

THE IMPACT OF CIP:

Catalyzing EVM and Leveraging Broader Health Systems



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BACKGROUND

Assessing effective vaccine management (EVM) is an essential process for collecting data and identifying opportunities for improvement in a country's health infrastructures. For participating nations, it is also the very first step in developing a cIP, or continuous improvement plan, an ongoing review and strategy to implement necessary changes that will address gaps, improve the vaccine supply chain, and strengthen health systems. Developing, implementing, and monitoring this plan takes multi-level coordination, collaboration, and commitment.

The COVID-19 pandemic brings this work even more sharply into focus. While demand for immunization and the related systems are of increased importance at this moment, countries working on building and implementing cIP face similar challenges despite geographic and development differences. Thematically, these challenges include a lack of commitment, guidance, and resources.

While the assessment element of EVM is given priority, the cIP is treated as an afterthought. This results in a lack of involvement or inclusion of key stakeholders, insecure funding, and weak data analysis that clouds the context required for accurate problem definition and solution identification. In practice, however, the EVM2 assessment is the essential first step of the four-step cIP process; the 'assess' stage (see figure 1) uncovers important shortcomings in the performance of a country's immunization supply chain. The remaining three stages—plan, implement, and monitor—are necessary for a country to realize its vaccine supply chain strengthening goals.

The intention of this case study is to reframe cIP as a roadmap of action rather than a follow-up step to EVM2, using three countries as exemplars to demonstrate how cIP planning, implementation, and outcomes can be successfully achieved leveraging the situational data collected from the assessment stage.

Highlighting Stories of Impact

In examining the cIP processes that have taken place in three exemplar countries—Ethiopia, Iraq, and Pakistan—this case study will identify important lessons and advice for country teams developing their improvement plan. Overarchingly, these countries exemplify the importance of upfront guidance and training (a teach first, practice second approach) and the benefit of framing EVM assessments as an important first step in the cIP process, rather than an essential, standalone task that leads to vague, unclear outcomes. As countries around the globe strengthen vaccine supply systems, a cIP serves as their roadmap to contribute to improved supply chain systems and ultimately, healthier nations.

PIONEERING THE CIP IN IRAQ

As the first country to use the EVM2 assessment tool, the Iraq team pioneered the cIP development and implementation process. The goals were clear—emphasize collaboration at all levels, determine clear recommendations to strengthen the vaccine supply chain, and ensure that the completion of the process involves local ownership and commitment.

The assessment itself is an intricate undertaking, and the resulting data analysis is complex; synthesizing several inputs and collaborating with a large number of key stakeholders presented a logistical and strategic challenge. Undeterred, the Iraq team consulted with UNICEF, the MoH, WHO, EMPHNET, and other key partners in 2019 to develop a template for cIP that has gone on to be adapted by other countries.

Over the course of two national workshops, a mix of national leaders and global partners gathered to share draft plans for three zones (Central & South, conflict, and North) along with recommendations distilled from situational analysis data. The heatmap from the EVM2 assessment was especially vital to determining the



Left: Iraq's global and country team during the EVMA 2.0 workshop (June 2019).; Right: The international Expert and National EPI manager conduct an EVMA assessment in Baghdad. (July 2019)

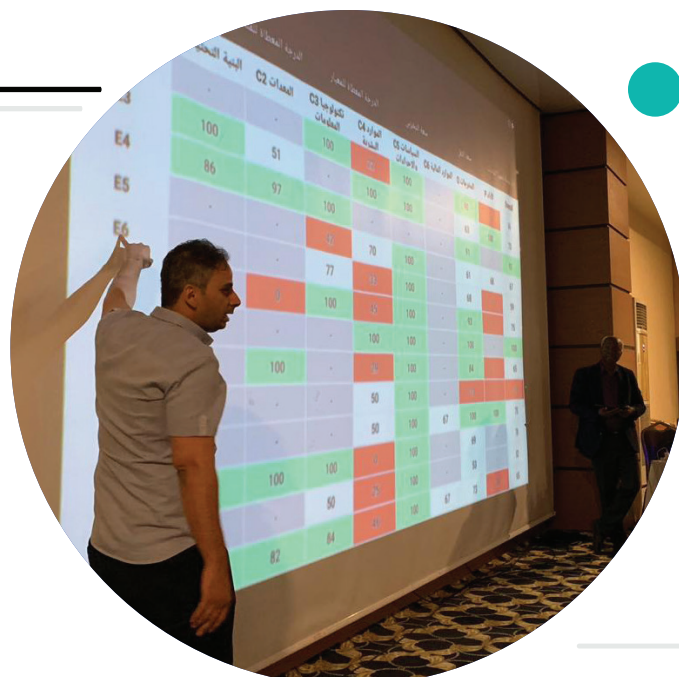
actions and recommendations for the cIP, presenting visual feedback per facility as well as an aggregate reflection of where Iraq stood post-assessment. Group discussions gathered diverse experts with varying experience with supply chain management, training abilities, and managerial experience to determine up to three practical activities under each recommendation.

At its conclusion, the collaborative working sessions led to a shared roadmap or action plan for the country that identified roles and responsibilities, named major priorities, and unified stakeholders around a shared vision of how to move forward. While the inclusion of national or global level partners was essential to generating commitment, the Iraq team prioritized a bottom up approach, wherein local leaders received clear guidance for their responsibilities in implementing the cIP. "You could hire a consultant or build capacity in house," noted UNICEF Immunization Specialist Alaa Rahi. "It's important for stakeholders to have a plan that guides those on the ground."

At the subnational level, cIP implementation enhanced cooperation with key stakeholders and led to improvements in the vaccine forecasting

process. This level of cooperation was reflected at the ministry level institutions as well, including the vaccine governmental procurement agency (Kimadia), financial department, human resource management departments, senior leadership, UNICEF, WHO, and funders. Ultimately, the decision makers paid more careful attention to the impact of cIP on strengthening vaccine supply chain systems and achieving the main ISC objectives of quality, availability, and effectiveness. The tremendous effort from Iraq in 2019 continues to derive benefit, allowing the country team to develop its supply chain strategies and health plans for the next three to five years, improving team capacity and ownership, and fostering individual understanding as well.

According to Rahi, "Even as an individual, this process has helped me prioritize and understand what is needed on that ground and how to be strategic in our collaboration for cIP over the next few years!"



The National team training on EVMA 2.0 (Heat Map interpretation to actions and recommendations that fit into continuous improvement planning) session. (June 2019 in Erbil, Iraq).

As pioneers of the cIP process, the Iraq country team felt a deserved sense of pride, ownership, and partnership. Ultimately, the cIP proved to be an effective tool to foster effective communication on the ground, to improve national level strategy in ways that could be easily translated to local context, and to strengthen partnerships and collaboration at every level.

PARTNER INCLUSION & PLANNING AHEAD IN ETHIOPIA

Strengthening a country's health systems is a countrywide and long-term collaboration that requires commitment at all local, national, and global level. For Ethiopia, the country team understood cIP to be a roadmap of improvement, within which the EVMA provides necessary inputs and the stakeholders are champions of continued commitment and dedication to implementing needed improvements.

There are many milestones that have been achieved during the period of continuous improvement that deserves pride, such as the introduction of the Web-based Vaccine Supplies Stock Management system in all provinces warehouses and most of the districts vaccines stores, increasing vaccine storage capacity, provision of cold chain equipment according to gap analysis, and rehabilitation of vaccine stores.

— DR. FIRAS, NEPI MANAGER/MOH-IRAQ

To establish roles and responsibilities early on and create a sense of ownership among all stakeholders, Ethiopia conducted a partner mapping exercise at

the cIP development workshop. This determined who would be involved, what parts of the process they would lead, and a feasible timeline. An impressive ninety stakeholders were in attendance—including the MoH, relevant NGOs and partners, the pharmacy team, GAVI, EPI colleagues, and many more.

“Participants were sent a detailed, well-organized document based on the iSC strategy as a pre-read, and during the session, key stakeholders presented global and regional updates to give context to Ethiopia's progress,” noted Gulilat Tafara, EPI Logistics Officer for the FMOH. “That level of organization and inclusion was very motivating for us.”

With a large number of stakeholders, it can be admittedly difficult to reach consensus or align interests. Ultimately, Ethiopia benefitted from having diverse knowledge and perspectives in the room—from in-country experts to global partners—that brings to light new details to be incorporated into the cIP. Beyond idea exchanges, partners extended their support by deploying technical assistants to



Stakeholders listen attentively at the Dissemination and cIP development workshop with the FMOH in Ethiopia

the Ministry of Health, Ethiopian Pharmaceutical Supply Agency (EPSA), Regional Health Bureaus and country zones to support the assessment, supporting the development and implementation of the cIP, improving iSC workforces and leadership capacity and securing ongoing financial support.

Ethiopia's country team exemplifies that the road to health system strengthening relies on thoughtful planning—completing the EVMA, turning data analysis into strategies for improvement, including key stakeholders early on, and commitment to implementation with opportunities for engagement and ownership.

SUB-NATIONAL FOCUS AND OWNERSHIP IN PAKISTAN

The importance of building capacity at the local level is exemplified by Pakistan's provincial focus. While most countries involved in the EVM initiative have a national immunization system, Pakistan uniquely runs a centralized coordination network while focusing assessments and improvement plans at the provincial level. Between June 2019 and March 2020, the country team conducted both national and targeted EVM2 assessments to help provincial leadership identify and address gaps in service of strengthening health and cold chain systems.

“Consistent and continual assessment ensures that any problems won't get worse and that changes or improvements gained as a result of the CIP are not diluted nor lost over time.”

– TARIKU BERHANU, IMMUNIZATION OFFICER, ETHIOPIA

Pakistan's provincial focus ensures that sub-national contexts are involved in both problem identification and solutions finding, while also illustrating commonly experienced challenges throughout the country. At the sub-national level, leadership is focused on harmonizing the elements of the supply chain system, improving distribution processes, building capacity for cold chain maintenance teams, and addressing gaps in human resources, including staff recruitment.

Beginning with the EVM2 assessment and throughout the cIP process, local leadership still benefits from the inclusion of key stakeholders at all levels...(national, government, and JSI)

“Many countries do EVM but local challenges are overlooked when developing improvement plan that is usually national in nature. Allowing the provinces to develop their own cIP allows them to focus on the unique local peculiarities and determine how they want to address their gaps,” notes Eshioramhe Kelobo, Immunization Specialist for UNICEF. As a consultant who has advised on both the EVM1 and EVM2 processes in five countries, Kelobo plays an advisory and support role throughout the cIP process, ensuring that local capacity and ownership are reinforced. “Pakistan is very different from other countries. Each province has a significant level of autonomy and peculiarities that must be considered.”

That autonomy is supported by the flexibility of the EVM2 assessment and the resulting cIP, which allows the country team to tackle issues at a sub-national level without limiting the scope. Province-specific cIPs reinforce sub-national ownership of the process and its outcomes, while the aggregate inputs uncover national gaps or identify country progress.

As of July 2021, Pakistan's country team is supporting provincial leadership in the infancy stages of securing funding for implementation.



Left: cIP workshop in Iraq, 2020;
Right: EVM Assessment Training in Iraq, 2020

VACCINE SUPPLY CHAIN STRENGTHENING THROUGH STRATEGIC COOPERATION

Each country that embarks on the EVM2 assessment as part of cIP faces unique challenges and envisions specific goals. The success accomplished in Iraq, Ethiopia, and Pakistan illustrates that the success of a cIP is dependent on three essential principles: stakeholder inclusion, cooperation, and commitment; the development of a data-informed roadmap; and local ownership through capacity building.

Stakeholder inclusion, cooperation, and commitment

Throughout the four cIP steps—assessment, planning, implementation, and monitoring—mapping who must be involved at all levels and how is an essential primary planning step. cIP requires multi-level cooperation and commitment in order for systems strengthening goals to be achieved. Commitment at the national and global levels instills local confidence that the intricate and complex tasks required at the sub-national level ladder up to national improvements. From initial EVM2 trainings to cIP monitoring, keeping stakeholders aware of key challenges, updates, and

successes ensures that the right guidance, resources, and support are available along the way.

Developing a data-informed roadmap

Once an EVM assessment is complete, country teams move from data collection to data translation. As the basis of the cIP, EVM2 in particular empowers assessment teams by putting necessary information at their fingertips. The simplified, immediate recommendations give clear visual cues as to where progress has been made or stalled. The ability to delve into deep detail or to see a bird's eye view of the assessment score helps country teams move into the cIP development phase with initial goals, gaps, and recommendations. With the beginnings of a roadmap complete, the country then gathers a diverse group of expertise to develop a thorough strategy for implementation informed by data, finalizes the key recommendations through consensus, and ensures the plan is shared or presented to key decision makers who will endorse, support, or fund the cIP implementation.

Local ownership through capacity building

Providing guidance to local teams through the cIP process ensures that the ground-level improvements can be addressed and completed confidently by sub-national teams. At the outset of the process, this requires training workshops for data collection and translation using EVM2. Throughout the cIP implementation, it is also necessary to see tangible commitment from national stakeholders (government and ministries) as well as global partners and funders. Demonstrations of commitment (through participation, resources, and funding) strengthen confidence in the process and in achieving shared goals.

For further information, please visit <https://www.technet-21.org/en/topics/evm#decision-makers> or contact Olamide Folorunso, Health Specialist, Programme Group (PG), UNICEF HQ (ofolorunso@unicef.org).

