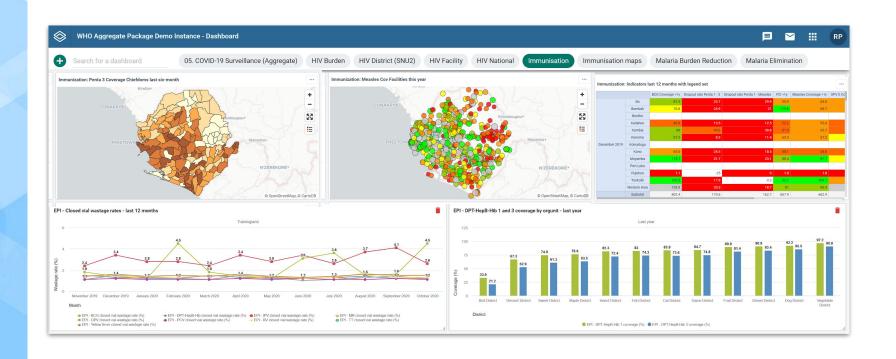
Data-driven deployment of COVID-19 Vaccines:

Achieving equity, coverage & sustainability with DHIS2





University of Oslo Health Information Systems Programme (HISP) November 2020





Why DHIS2 for COVID vaccine delivery?

Established technology: More than 45 countries already use DHIS2 for their national immunization programs, and 36 countries use DHIS2 for COVID-19 surveillance **Existing capacity:** MoH have implemented DHIS2 for many years; technical support is provided close to the field by the 13 regional HISP groups of DHIS2 experts **Customizable tools:** DHIS2 is fully customizable, allowing national teams to take ownership of their systems and modify them to meet local demands & changing requirements. **Global standards:** HISP collaborates with WHO and other global partners to ensure that DHIS2 toolkits are built on global standards, for ease of integration, analysis & interoperability Sustainable investment: Funding to countries for implementation, training and infrastructure contributes to long-term goal of strengthening health systems **Digital Public Good:** DHIS2 is free and open-source. All apps, mobile apps, tools, training materials, platform improvements and innovations are shared globally with no licensing fees

Scale: 36 countries installed DHIS2 COVID-19 toolkit



DHIS2 in action

DHIS2 is in use all over the world. Check out different use cases with this interactive map.

Health Information System

COVID-19

Operational (36)

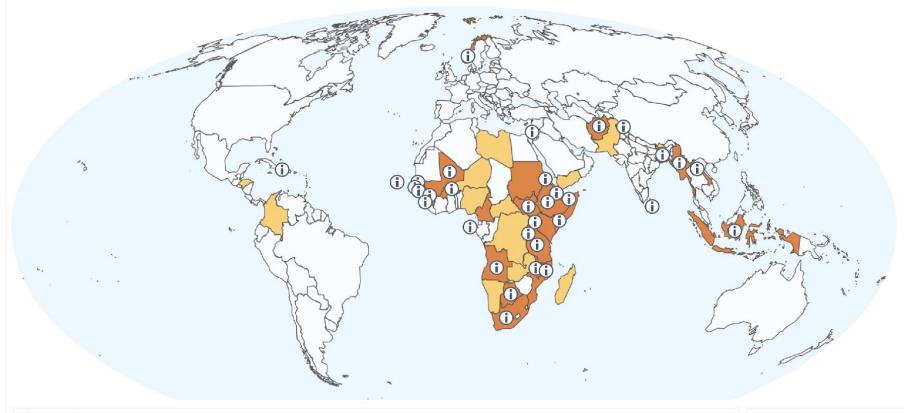
In development (15)

Tracker

Android app

WHO Packages

Education Management Information System (EMIS)



Operational: 36

Afghanistan (i)
Angola (i)
Bangladesh (i)

Botswana (i)
Burkina Faso (i)
Cameroon

Cape Verde (i)
Djibouti (i)
Eritrea (i)

Ethiopia (i)
Guinea (i)
Guinea Bissau (i)
Haiti (i)

Indonesia (j)
Jammu and Kashmir (j)

Jammu and Kashmir Kenya Laos (i) Malawi (i) Mozambique (i)
Myanmar (i)
Norway (i)
Palestine (i)
Rwanda (i)
Sao Tome (i)
Senegal (i)

Sierra Leone (i)

Mali (i)

Somaliland (i)
South Africa (i)
South Sudan (i)
Sri Lanka (i)
Sudan
Tanzania (i)
The Gambia (i)
Uganda (i)

Somalia (i)

In development: 15

Bhutan
Central African Rep.
Colombia
Dem. Rep. Congo
Honduras
Libya
Madagascar
Namibia
Niger

Nigeria Pakistan Vanuatu Yemen Zambia

Zanzibar

DHIS2 Toolkit for WHO NDVP Guidance



01	Measure uptake, coverage & equitable distribution over time, by geography and across risk groups	 WHO EPI module expanded for COVID-19 vaccine data for routine facility data on vaccination utilization, wastage, cold chain & outreach data WHO EPI module installed in 30+ countries at national scale
02	Supply chain readiness & traceability of vaccines down to points of service delivery	 Facility & last-mile logistics data module: WHO approved health logistics metadata with barcode/QR scanning capabilities 20 countries using DHIS2 for facility-level vaccine logistics & cold chain reporting; DRC, Mali, Yemen use DHIS2 as eLMIS
03	Ensure that individuals can be monitored for the full course of multi-dose regimen	 Immunization eRegistry for longitudinal tracking & follow up of individuals DHIS2-based IER deployed at national scale in Rwanda and Ghana
04	Provide a personal vaccination record/certificate	 Electronic Health Certificates linked with Immunization eRegistry and integration with digital vaccination cards Local innovations for DHIS2-based generation of COVID-19 negative test certificates & travel passes in Uganda, Guinea Bissau & Rwanda
05	Multiple distribution strategies; novel & innovative distribution approaches	 Mass campaigns & supplemental immunization activities monitoring adapted for COVID-19 distribution strategies Uganda national MR campaign (2019); Bangladesh MR campaign (ongoing)
06	Vaccine safety monitoring	 Adverse Events Following Immunization (AEFI) Tracker: WHO approved Buy-in from AFRO to support national system strengthening for vaccine safety with DHIS2



Build on established approaches and partnerships: Expand the WHO DHIS2 Health Data Toolkit, work through regional support networks and relationships with Ministries of Health to adapt to local demands. Leverage Gavi's current investments in DHIS2 for immunization programme data solutions & Norad's catalytic COVID-19 support funding.

Strengthen existing systems, tools, & capacity: Focus on countries already using DHIS2, ensure that COVID-19 vaccine delivery solutions are integrated into existing information structures established for national immunization programmes. Use this unprecedented opportunity of focus & momentum to drive the strengthening of overall health system.

Leverage local expertise and innovation: Deploy innovative approaches to meet real-world use cases through regional HISP groups and national core teams. Share best practices and innovations globally and feedback learning to global public goods.



WHO Standard EPI Metadata Package

Facility aggregate monthly reporting on the follow key data:

- 1. Vaccinations (target: children and women of reproductive age)
 - a. BCG, DPT-HepB-HIB, IPV, OPV, MR, PCV, Rota, Yellow Fever (children)
 - b. TT (WRA & pregnant women)
 - c. According to standard disaggregations (e.g. age: <1, >=1 year)
- 2. Stock
- 3. Cold chain: functional refrigerators, alarms (low/high)
- 4. Outreach Sessions
- 5. Adverse events

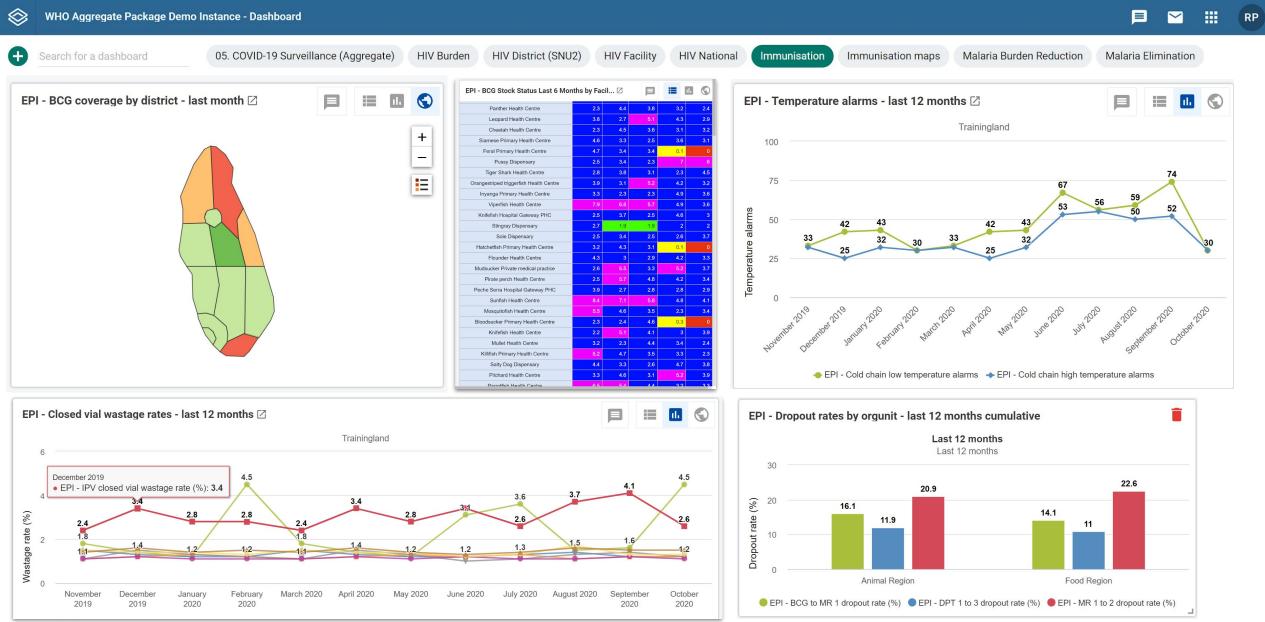
Indicators & analytical outputs

- Wastage rates, coverage rates, vaccines administered, dropout rates, cold chain
- Dashboards: maps, charts, graphs, data quality (completeness & timeliness), automatically can be aggregated from facility upwards and over time



WHO dashboards for immunization programmes

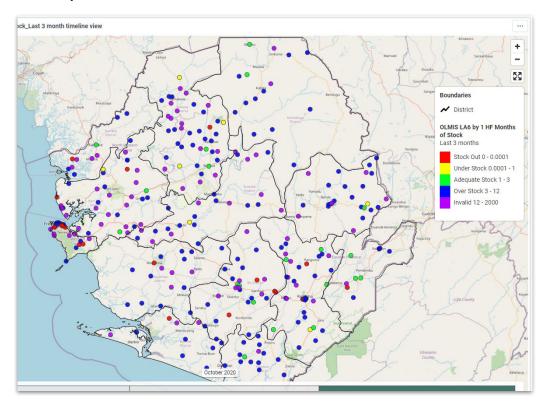




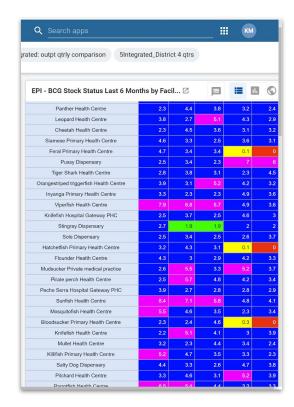


Supply Chain: Facility level visualization

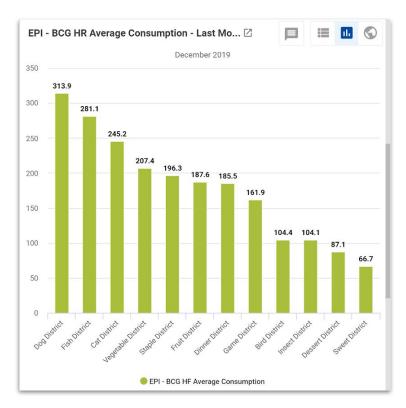
Facility stock status: adequate, under, over, stock-out, invalid



Stock status by month



Average consumption by district

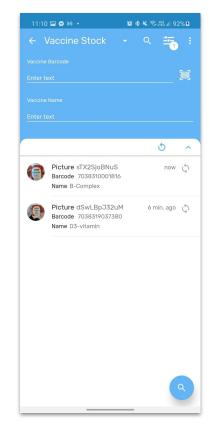


Supply chain reporting approaches at last-mile:

😂 dhis2

facilities and community-based service delivery

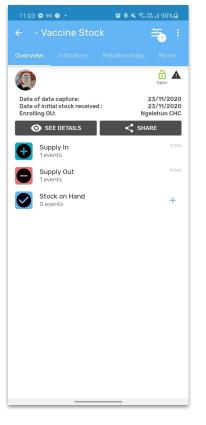
Example of vaccine catalog with DHIS2 Android App



Product catalog with pictures



Barcode search



Data entry



Supply out reporting

Barcode enabled, ad hoc or routine capture of stock in, stock out and stock-on-hand

Automatic notifications for stock-outs and emergency resupply workflow support

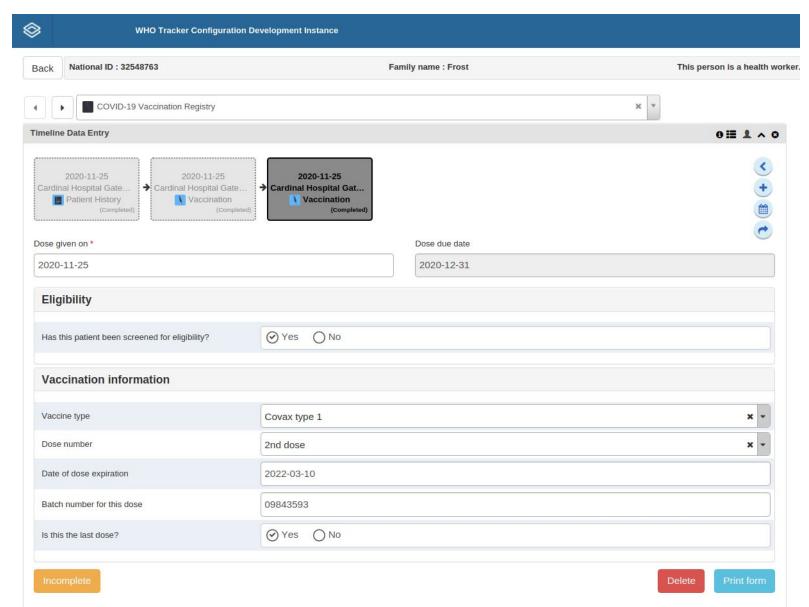
On-the-fly indicators: average consumption, stock status per facility, lead time, stock-out days

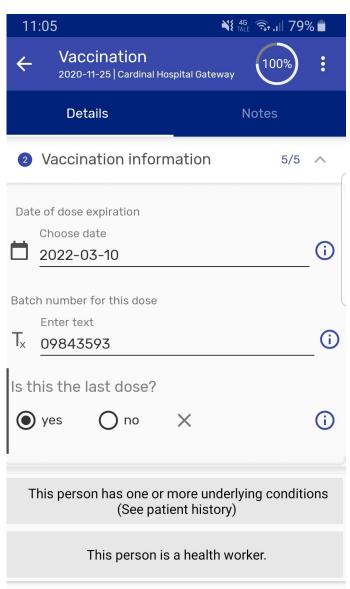
Full offline support

COVID-19 Vaccine Registry



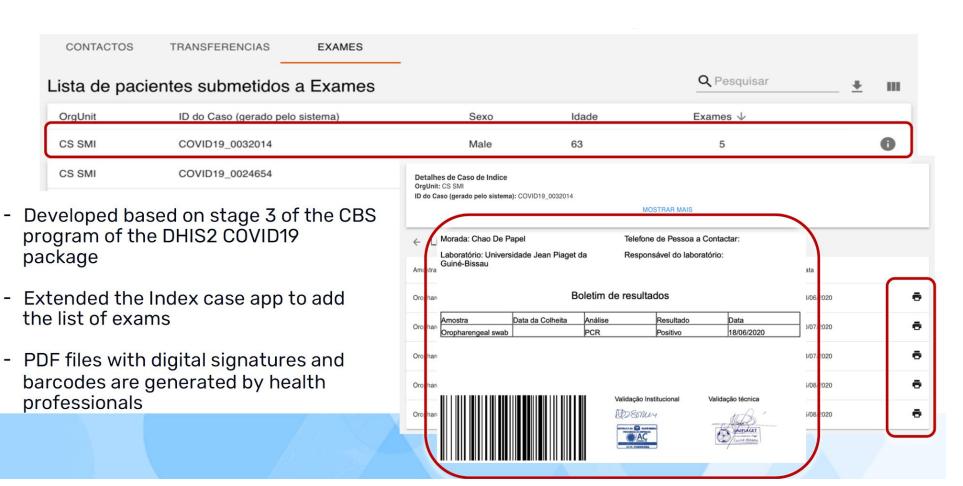
All DHIS2 modules are natively compatible with the DHIS2 Android Capture App (full offline support)







DHIS2-powered travel certificates



MOH Disease Surveillance Department	100	
A. Demographic Infor	COVID-19 TravelPASS	
Full Names	TEST TRUCK DRIVER	
Nationality	KENYA	-
Date of Birth	1953-05-19	
Passport No / NIN	77777777	-
Point of Entry No	8888888	A 4 (A)
Phone Number	099999999	Carried V
Next of KIN (Name)	TEST COMPANY	1 The
Next of KIN Phone No	988888888	LUCK HUGH
B. FirstTime Registra	tion information	
Point of Entry	1 TEST POE	回公司 经股份
Country of Departure	KENYA	
Country of Destination	SOUTH SUDAN	B-20-4 04 B
Vehicle Registration Number	KXX555X	
Date and time of entry	2020-05-18T09:35	500000000000000000000000000000000000000
Physical address in Uganda	KAMPALA, INDUSTRIAL AREA PLOT 46	
C. COVID-19 Surveilla		
Measured Temperature	Yes	COVID-19 TEST Results:
Specimen taken	Yes	Negative
Cleared to travel D. Approval	Yes	
Approved by	Official Stamp	
Date		Malaba POE Incharge Turyagyenda Dennis
Approved by	Official Stamp	0772667596/0702667596
Approved by Date	Chaciai Statisp	turyadennis@gmail.com
Approved by	Official Stamp	Busia POE Incharge
Date		Mr. Wabwire Tonny Fredric 0772 883898/0756 88389

Use cases in Rwanda, Uganda and Guinea Bissau for generating COVID-19 test certificates & travel passes for travelers. Read more at: dhis2.org/covid-success-stories

Disclaimer: Data in screenshots are for demo purposes only; they do not represent real people nor real details

Adverse Events Following Immunization Tracker



AEFI reporting ID number:

REPORTING FORM FOR ADVERSE EVENTS FOLLOWING IMMUNIZATION (AEFI)

*Patient's full Addre		*Patient Name:				*Reporter's Name:					
	*Patient's full Address:				Institution: Designation & Department:						
Telephone: Sex: M F *Date of birth : _ /_ / OR Age at onset: M Years M Months D Days					Address:						
					Developer Product						
					Telephone & E-mail: Date patient notified event to health system:///						
OR Age Group at on	iset: 🗌 <1 Ye	ar 1 to 5 Y	ears 🗌	>5 Years	Today's date :		-				
Health facility (place	e or vaccinati	on centre) nan	e & addr	'ess:							
		Vaccine		Sec. 2 (2)			Diluent (if	applicable)	il.		
*Name of vaccine	*Date of vaccination		Dose (1 st , 2 nd , etc.)	*Batch /Lo number	Expiry date	Name of diluent	*Batch /Lot number	Expiry date	Date and time of reconstitution		
	5		20								
*Adverse event(s): Severe local react Seizures Abscess Sepsis Encephalopathy Toxic shock syndi	☐ febri	lays □ beyond		oint	Date AEFI sta Time Describe AEF	:					

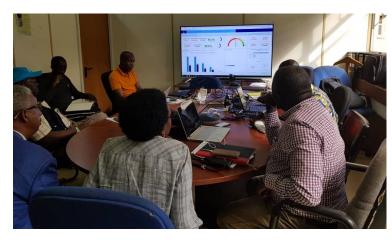
\$	WHO Tracker	Configuration Development Instance					
20	016-03-02						
*F	Peporter's name:		Dr Celine				
De	esignation and Department:			Paediatrician			
Ad	ldress:		Dalmatian Private Hospital				
Co	ontact number:		+91 345 67 98 765				
E-	mail:		celine@cardinalmail.com				
		Vaccine 1		Vaccine 2			
*N	ame of the vaccine	Measles and Rubella vaccine	-	Select or search from the list ▼			
В	and Name						
O	her vaccines(specify)						
*0	ate of vaccination	2016-03-01		yyyy-MM-dd			
*Т	ime of vaccination	10:15		HH:MM			
De	ose(1st,2nd,etc.)	3 *	-	Select or search from the list			
*E	atch/Lot number	DER112CV 2015					
E	piry date	2018-11-01	yyyy-MM-dd				
Di	luent (if applicable)						
*N	ame of diluent	Khasrubel Diluent					
*E	atch/Lot number	ASDF32123					
E	opiry date	2018-09-01		yyyy-MM-dd			
Di	ate of reconstitution	2016-02-29		yyyy-MM-dd			
Ti	me of reconstitution	17:00		HH:MM			

Immunization Campaign Monitoring





National Command Centre

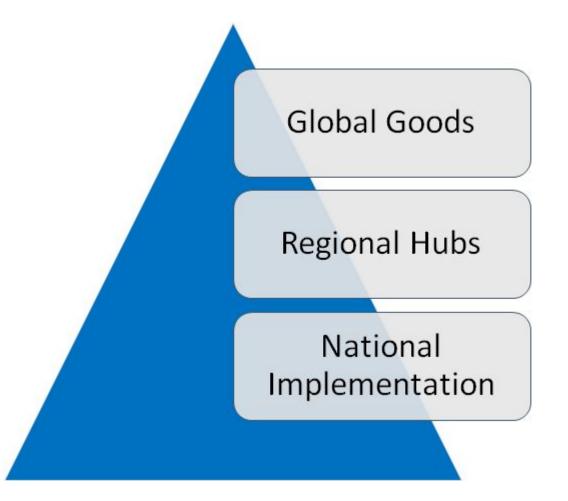


District Command Centre





Operationalizing the toolkit for vaccine delivery



Expand WHO DHIS2 immunization toolkit for COVID-19 (installable metadata templates, update implementation guides, develop standard training materials).

Regional HISP groups provide technical assistance to MOH to locally adapt and integrate modules into existing DHIS2 based systems, host regional training academies, conduct training-of-trainers for national teams and support virtual learning activities.

Implement toolkit to local context; train and support end users; deploy local innovations; procure and maintain devices and infrastructure.



Planning for Country Implementation

Integration with existing DHIS2-based systems will achieve sustainability and cost efficiency by:

- Reducing barrier to entry/training required
- Re-using existing technology and infrastructure
- Leveraging MOH core HMIS team capacity for customization of the software/toolkit
- Working through existing immunization programme processes
- Reinforcing & strengthening overall data
 management & use for immunization programme

Illustrative Country Implementation Budget Guide

Pagis Dankage (expension of EDI facil	it. vaccinatia	n O otook von	outing)		
Basic Package (expansion of EPI facil			and the second second		40.000
Package installation & customization	1 worl				12,000
Training of trainers	1 train			2000	12,000
Facility end user training	2000 use	rs (1/2 day) \$		- T	66,000
Data use & analysis training	1 worl	kshop \$	12,00		12,000
Subtotal Basic Package				\$	102,000
Enhanced packages (introduce Immur	ization Regis	try, Mass Car	npaign, AE <mark>f</mark>	I track	er)
Upgrade server & support	1 Sen	/er \$	14,40	\$ 0	14,400
Package installation & customization	3 Wor	kshops \$	12,00	\$ 0	36,000
Field testing	1 Field			\$	9,000
Training of trainers	1 trair		12,00) \$	12,000
End user training	2000 use		6	3 \$	132,000
Subtotal Enhanced Package				\$	203,400
					,
Innovation packages (electronic healt	n certificate, i	nteroperabilit	y solutions		
Custom app design		lication \$			24,000
Interoperability TA	1 proj				19,000
Subtotal Innovation package		•	, , , ,	\$	43,000
cancolar minor auton puonage				-	.5,555
Add mobile deployment (if devices are	not vet deplo	oved)			
Devices	2000 devi		15	5 \$	300,000
Mobile device mgmt	2000 use				24,000
Connectivity	2000 use		5 2		40,000
Subtotal mobile device deployment	2000 436	5	,	\$	364,000
Captotal Inobile device deployment				Ψ	304,000

See DHIS2 Implementation Guide, Tracker Implementation Guide and Android Implementation Guide for more info.



Thank you! Stay in touch

- For more information:
 - dhis2.org/covid-vaccine-delivery
 - Community of Practice: <u>community.dhis2.org</u>
 - Contact: <u>covid@dhis2.orq</u>
- Planning for DHIS2 to support national delivery & vaccination plans
 - Contact regional HISP or <u>covid@dhis2.org</u> with questions about country-specific plans for DHIS2