Letter from the Director

We are in the final stretch of the BID Initiative initial grant, and this phase is bittersweet for me. While we have celebrated many achievements over the last five years, BID’s journey has also been full of personal milestones as well. The BID team has truly been like a second family, and the last five years have been full of both ups and downs. We have welcomed new additions as our own families have grown, celebrated career transitions, and weathered our share of difficult times too. We are grateful for the opportunity to share these moments with you. As we wrap up work in our demonstration countries, I cannot help but look back over the lifespan of this project.

I am reminded of our early days and the ambitious scope of the grant, balancing an aggressive timeline, our goal of scaling nationally, and our aim of building country ownership. We knew that digital platforms would play a role but did not yet know how these pieces would fit together. I am also reminded of the launch of Tanzania’s electronic immunization register. The first time I saw a demonstration, it was almost surreal. I remember watching a health worker maneuver between dashboards as she entered new patients in the system. It was exhilarating and validating to see a tool, which was conceived alongside the Government of

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The BID Learning Network (BLN) is intended to be a
Tanzania, come to life in this nurse’s hands. And in Zambia, I am reminded of our showcase event attended by First Lady Esther Lungu. Her unwavering commitment to maternal and child health manifested in her support for the work BID was doing with the immunization program of the Ministry of Health.

Even as this phase of the BID work draws to a close, we still have many exciting learnings to share, including an encyclopedia of technical lessons that will be available later this spring on the BID website, a series of data analyses that summarizes the impact of data quality and use interventions in each country, and an interactive story that chronicles BID’s journey and impact. We have also already started to build off the work from BID through Immunization Data: Evidence for Action (IDEA) and the Data Use Partnership (DUP).

And, as always, you can continue to follow our journey by finding us on Facebook and Twitter, and by subscribing to our blog.

Sincerely,

Laurie Werner
Global Director, BID Initiative
PATH

Si vous désirez recevoir la version française de notre bulletin d'information, veuillez vous abonner ici.

Zambia looks back on journey, celebrates the completion of rollout in Southern Province

platform where participants can contribute ideas, share experiences and actively participate, helping each other as they face similar challenges.

OFFSET

NOTEWORTHY BLOG POSTS

Success roles out in Southern Province

BID partners with Ministry of Health to fight cholera outbreak in Zambia

Health workers in Tanzania become data use champions, set national example

Planning for compasses, not maps: BID celebrates a culture of learning, applies principles of adaptive management

OFFSET

NOTEWORTHY RESOURCES

BLN webinar: Electronic immunization registry—lessons from Kenya

BLN discussion meeting report: 19–22 September 2017

Accelerating harmonization in digital health

BLN webinar: technology solutions for routine immunization challenges in Nigeria
It has been an exciting, challenging, and sometimes unpredictable four years developing and deploying data quality and use interventions in Zambia. This March, we celebrated the completion of rollout in Southern Province, where more than 400 health workers have been trained on the interventions and more than 80,000 children have been entered into the Zambia Electronic Immunization Register (ZEIR). The MOH has made some remarkable achievements and has supported and worked closely with our team at all levels.

Health workers have also contributed greatly to these achievements. Their willingness to quickly embrace ZEIR is changing the culture surrounding data use, as they increasingly use data to inform their day-to-day responsibilities and decision-making.

“By using ZEIR, we have identified opportunities to make improvements in clinic quality, such as improving our charts and vaccine administration,” says Keizluck Mweemba, Choma District Health Information Officer. “For the families, this tool helps ensure that immunizations are up to date, even as families move or experience changes in health care coverage. And finally, for our communities, I envision that in the long term, there will be less expense on immunization-related diseases.”

When asked what he thinks the biggest success has been over the course of BID’s journey in Zambia, Dr. Francis Dien Mwansa, the National Expanded Programme on Immunization Manager for Zambia’s MOH, said: “Everyone [in the health facilities and MOH] agrees that our involvement in the User Advisory Group, which was a large part of how change management worked, has been the biggest positive. This is because it allowed the health workers
to provide input that would be taken on board and used. It empowered the health workers with knowledge and decision-making abilities; they saw they had the power or influence to change things, which was important. The tool is user-based, and having the buy-in from the users, built trust in the tools we were developing.”

Across the province, health workers are actively using ZEIR and will continue to do so as the government plans how to move these innovative and effective tools to other parts of the country.

Iterating on open-source software: leveraging lessons from Kenya

The BID Initiative has long celebrated the principles of sharing and exchange. When Zambia embraced the Open Smart Register Platform (OpenSRP) for the development of ZEIR, one of the many benefits was the chance to leverage past and future iterations. OpenSRP’s modular design draws on a community of global developers and implementers, which allows each new version of the app to be more functional and affordable than the last. In Kenya, for instance, the International Training and Education Center for Health (I-TECH) localized ZEIR for use in Siaya County. The resulting Kenya Immunization Platform was the subject of a recent BID Learning Network webinar which featured Jeremiah Mwendwa Mumo, the Strategic Information Manager with the Ministry of Health Kenya within the Division of Health Informatics Monitoring and Evaluation. BID is also documenting this adaptation process and these learnings in a
case study that outlines lessons from the three use cases of Pakistan, Zambia, and Kenya.

Open-source platforms empower countries to customize, grow, and manage electronic immunization registers through shared learnings and reduced development costs. We hope that this recent webinar and case study, which will publish later this quarter, will inform other countries and ministries of health as they invest in similar health information systems.

Data Use Partnership builds on BID, uses digital health to improve health care in Tanzania

In February, members of the Government of Tanzania and staff from PATH’s BID Initiative and Digital Health teams gathered for a retreat to kick off work planning for the current phase of the Data Use Partnership (DUP) project—implementing Tanzania’s Digital Health Investment Road Map. Collaboratively developed by over 80 partners, this Road Map outlines 17 costed investment recommendations for strengthening health data quality and use, which will lead to improved health care delivery and outcomes across Tanzania.

The DUP team—led by the Government of Tanzania with catalyst funding from the Bill & Melinda Gates Foundation and technical implementation support from PATH—is currently focusing its work in three areas:
1. **Strengthening governance and policy:** By strengthening governance processes and policies for digital health, DUP is creating an enabling environment for the successful, long-term implementation of the entire Road Map.

2. **Improving the use of information in primary care and supervision:** DUP will digitize primary health care information and processes to better support health workers who treat patients at the frontline, supervisors at the midline, and policymakers at the national level.

3. **Designing and implementing a digital health framework:** To support data consistency and comparability across a range of different platforms, DUP is supporting the creation of a health enterprise architecture, an administrative area registry, and a health and social services worker registry.

DUP builds on previous and ongoing initiatives and work, including the groundwork laid by the BID Initiative in Tanzania. During the retreat, which took place between February 26 and March 2, in Bagamoyo, Tanzania, participants aligned on the project strategy, principles, vision, and activities for the first year of work. They also identified opportunities for cross-collaboration between technical teams. DUP is calling on donors and partners to join in taking up the Road Map recommendations to achieve its vision and to ensure that everyone, everywhere, in Tanzania has access to high-quality health care.
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