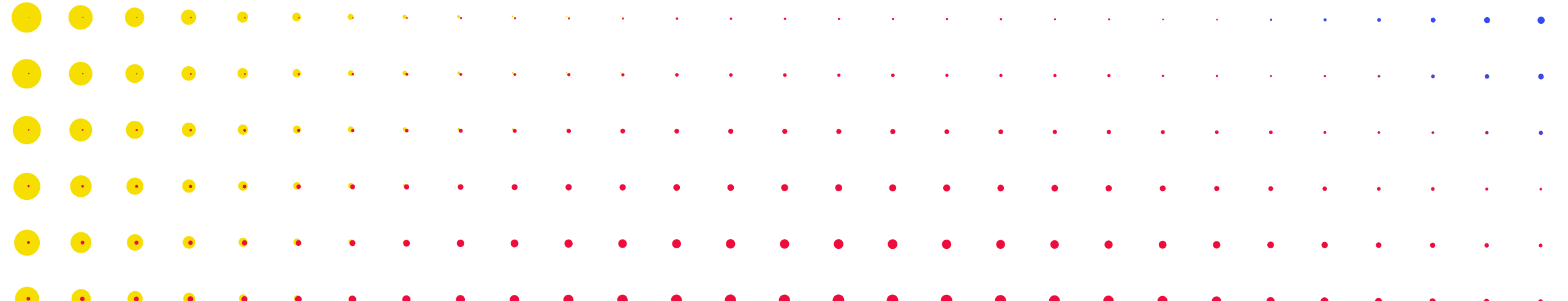
# Expected reports will support improved data visualization and allow for better interpretation and triangulation of data.





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# Implementation Plan

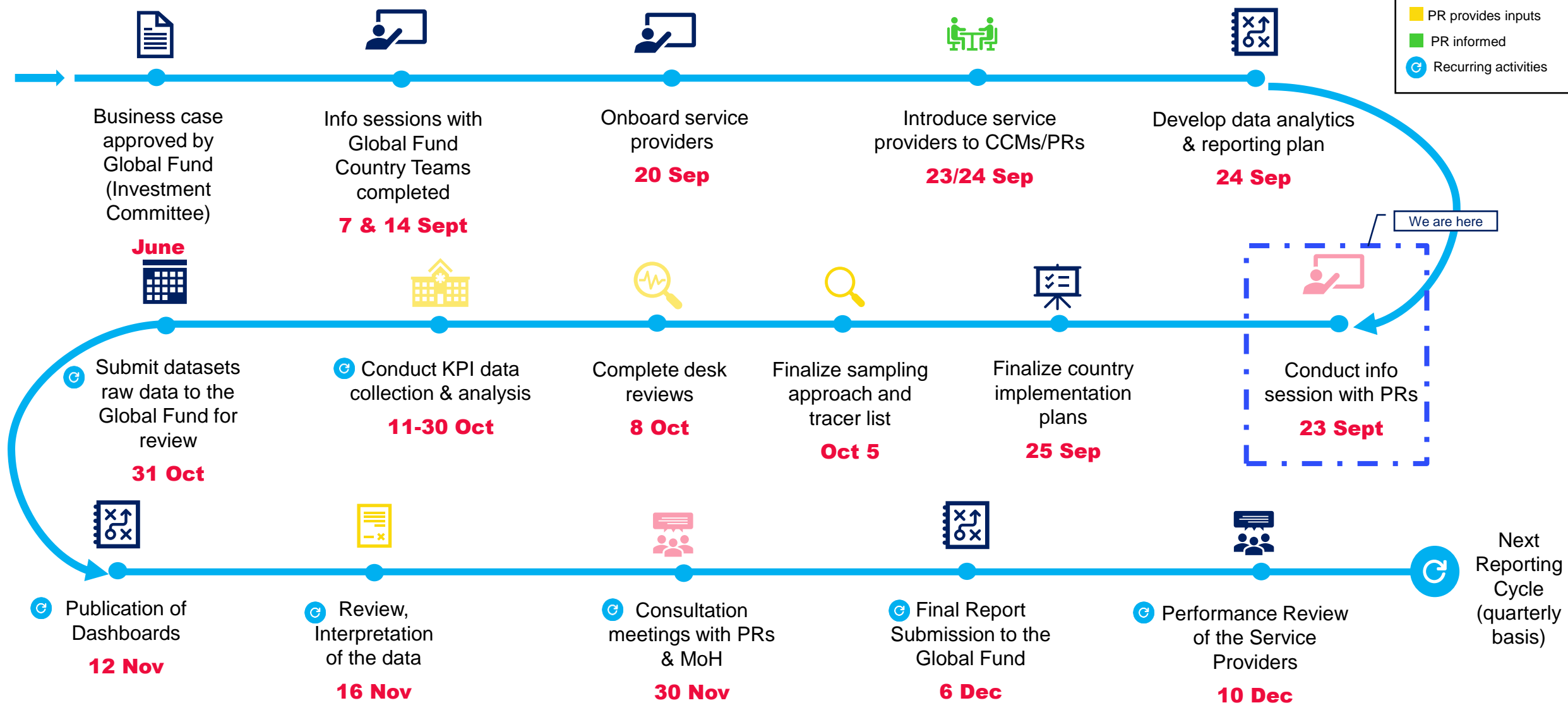


# Project Status Update

## Overall progress and key timelines

**KEY**

- Fully covered by the GF
- PR participates
- PR provides inputs
- PR informed
- 🔄 Recurring activities





# How the Global Fund will engage with Principal Recipients

Activities	Role of PRs with estimate level of effort (LOE)			How the Global Fund Country Teams will support PRs
		LOE	Freq.	
Conduct info sessions with PRs	PRs to participate info sessions	1 hour	One-off	CTs will participate in this session
Secure country approval for service provider's access to Health Facilities and data	PRs to facilitate the approval process	1 day	One-off	CTs will advise PRs when approval is required
Access the Master Facility List (MFL) from MoH	PRs to facilitate this process	2 – 4 hours	One-off	CTs will advise PR when MFL is required
Align on tracer product list for data collection	PRs to review and provide inputs	1 hour	One-off	CTs will share the validated tracer product list with PRs
Identification and validation of data sources	PRs to review and validate	2-4 hours	One-off	CTs will inform PRs on targeted data sources
Determine sample of health facilities	PRs to be consulted on accessibility constraints (security or seasonal) to Health Facilities sampled	2-4 hours	Quarterly	CTs will inform PRs on sample of health facilities
Present preliminary KPI measures & analysis outputs to MoH	PRs to take part of this session	1-3 hours	Quarterly	CTs will validate the results.
Review/validate corrective actions and implementation timelines	PRs to take part of this session	1 hour	Quarterly	CTs will sign off the action plan and track progress against targets/timelines
Dissemination of final reports	PRs to take part of this session	1 hour	Quarterly	CTs will disseminate the final reports

# Additional roles and responsibilities for the Global Fund and the service providers.

## The Global Fund

- Prepares materials and runs information sessions.
- Prepares communications materials.
- Prepares materials and runs trainings of service providers.
- Develops the analytical and reporting plans.
- Provides guidance and oversees development of country implementation plans by service providers.
- Analyzes desk reviews and shares outputs and key findings with CCMs and PRs.
- Coordinates with service providers to prepare for MoH out-brief meeting.
- Conducts supplier performance review on a quarterly basis.

## Service Provider

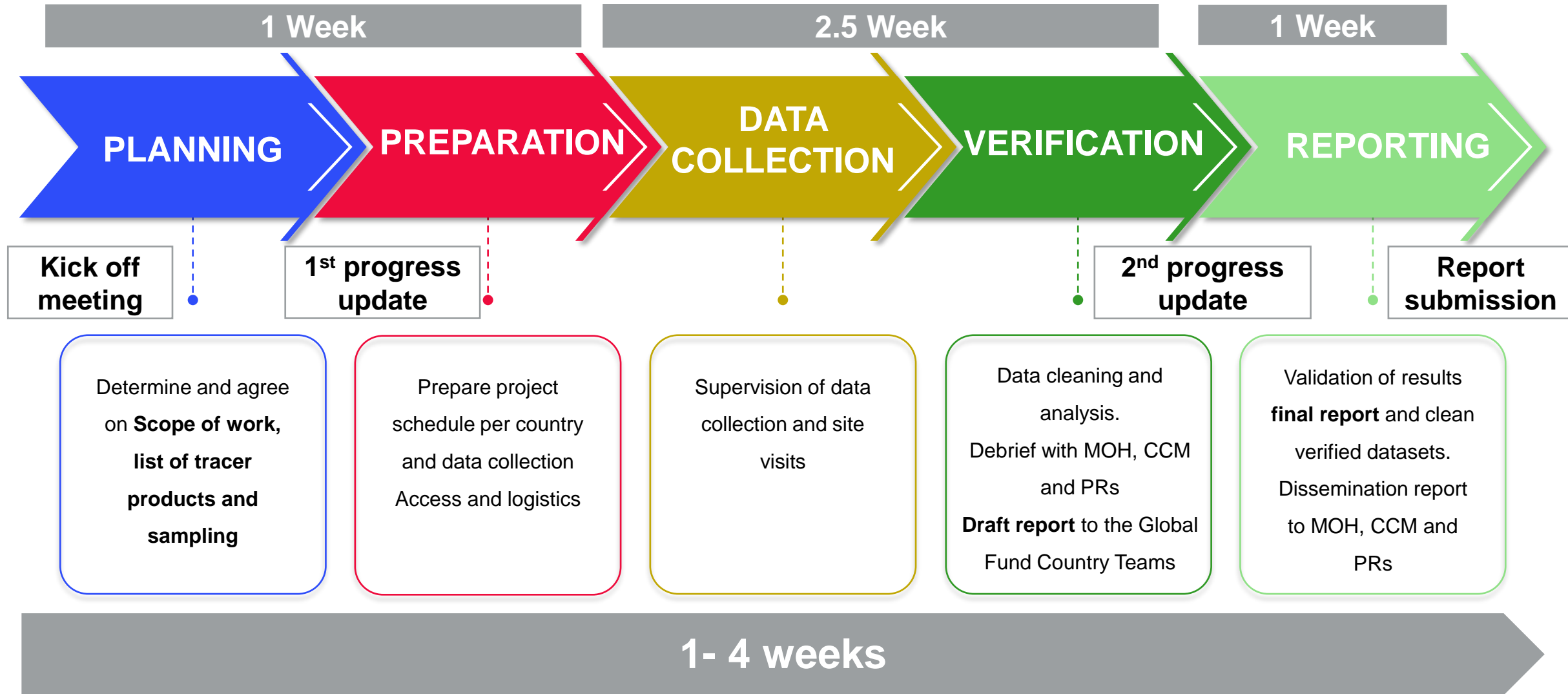
- Collects data per plan in selected facilities.
- Conducts independent reassessment in 10% of sites.
- Prepares survey data sets for analysis.
- Conducts data analyses per approved plan.
- Conducts comparative analysis of the independent reassessment data and survey team data for agreement.
- Where variances are 10% or higher, service provider returns to the specific sites and recollect data.
- Submits raw data.
- Submits summary reports.
- Develops presentation for dissemination.

# Focal Points

A joint team will be available to respond to PR questions on spot checks

Role	Function	Point of Contact (PoC)
<b>Project Manager</b>	Responsible for planning, organizing, and directing the completion of project management activities while ensuring the project is on time, on budget, and within scope.	Moses Muputisi <a href="mailto:Moses.Muputisi@theglobalfund.org">Moses.Muputisi@theglobalfund.org</a>
<b>Technical Supply Chain Lead</b>	Responsible for performance management of data quality, analysis, reports and information timeliness of supply chain data elements	Mouna Jarmouni <a href="mailto:Mouna.Jarmouni@theglobalfund.org">Mouna.Jarmouni@theglobalfund.org</a>
<b>Supply Chain team</b>		Claude Bahati <a href="mailto:Claude.Bahati@theglobalfund.org">Claude.Bahati@theglobalfund.org</a> Samira Hadana <a href="mailto:Samira.Hadana@theglobalfund.org">Samira.Hadana@theglobalfund.org</a>
<b>Technical Health System Lead</b>	Responsible for performance management of data quality, analysis, reports and information timeliness of health systems data elements	Maria Petro Brunal <a href="mailto:Maria.PetroBrunal@theglobalfund.org">Maria.PetroBrunal@theglobalfund.org</a>
<b>Health System team</b>		Shivam Gupta <a href="mailto:Shivam.Gupta@theglobalfund.org">Shivam.Gupta@theglobalfund.org</a>
<b>Sourcing team</b>	Responsible for administrative arrangements, payments and expenditure tracking	Manon Van Rijswijk <a href="mailto:Manon.VanRijswijk@theglobalfund.org">Manon.VanRijswijk@theglobalfund.org</a>
<b>Country Teams</b>	Responsible for introducing service providers to Principal Recipients and Country Coordinating Mechanism, providing key contacts and reviewing findings and reports	

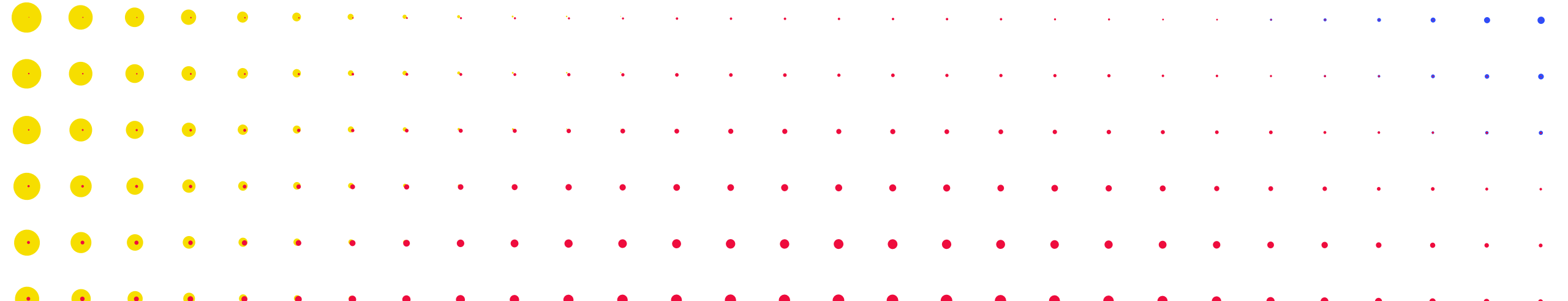
# Routine data collection and reporting timeliness





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# Key Timelines and Actions



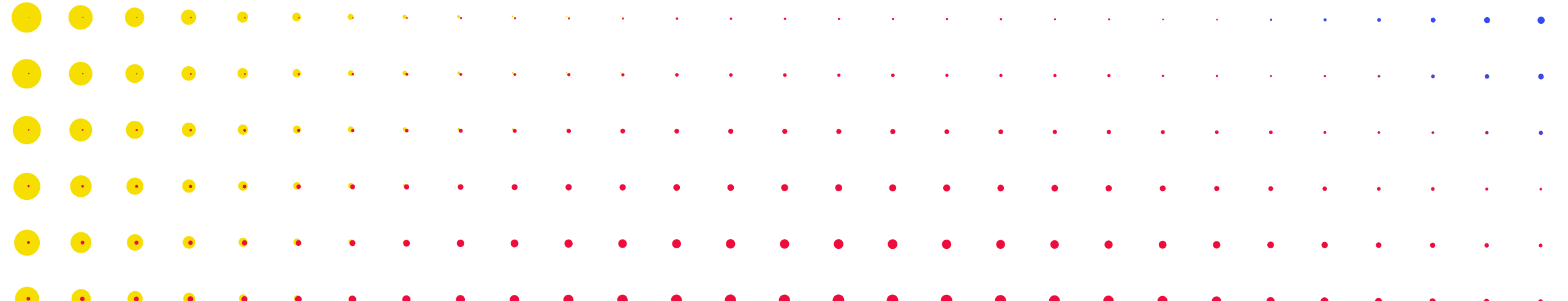
# Timeline for key next steps

Action	Date
The Global Fund conducts information session for PRs in English	23 September
Country Teams to introduce service providers to PRs (and CCMs?)	23/24 September
The Global Fund conducts information session for PRs in French	28 September
Service Providers begin desk review, data collection and analysis	1 October
Service Providers submit report and datasets to the Global Fund	31 October



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# Questions?



# Thank you for your participation



The Global Fund to Fight  
AIDS, Tuberculosis and Malaria

+41 58 791 1700  
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