USAID GLOBAL HEALTH SUPPLY CHAIN PROGRAM Procurement and Supply Management



USE OF ROUTINE SUPPLY CHAIN DATA TO IMPROVE ROLLOUT OF COMMUNITY CASE MANAGEMENT FOR MALARIA IN SIAYA COUNTY, KENYA

A new health commodities dashboard for malaria has contributed to gains in malaria control, with community health volunteers trained on case management and reporting into the Kenya Health Information System (KHIS).

AUTHORS: MIRIAM OKARA, FELIX TINDI, LILLIAN GITAU, VICTOR SUMBI, AND MILDRED SHIESHIA

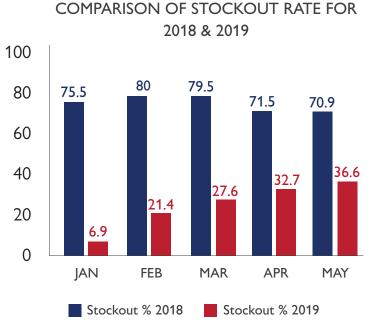
BACKGROUND AND PROBLEM

- Nearly 70% of Kenya's population is at risk of malaria. • In 2019, 5 million people were treated for malaria. • Malaria affects most households in Kenya's Lake Region. • Inadequate data from 186 community units (CUs) resulted in frequent stockouts for antimalarial medicine and test kits that

- affected health service provision in communities and facilities.

APPROACH

- During quarterly stock status and data review meetings at county and sub-county levels, health management teams use the dashboard to monitor consumption and available stock, and to identify CUs flagged for not reporting or with data quality issues.
- The sub-county pharmacists visit the community health extension worker to review consumption data and provide additional training.



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• The Ministry of Health launched a health commodities dashboard in the KHIS that aggregates and analyzes data from linked facilities. • The dashboard enables visualization of reported numbers, making it easy for decision makers to analyze emerging patterns and act quickly. • It measures CU supply chain performance based on reporting, data quality, and stock status and generates resupply quantities for anti-malarial medicine and malaria rapid diagnostic tests.

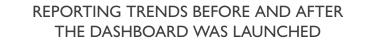
RESULTS

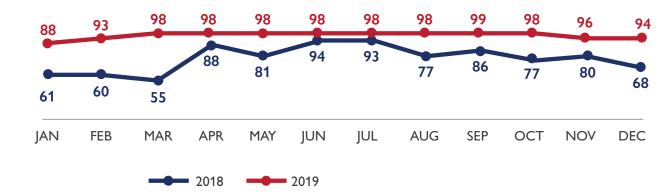
From 2018 to 2020, the CU module in Siaya County contributed to these achievements:

- The data reporting rate for malaria commodities increased from 61% in January 2018 to 94% in December 2019.
- Stockout rate for artemether/lumefantrine tablets in CUs decreased from 75.5% in January 2018 to 36.6% in May 2019.
- Better quality CU consumption data facilitated the rollout of community case management for malaria from 75 to all 186 CUs.

CONCLUSION

- A relatively simple module and a brief training session can facilitate management of stock through improved data quality for evidence-based decisions.
- This results in fewer stock-outs and more medicine available to more people.





Community case management increased from 75 CUs in 2018 to 186 CUs (100 percent) in 2019. Improved quality of consumption data in the Health Commodities Dashboard helped Siaya County to quantify malaria commodity requirements.



Pharmacist conducting a training to community health workers on malaria commodity reporting tool

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