Annual Report 2014

Our Mission

Save lives and improve health by increasing access to quality healthcare for the most underserved communities

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Executive Summary

Annual reports often provide reason for reflection, and 2014 is no exception. At no other time in VillageReach’s history has the need for stronger health systems been more evident than now. The international Ebola crisis illuminated key barriers to effective healthcare for remote and underserved communities. The barriers are not unique to West Africa. They are the same issues that challenge most low- and middle-income countries: healthcare accessibility, lack of infrastructure, human resource constraints, and information availability.

We know improvement in these particular areas holds the greatest potential for saving lives and improving health for the most underserved communities. Our team’s diverse expertise, experience and on-the-ground presence drives our perspective in developing new solutions to these challenges, drawing from expertise across public health, technology and the private sector. Partnership is a cornerstone of our mission, and a key element to our work, contributing to great progress in 2014:

- VillageReach focused its resources and technical assistance in Mozambique, supporting provincial governments in managing a redesigned immunization supply chain, leading to continuous improvement in vaccine availability at the last mile. In 2014, Gavi, the global vaccine alliance, recognized the approach as a model for application in other countries. Donor support has been integral to this multi-year advocacy effort and represents one of our biggest achievements in terms of taking an innovation to scale and sustainability.
- The Malawi Ministry of Health officially endorsed Chipatala Cha Pa Phoni (CCPF) – an mHealth initiative designed to increase access to timely maternal and child health information, advice and care – and expressed its interest in seeing the program scale nationally.
- The first class of students completed the first year of a new and innovative Pharmacy Assistant Training program in Malawi. The program produces new and dedicated professionals with enhanced training in medicines management and supply chain practices who will eventually support each of Malawi’s 650 rural health centers.
- VillageReach and its partners celebrated the implementation of OpenLMIS, an open source logistics management information system, in three countries: Mozambique, Tanzania and Zambia. The milestone represents a significant achievement in collaboration between multiple countries, NGOs, the private sector and donors working together to develop a solution with shared benefit and investment.

These are just a few examples of the progress achieved in 2014. Our initiatives vary along the continuum from new, untested innovations to proven practices implemented across multiple countries. While it is exciting to envision quality healthcare at scale, it is important to remember healthcare will reach communities one individual at a time.

Our donors have propelled this work, helping to develop ideas into scalable and sustainable solutions that work—even in the most remote and resource-poor environments. But there is much more to be done. On behalf of our entire team, thank you for your contributions, supporting life-saving innovation - starting at the last mile.

Allen D. Wilcox, President

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2014 Highlights

mHealth Innovation: Chipatala Cha Pa Phoni (CCPF) — “Health Center by Phone” CCPF is an mHealth innovation in Malawi designed to increase access to timely and appropriate maternal, neonatal and child health information, advice and care via a toll-free hotline and a “tips and reminders” text and voice message service. An independent evaluation released at the end of 2013 concluded that CCPF has a statistically significant impact on RMNCH knowledge and behavior. In 2014, this new evidence lead to the Ministry of Health’s official endorsement of CCPF, with an expressed interest to scale the program nationally. Donor support has been integral in sustaining this vital program through the “proof of concept” stage and into adoption and scale with partners. When scaled nationally, CCPF has the opportunity to make a more significant difference in the lives of women and children in rural areas in Malawi and help the country reach its maternal and child health goals.

Pharmacy Assistants Training Program

Together with our partners, the Malawi Ministry of Health, the Malawi College of Health Sciences, and the University of Washington Global Medicines Program, VillageReach designed and implemented a new approach to the training, deployment, and support of pharmacy assistants in Malawi. The initiative addresses key barriers to medicines availability at the health facility and district level. The program produces a dedicated cadre of individuals with enhanced training in medicines management and supply chain practices to eventually support each of Malawi’s 650 rural health centers. In 2014, the first cohort of students completed their first year of the two-year certificate course alternating time between classroom-based coursework and practicum experience in rural pharmacies. Feedback from health workers, even at this early stage in the program, has been extremely positive and improvements in supply chain performance are already evident. Preliminary results show clinical staff time spent on logistics tasks reduced by more than 80%, allowing clinicians to focus more time on patient care.

“I am completely relieved to have this additional workload of dispensing and inventory management taken over. Through this program, our health center receives one student who has already received training in the areas of dispensing and inventory management—more training than anyone currently working at the health center, including myself.” — Andrew Hauli, Medical Assistant In Charge (Health Center Manager) Nyungwe Health Center, Malawi

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OpenLMIS

VillageReach is a founding partner of OpenLMIS, a global initiative to support the development of shareable, interoperable, open-source software for electronic logistics management information systems. In 2014, VillageReach celebrated the implementations of OpenLMIS (locally referred to as Sistema Electrónico de Logística de Vacinas or SELV) in Mozambique, and additional implementations by partners in Tanzania and Zambia. In the coming year, VillageReach will work with its partners to promote the accessibility of OpenLMIS and support Ministry of Health stakeholders through shared learning experiences as part of OpenLMIS expansion to additional countries.

Optimizing the Supply Chain System in Mozambique: The Dedicated Logistics System

In partnership with the Mozambique Ministry of Health, VillageReach developed and implemented The Dedicated Logistics System (DLS), resulting in significant increases in fully vaccinated children, dramatic reduction in stock-outs, and reduced costs. The DLS continues to gain recognition within the international community from partners like Gavi, the global vaccine alliance, who recognize the model as part of an improved and highly successful approach for vaccine supply chains. Donor support has been integral to this multi-year advocacy effort and represents one of our biggest achievements in terms of taking an innovation to scale and sustainability.

One of our key objectives is to facilitate peer-to-peer learning among provincial teams so that the evidence generated by DLS implementations in the initial four provinces can be used to catalyze change in other provinces in Mozambique and elsewhere. In 2014, a leading example of this was the coordination of a field visit of the EPI Manager in Tete in the north to observe the DLS in Gaza Province in the south. This visit led to the approval of a plan to expand the DLS to Tete in 2015, adding an additional, fifth province, where the DLS will serve more than 400 health centers and a population of 6 million.

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Why the Last Mile?

VillageReach seeks to increase access to quality healthcare for the world’s most underserved communities, by improving the capacity and efficiency of health systems in low- and middle-income countries (LMICs).

These countries account for a disproportionate share of worldwide deaths, many from vaccine-preventable diseases which continue to kill 1.5 million children annually. The lack of access to healthcare for both prevention and treatment affects peoples’ ability to attain an education, acquire employment, and raise healthy families to improve their economic and social quality of life, thereby perpetuating poverty in the world’s marginalized communities.

Improving the health and welfare of these communities requires more attention and resources be paid to strengthening the final segment or “last-mile” of health systems - where healthcare is actually delivered, and the infrastructure that support them.

While significant investment has been made to ensure essential medical commodities are available to all countries that need them, barriers to delivering these commodities efficiently remains a significant challenge, especially at the last mile.

Over time, communities receiving reliable services will come to trust and rely on the health system, thereby improving the overall health of the community.

By improving productivity, quality and access, VillageReach simultaneously seeks to increase the use of health services by increasing trust in the health system.

Through collaboration with public and private sector partners, VillageReach develops, tests and implements innovations that uniquely address key barriers at the lower levels or “last mile” of healthcare delivery. Effective solutions at the last mile require a deep understanding of local health systems, a diverse set of skills and expertise, and strong relationships on the ground in order to achieve sustainable impact.

We are building partnerships with health systems of national and local governments and engaging other contributing organizations throughout sub Saharan Africa and Asia in our mission to improve health – starting at the last mile. There is still much to be done. We encourage you to join us in this collaboration to bring life-saving innovation to scale and sustainability.

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Our Approach- System Innovation, Starting at the Last Mile

More than a decade of studying and working in low-resource environments around the globe informs our approach—invest in innovations that address the unique needs of weak health systems, with an emphasis on strengthening the “last mile” of healthcare delivery: where healthcare is administered, often the most rural and remote communities, and generally the most difficult and weakest link in healthcare delivery. At this level, the health system and the resources available to it must be spread very thinly across vast geographic areas. To deliver quality healthcare to the last mile, health systems must overcome significant challenges, including:

- human and financial resource constraints;
- lack of timely and accurate information regarding health system operations (i.e., data on medical commodities inventory, cold chain performance, delivery capacity and associated constraints); and
- lack of infrastructure needed to support healthcare delivery (e.g., energy, transport, information communications technology).

To improve healthcare delivery support services at the last mile, VillageReach has built deep and relevant expertise, including the following:

**Supply Chain Logistics** - VillageReach has more than fifteen years of experience designing, improving and implementing medical commodity supply chain and logistics systems that increase the availability of vaccines, medicines and other medical commodities at the service delivery level.

**Information & Communication Technology** - VillageReach designs, tests, builds and implements technology solutions ranging from mHealth applications to enterprise-level logistics management information systems designed to support and improve healthcare delivery.

**Human Resources for Health** - VillageReach excels in designing field-based training opportunities that improve health service delivery while working to ensure health workers and health extension programs have the data and resources needed to provide effective services to patients.

**Private Sector Engagement** - VillageReach assesses deficiencies in infrastructure and works with the private sector to develop new opportunities to provide the communications, transport, and energy services needed to support healthcare delivery, particularly in remote, rural areas.

**Outreach** - VillageReach has built and implemented new systems that educate communities, especially those in hard-to-reach regions, regarding available healthcare services and how best to access those services.

**Advocacy, Change Management and Technical Support** - Across all areas of expertise, VillageReach’s team is experienced in leading the local, national, and global advocacy needed to encourage the adoption of new approaches that improve healthcare delivery. VillageReach also provides the technical assistance, as required, to support ministries of health, global health partners and the private sector as they implement and scale those new approaches.

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2014 Leadership

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Allen Wilcox, President
Emily Bancroft, Vice President & Group Lead,
Health Systems Group
John Beale, Strategic Development Director, Group Lead, Social
Business Group
Nancy Geiger, Finance and Operations Director
Sarah Jackson, Technology Manager, Group Lead, Information
Systems Group

Mozambique
Ruth Bechtel, Country Director

Malawi
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Will Poole, Social Technologist, Co-chairman, NComputing
Paul Suzman President, OfficeLease
Allen Wilcox, President, VillageReach

Financial Reports

VillageReach provides its financial reporting online for convenient access. Copies of our Articles of Incorporation, Bylaws, Proof of 501 (c)(3), and archived financial reports can be found here.

The following financial reports are also available online:

- 2014 Tax Returns
- 2014 Audited Financial Statement

Partners

VillageReach funding and implementation partners make our work possible:

Baobab Health Trust
Barr Foundation
The Bill & Melinda Gates Foundation
Concern Worldwide Malawi
John Snow, Inc. (JSI)
The Miami Foundation
The Mulago Foundation
Clinton Health Access Initiative (CHAI)
Gavi

Reproductive Health Supplies Coalition
Seattle International Foundation
Skoll Foundation
USAID
USAID|DELIVER Project
UNICEF
United Nations Foundation

United Nations Commission on Life Saving Commodities
Vitol Foundation
University of Washington Global Medicines Program
William Davidson Institute
The World Bank

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