

Notes from the field

Real-time data improves quality of care in rural Nigeria



Project staff review the records of a PPMV in Ebonyi State Nigeria. The canvasser also mentors shopkeepers to help maintain quality.
Photo credit: Onyekachi Amajor.

In Nigeria, less than 40 percent of children receive appropriate treatment for malaria, pneumonia, and diarrhea, which are the leading causes of child mortality in the country.ⁱ Because over 34 percent of Nigerians routinely seek healthcare from the private healthcare outlets called Patent and Proprietary Medicine Vendors (PPMVs), improving the quality of care they provide could save many lives.ⁱⁱ

With funding from the US President’s Malaria Initiative, MalariaCare, led by PATH, and the Expanded Social Marketing Project in Nigeria (ESMPIN), led by the Society for Family Health, have partnered with the Federal Ministry of Health and Ebonyi State to pilot a community-based case management project with PPMVs.

Through the project, selected PPMVs receive training on integrated community case management (iCCM), an approach used by many health programs to improve the quality of diagnosis and treatment for common childhood illnesses.ⁱⁱⁱ After training, PPMVs receive onsite mentoring by trained canvassers (supervisors) to further improve

their skills. As one technical advisor on the project explains, “The goal is to ensure that PPMVs are providing high quality services, and that they’re able to diagnose and treat these major childhood illnesses correctly.”

To assist in their work, canvassers use a tablet-based application developed by Population Services International, a MalariaCare partner. The app is called the Health Network Quality Improvement System, or HNQIS. It enables users to enter and upload supervision and mentorship data in real time. The system provides a standardized tool to capture PPMV diagnosis and treatment practices and provides insight into what factors enable PPMVs to provide high-quality care and prompts canvassers to provide targeted feedback to help PPMVs improve their performance.

When they review overall PPMV service data, canvassers can focus their efforts on less-skilled PPMVs who serve many patients. “During the feedback sessions with our PPMVs, the app helps us advise about what to do for a particular case,” says canvasser Ezekiel Nwoba, “The guidance already exists in the HNQIS, so it does not take much effort to come up with the correct words to tell the PPMVs to improve their case management skills.”

Evaluation results are promising. At the debut of the project, only 22 percent of PPMVs met project standards for delivering high-quality care. By the last project-supported visit, 72 percent of PPMVs met the standards, an improvement of 227 percent. An ongoing evaluation will determine whether this innovative approach could lead to more cost-effective resource allocation and increase the delivery of life-saving interventions.

Fidelia Egbo, a PPMV who participated in the program, explains “People know that malaria and diarrhea can be treated well by us PPMVs. The community is no longer fearful of coming to us to treat malaria because we use modern tools like rapid diagnostic tests and artemisinin-based drugs. I am doing this to save lives because I love to save lives.”

MalariaCare will continue to work closely with the Federal Ministry of Health and other project partners to provide targeted support to PPMVs. As a technical advisor to the project notes, “We’re meeting patients and communities where they are, and supporting PPMVs to provide the highest quality of care. We’re also gathering critical insight into what works and what doesn’t when engaging PPMVs, people who are major health service providers in Nigeria.”

For more information or to request program or technical assistance:

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ⁱ National Population Commission (NPC) [Nigeria] and ICF International. 2014. Nigeria Demographic and Health Survey 2013. Abuja, Nigeria, and Rockville, Maryland, USA: NPC and ICF International.

ⁱⁱ *ibid.*

ⁱⁱⁱ Young, M, et al. The way forward for integrated community case management programmes: A summary of lessons learned to date and future priorities. 2014. *Journal of Global Health*. Accessed September 2016 from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4267099/>.