

## Success Story

# Changing Mindsets, Adapting to Technology in Tanzania



Kinondoni district health care workers during the eLMIS training.

USAID | DELIVER PROJECT, SCMS

**“I cannot remember the last time I submitted my requests within the scheduled time...this tool has simplified the process of entering data and saved time.”**

*Ms. Sophia Mwilongo, Kinondoni District pharmacist*

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“Sometimes we have to move out of our comfort zones to make a change in our society,” remarked Ms. Sophia Mwilongo, a Kinondoni District pharmacist, when asked about the challenge of her staff’s lack of proficiency in using computers.

As part of the move to an electronic logistics management information system (eLMIS), she issued a directive that as of July 2014 all data submissions had to be electronic. But that was only part of the process of change and adaption needed.

## Launching an eLMIS

The eLMIS was implemented by Tanzania’s Ministry of Health and Social Welfare (MOHSW) in collaboration with the USAID | DELIVER PROJECT and the Supply Chain Management System (SCMS). The eLMIS leverages the efforts of John Snow, Inc., PATH, and Village Reach through the OpenLMIS initiative with funding from USAID and the Bill & Melinda Gates Foundation. The vision of the MOHSW is an effective and sustainable eLMIS that is easy to use and that facilitates the availability of health commodities—of adequate quality and quantities—to meet patient demand. The system was launched to improve supply chain decisionmaking at all levels of Tanzania’s public health supply chain.

Under the paper-based system, it could take months for information about a stockout at one of Kinondoni’s health facilities to reach the stakeholders who can help to rectify the situation and address underlying issues at their facilities to prevent stockouts from recurring. Human error notoriously plagued the paper-based system; moreover, even a simple mistake on a paper form was less likely to be caught and resolved quickly than with an electronic system. These inefficiencies resulted in facilities running out of the essential medicines that can save lives or in overstocking because the facility accidentally requested more than it could use. By contrast, data submitted through the eLMIS are available instantly online to district pharmacists, regional store

managers, and even the Minister of Health.

The eLMIS was launched in Tanzania in late 2013 with a training sponsored by the World Health Organization for 13 districts. In 2014, teams from the MOHSW, the USAID | DELIVER PROJECT, and SCMS successfully trained 474 users from 161 districts (95% coverage) and 108 users from 63 facilities located in two districts in the Dar es Salaam region as well as teams at the Medical Stores Department (MSD) and the newly established Logistics Management Unit.

Following the roll-out training in March 2014 for the Kinondoni District, Ms. Sophia still experienced challenges in entering report and requisition (R&R) forms into the eLMIS in a timely manner. The delays were caused by the hectic process of reviewing and capturing data from paper-based R&R forms submitted by health facility in-charges. She found that, when entered into the LMIS, most data from paper-based forms were flagged with error messages, which implied that health facilities were submitting incorrect information. She planned an on-the-job training for the facility in-charges in her district so they could see error message flags as they entered data. In her urban district, with its existing infrastructure, she realized it was possible for each facility to submit their R&R forms electronically. To make this a reality, she requested technical assistance from the USAID | DELIVER PROJECT and SCMS.



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**Figure 1. Instructional Aid for Introducing the eLMIS**



## Back to Basics

Whispers of “training-dot-t-z-dot-e-l-m-i-s-hyphen-dev-dot-org” echoed throughout the training room as health facility workers typed in the address to the eLMIS training site for the first time. These health workers represented 43 facilities from Tanzania’s Kinondoni District who attended the training to learn about the new eLMIS being rolled out in Tanzania and Zambia. These health workers were among the first at the facility level to receive training on this system. The Kinondoni trainings presented an interesting challenge: for many in the room, this was their first or second time to use a computer, email, or the Internet—all essential elements of an eLMIS.

Thinking on their feet, the training team developed an extended analogy by linking the process of signing up for an email address and registering for the eLMIS to the familiar idea of traveling to the post office, opening a new box, and sending mail. The team quickly created infographics and other visual tools to link the computer browser to a mode of transportation, an email password to a mailbox “key,” and an email to a letter (See figure 1).

## The Results

Following the training, participants committed to taking a computer course on their own. Ms. Sophia reinforced the importance of computer literacy for health facility managers, noting that she would make it a requirement for those seeking roles in managing health facilities. In addition, she would no longer accept or authorize paper reporting forms, and she planned to start using emails to communicate with the facilities. Kinondoni District will provide computers to facilities that currently do not have them, and facility staff will receive supportive supervision and on-the-job training to ensure that they can use a computer to accurately enter quality data into the eLMIS. These supervisory visits can also address other performance challenges to the district so that Kinondoni can be an exemplary site of excellence.

“I asked how many in the class had used a computer before, and three, maybe four, hands went up. I asked how many had an email address, and maybe one hand went up.”

—eLMIS trainer

Health facility in-charges have found the eLMIS useful in simplifying their work because of the improved accuracy of automated calculations as compared with the manual calculations that had led to data quality issues. In the months following the training, reporting rates from Kinondoni facilities using the eLMIS have been exceptionally high: 98 percent of facilities reported on time. As Ms. Sophia stated when asked about the impact of the training: “I cannot remember the last time I submitted my requests within the scheduled time...this tool has simplified the process of entering data and saved time...there is usually a very tight time frame of submitting orders.”

## The Way Forward

Electronic logistics management information system trainings at facilities in other districts are under way in response to district leaders who identify needs and request support. In addition to the facility staff, MSD managers, sales officers, and customer service officers have been trained on the eLMIS. The MOHSW is also taking the lead to sensitize managers from councils and regions to the advantages of the eLMIS.

Experience with the initial training courses led to planning all facility trainings to include a 1- to 2-day pre-training to assess and to build capacity on facility workers’ computer skills. Those who pass the computer literacy test will then be trained on the eLMIS. Through this process, the USAID | DELIVER PROJECT and SCMS plan to encourage peer education and continued computer skills development to ensure the continuity and ownership of the eLMIS to the facilities and to promote the change management and continuous performance improvement process.

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