

Zambia Digital Community Health Project (ZDCHP)

Phase Two to Phase Four Implementation Concept Note





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Abbreviations

AMREF	Amref Health Africa
CDC	Centers for Disease Control and Prevention
CHAZ	Churches Health Association of Zambia
CHIP	Community Health Information Platform
CHU	Community Health Unit
CHW	Community Health Worker
EPI	Expanded Programme on Immunization
HMIS	Health Management Information System
ICT	Information and Communications Technology
IHM	IHM Southern Africa
M&E	Monitoring and Evaluation
MCH	Maternal and Child Health Care
MOH	Ministry of Health
NCDs	Non-Communicable Disease
NTDs	Neglected Tropical Diseases
OCR	Optical Character Recognition
QED	QED
TBI	Tony Blair Institute for Global Change
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
ZCHIP	Zambia Community Health Information Platform
ZDCHP	Zambia Digital Community Health Project

1. Introduction

The Zambia Digital Community Health Project (ZDCHP) is a three-year initiative funded by a \$3.4 million grant from the Bill and Melinda Gates Foundation. The project aims to support the growth and modernization of Zambia's community health system. Launched in November 2021, the project has four intermediate outcomes:

- Architecture/design defined for digital community health system.
- Evidence generation through pilots.
- Robust scaling/national rollout plan that all stakeholders are aligned on and that locks in future funding sources for sustainability.
- Talent plan for increased capacity at the Ministry of Health (MoH), supported with non-governmental partners to coordinate digital community health implementation.

Once achieved, these outcomes will produce a functional, user-oriented CHiP with prioritized disease condition data collection modules that the MoH leads, pilots and begins to scale with funding from multiple sources, and will ultimately contribute to lowering the burden of disease through increased coverage and quality of care.

2. Background

Zambia has a long history of community health workers (CHWs) playing a vital role in delivering primary health care. However, the CHW workforce is under-resourced and lacks access to essential tools and information. This has led to disparities in health outcomes, with those living in rural areas and marginalized communities often being the most affected.

The ZDCHP aims to address these challenges by developing a digital community health system that will provide CHWs with the tools and information they need to deliver high-quality care. The system will be designed to be interoperable with other digital health platforms in Zambia, ensuring that data is shared and used effectively to improve health outcomes.

3. Project Strategy

The ZDCHP uses a phased approach to achieve its goals and objectives. The first phase of the project focused on defining the architecture and design of the digital community health system. This involved conducting a series of consultations with CHWs, health care providers, Ministry of Health programmatic staff and other stakeholders to understand their needs and priorities with regard to community health services.

The second to fourth phase of the project will focus on generating evidence on the effectiveness of the digital community health system through pilots in selected districts. The pilots will test the system's functionality and usability and collect data on its impact on health outcomes.

4. Current Status

The ZDCHP has now entered the second and third phase of implementation. In the second and third phase, the ZDCHP is working with various sub partners, as summarized below, to develop and deploy the Community Health Information Platform in selected facilities across Katete, Ndola, Mpongwe, Kazungula and Lusaka Districts.

- **ArguSoft:** They will develop the main digital community health platform as well as a supplementary optical character recognition solution. This solution will be integrated with the HMIS and other key digital health solutions.
- **QED:** They will develop an optical character recognition solution aimed at helping to assess where an OCR is a more sustainable solution.
- **Digital Treasure:** They are a local digital firm who will support implementation of the above solutions and capacity building with MoH.
- **Busara:** They will independently monitor and evaluate the implementation of the Community Health Information Platform. Please see attached proposal. We will be happy to receive your feedback on what additional questions you would like Busara to answer in the evaluation. Busara will be supported by a local monitoring and evaluation firm whose contracting should be completed before the end of the month. Busara will be supported by a local monitoring and firm.
- **D-Tree:** They will develop a five-year implementation and sustainability plan for the Community Health Information Platform. The implementation and sustainability plan will serve as a resource mobilization strategy as well as a high-level guide for implementing the CHIP beyond the initial facilities.

A number of activities have been planned to achieve the goal of developing CHIP. The activities are tabulated below:

Table 1: Outline of Key Activities

Activity	Methodology and Purpose	Location and Tentative Dates	Key Stakeholders
Kick off meeting	Workshop and field visits to introduce stakeholders to ZDCHP work and get feedback from partners.	Ndola, July to August 2023	MoH program staff (ICT, M&E, CHU, MCH, Malaria, EPI, NCDs/NTDs), MoH district staff, facility staff, community health workers, implementing partners (IHM, E4H, CHAZ), donors (Presidential Malaria Initiative, UNICEF, USAID, CDC)
Field visits for requirements validation	Field visits for ArguSoft and QED to understand the workflows in the facilities where CHIP will be implemented and to review the CHIP technical requirements with the users.	All pilot districts, 31 st July to 25 th August 2023	ZDCHP, MoH district staff, facility staff, community health workers
Field testing with User Advisory Groups (UAG)	Routine meetings with users of the CHIP to test and validate CHIP releases based on requirements and workflows.	All pilot districts, August to September 2023	MoH district staff, facility staff and community health workers
User Acceptance Testing (UAT)	Workshop to conduct thorough testing of the CHIP and endorse it for release.	August to September 2023	MoH program staff, MoH ICT staff, MoH district staff, facility staff, community health workers
Bootcamp	Workshop to train MoH staff on the development, troubleshooting and maintenance of the CHIP	TBA	MoH ICT staff, international and local tech implementation partners
CHIP deployment training	Train the trainers' workshop to equip MoH staff to deploy the CHIP in facilities.	All pilot districts, October 2023	MoH district staff and facility staff
CHiP M&E Baseline Data Collection	Collection of baseline data before CHiP deployment	All pilot districts, October 2023	MoH district staff and facility staff, community health workers
Pre-deployment Assessment exercise	Facility exercise to assess facility status and prerequisites to be satisfied for CHIP rollout	All pilot districts,	MoH district staff and Facility staff, community health workers

CHIP deployment	On site rollout of the CHIP	All pilot districts, November 2023 – February 2024	MoH district staff and facility staff, community health workers
CHIP Post Deployment Assessment and Supportive Supervision	Facility based visits to review the use of the CHIP and provide additional support that the community health workers and facility staff may require in order to sustain use of the CHIP	All pilot districts, May 2024	MoH district staff and facility staff, community health workers
CHIP M&E Endline Evaluation	Data collection and sites visits to assess the use and impact of the CHIP	All pilot districts, August 2024	MoH program staff, MoH district staff, facility staff, community health workers

The ZDCHP requires a letter of support and introduction from Ministry of Health HQ to allow us to engage the stakeholders listed above and implement the activities as indicated.

5. Budget Overview

The total budget for the ZDCHP is \$3.4 million. The funding will be used to cover the costs of developing the digital community health system, conducting pilots, and scaling the system to national level. The breakdown of the budget linked to the project's outcomes is as follows:

Table 2: Project Budget

Intermediate Outcome	Phase 1-2	Phase 2-4	TOTAL
1) Assess and Design	317,907	195,088	512,995
2) Build and Pilot	1,051,946	809,414	1,861,361
3) National Plan and Sustainability	125,949	144,216	270,165
4) Governance and Talent	227,033	94,482	321,515
TOTAL DIRECT COST	1,722,835	1,243,201	2,966,035
Indirect Cost	258,425	186,480	444,905
TOTAL BUDGET	1,981,260	1,429,681	3,410,941

The ZDCHP is actively engaging other funders such as the Swedish Government and US President's Malaria Initiative Zambia and Washington offices to explore potential additional funding and leverage of existing resources, for example repurposing of devices from the bed net distribution campaign. Any additional resources garnered beyond the ZDCHP funding will go towards further scale of the CHIP either implemented by PATH or any other organization that may take interest in this work.

6. Stakeholder Engagement

The project concept was initially designed with inputs from the Bill and Melinda Gates Foundation, PATH, Ministry of Health and US President's Malaria Initiative. Once funding was secured wider stakeholder engagement has been with various stakeholders, including Jhpiego, IHM, D-Tree, On Call Africa, Evidence for Health, Tony Blair Institute, John Snow Inc, AMREF, Churches Health Association of Zambia, USAID, CDC, Smart Zambia Initiative, MOH at national, provincial, district, facility and community level in defining and validating the functional and non-functional requirements of the CHIP. The MoH Community Health Unit, Monitoring and Evaluation Department and Information and Communication Technology Department played a critical role in providing guidance on the type of solution that would meet the requirements. The ZDCHP will continue to engage stakeholders to keep them informed of progress and get their input on key issues and decisions as needed.

7. Conclusion

The ZDCH Project has enjoyed the support and guidance of the MoH since inception and will continue to rely on the MoH to collaborate on key project activities and decisions. The community health digital tool is positioned to make a critical contribution to the MoH vision of improving health outcomes for all Zambians through sustainable, secure, and innovative digital health interventions that are interoperable and to contribute to the decentralization agenda. Ultimately, these efforts will play a part improving health services and health outcomes in Zambia.