Unjani Clinic Network

“Empowering Healthcare”

October 2017
Introduction of Organisation

- 3 – 4 minutes slides
Acknowledgment of Funders & Partnerships
Mission

- Empower 350+ Professional Nurses
- Create 1000+ jobs
- Provide improved healthcare access to 3 million+ people
- Develop 350+ Sustainable Micro Enterprises that provide social value
Model

- Task shifting for affordability and scale of access to primary care
- Empowering nurses as healthcare providers and entrepreunarial role models
- Transforming health seeking behaviours
- Proven model (“winning formula”) for sustainability

“Quality, affordable private healthcare”
Theory of Change / Results Chain

**Outcomes**
- Professional Nurses own sustainable primary healthcare clinics
- Professional Nurses create more employment
- Access to quality, affordable healthcare has improved in communities
- Successful business model & management
- More funding is invested into more Clinics, increasing access
- Expected measures achieved
- More funders attracted to the project

**Outputs**
- Professional Nurses own and operate a primary healthcare clinic
- Efficient Operation
- Clean Audit
- Expected measures achieved
- More funders attracted to the project

**Activities**
- Professional Nurse Selection
- Site Confirmation & Prep
- Clinic Deployment
- Training, Operational Support and M&E
- Admin & Accounting
- Monitoring & Evaluation
- Raise funding for Future Clinics

- Signed ED Agreement
- Signed Lease
- Donated infrastructure handover
Social Sector Franchising Approach

- Model built on social franchising principals
  - Brand / supply chain / systems / training / SOP’s

- “Sustainability presupposes commercial viability”

- Profitability at front end, minimal drain from centre

- Ability to scale based on a proven formula
Measuring Impact

- 2 – 3 minutes slides
Measuring Impact

- Traditional quantitative measures
  - Nurses Empowered / Enterprises Developed
  - Employment
  - Patients Served

- Qualitative measures
  - Lifestyle improvement
  - Impact on patients “are they healthier, are they more informed”
  - Independent surveys / internal surveys / patient feedback

- Impact Mapping (Theory of Change) ..... SROI
Quantitative Impact to Date

- 37 empowered business owners
- Improved lifestyles
- Permanent employment for 120+ people

- In excess of 350,000 consultations
- Access to improved services
- Access to quality medicines
- Primary care in communities

- Capacity building in surrounding Government Facilities
- Assistance with campaigns
- Healthcare systems strengthening
Qualitative Impact to Date

“They have the best service ever and they attend to their patients very fast”

“The difference is that they can talk to us in a friendly manner, they don’t just give us pills that help us”

“The Clinic is of the highest standard and the waiting time is little”

“Their reception is very welcoming and they are fast enough to assist”

“Money cannot buy what we get on a daily basis” – Unjani Nurse

“The Unjani Clinics are the best thing that ever happened to our community”
# Impact Mapping

## Unjani Clinics Impact Map (Theory of Change Measurement)

<table>
<thead>
<tr>
<th>STAGE 1</th>
<th>STAGE 2</th>
<th>STAGE 3</th>
</tr>
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<tbody>
<tr>
<td><strong>Stakeholders</strong></td>
<td><strong>Intended/ unintended changes</strong></td>
<td><strong>Inputs</strong></td>
</tr>
<tr>
<td><strong>Funders</strong></td>
<td>Impact of Funding Invested</td>
<td>Donation in Rands invested</td>
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<tr>
<td><strong>Professional Nurse</strong></td>
<td>Business Ownership</td>
<td>Initial Investment of R10 500</td>
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<td><strong>Clinic Assistant</strong></td>
<td>Skill Level/ Employment Responsibilities/ Engagement Growth Opportunities</td>
<td>Time</td>
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<td><strong>Patient</strong></td>
<td>Commute Time</td>
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<td><strong>Government</strong></td>
<td>Savings/Redeployment of Resources (Capacity Building)</td>
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<tr>
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<tr>
<td>Impact</td>
<td>Measurement</td>
<td>Measurement source</td>
<td>Value Change</td>
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<tr>
<td>Unjani NPC</td>
<td>Nurse Survey (Financial Records)</td>
<td>Community / Patient Survey</td>
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<tr>
<td>Rand investment / patients served Business profitability increases (5% of Profit)</td>
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<td>Skill Improvement Value (5% of Salary/Profits)</td>
<td>Contribution to Community (5% of Profit)</td>
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<td>Financial Stability (5% of Salary)</td>
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*Note: The table is a simplified representation of the Impact Mapping for Unjani Clinics. The actual mapping would include more detailed information and relationships between the stakeholders, inputs, outputs, and outcomes.*
Contact Us

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Innovative Measurement Breakthroughs in Health Sector Franchising

Greg Starbird
October 18, 2017
Child and Family Wellness Clinics

Launched in Kenya in 2000

- 60 medical clinics
- 5+ million people served

~$US2.00 average sale

Capital-light, storefront facilities (US$10/clinic)

Essential medicines, basic healthcare

Business format franchise
- Owned/operated by nurse franchisees
Measuring impact…

- ...to inform national policy
- ...by listening to customers
- ...as a product of 100+ pertinent variables
- ...using existing larger data sets
Measuring Impact to Inform National Policy

Example: Malaria RDTs
Measuring Impact by Listening to Customers

Example: Randomized Distribution of Equally-Valued Coupons Across Surveyed Populations
Measuring Impact as a Product of 100+ Variables

- Product Mix
- Year-on-Year Growth
- Staff Titles, Salaries, Timing
- Franchisee / Franchisor Financial Terms
- Etc…

→ Unit Profitability & Impact
→ Network Profitability & Impact
BMJopen Article: “[P]roximity to franchised health clinics is associated with increased take-up of vaccinations and treatment for acute illnesses. The positive relationship between proximity to CFWShops and healthcare access is equally strong for high- and low-wealth households alike. The franchise clinic model has the potential to fill an important gap in health service delivery in low-income countries…”
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MSI Social Franchise
Strategy, systems and metrics

Roundtable: Social Sector Franchise Initiative (SSFI)

Helen Blackholly
Vice President and Director of Technical Services

University of New Hampshire
October 2017
Who we are and what we do

Theory of Change
What we do

Every day our 13,000 team members around the world focus on one aim: delivering contraception and safe abortion services to women who need them. Their passion, drive and commitment is paying off. In the last five years, we have doubled our health impact. Our services have given millions of women in the 37 countries where we work the ability to live healthier lives and pursue their ambitions by having children by choice, not chance.

Every 11 minutes a woman dies from an unsafe abortion.
Social Franchise bridging the access gap

MSI Channels: operating across 37 countries

Social Franchising – private sector

- 4,000 SF’s across 16 countries
- 17% of services
- Bridge gap between urban & rural
- Located in areas of “unmet” need
- Low level, mid level providers
- Licenced to practice medicine & operate clinic
MSI Social Franchise – theory of change

INCREASE ACCESS to Safe Abortion/Post Abortion care & contraception

**The franchisee**
- Increases client numbers & revenue.
- Builds their capacity.
- Enhances their reputation.
- Free or subsidised commodities.

**The client**
- Increases access to services.
- Increases the quality of these.
- Increases their affordability.

**The health system**
- Helps address unmet need.
- Strengthens private sector capacity.
- Improves the quality of services.

**Host government**
- Reduces burden on public sector.
- Improves national health indicators.
- Helps organise, professionalise the private health sector.

**MSI**
- Allows us to scale up cost-effectively.
- Allows us to scale up quicker.
- Builds presence in private sector.
What is the deal?

**MSI provides a package of support comprising**

- Training in cross cutting areas (IP, VL, MEM).
- Training in core services (contraception, SA/PAC).
- Annual continuous supportive supervision visits.
- Demand generation, potentially including vouchers.
- Linkages to the health system, e.g. commodities, NHI accreditation.
- Support from a dedicated SF lead

**In return we expect franchisees to**

- Sign a contract / written agreement.
- Pay a franchisee fee and share costs of some investments.
- Adhere to MSI’s clinical policies and guidelines; data validation standards & policies.
- Maintain individual client records and written consent.
- Report aggregated results every month.
- Adhere to pricing guidance.

**We drive performance by**

- Annual clinical quality internal audits of every franchisee; quarterly monitoring and supervision visits.
- Tracking performance with a robust MIS & monthly performance review process.
- Segmenting and de-franchising low performing, poor quality franchisees.
How we improve public outcomes

Measuring impact
Measuring operational performance

KPIs

- Productivity: Long acting methods; SA/PAC, Post abortion family planning & postpartum family planning per franchisee
- % of high impact clients, including 15-19 year olds
- % of franchisees providing SA/PAC
- Clinical Quality (audits & competency assessments)
- Total CYPs (couple year protection)
- Cost per CYP at a channel or regional level
Client insight systems and metrics

MSI conducts client exit interviews and mystery client surveys to understand client profiles and experiences.

1. Profile

- She is 28 years old
- She lives on less than $2.50
- She has three children
- She is married

- 42% <25 yrs
- 29% 25-29 yrs
- 29% >39 yrs

68% of our clients are as poor or poorer than Ayana

75% of our clients are considered high impact clients* by MSI

*adolescents, adopters, living in extreme poverty or lack availability to contraceptive services
Client insight systems and metrics (cont.)

2. Motivation
Ayana is not using contraception but she wants to delay births for two years

3. Information source
Ayanna finds out about us through personal recommendations from her community

- 36% personal interaction
- 14% provider referrals
- 28% community-based distributor
- 8% media/promotional materials
- 8% directional signage

4. Provider choice
Ayanna chooses us because we're close to her, just 26 minutes away

- 2. Reputation
- 1. Proximity
- 3. Recommended

5. Intentions
Ayana already has a preferred method of contraception in mind when she arrives

- 78% of social franchise clients arrive with a desired method in mind

*did not use contraception before their visit
Client insight systems and metrics (cont.)

6. Counselling
Ayana receives client-focused counselling based on her lifestyle and fertility intentions
- 3.6 number of methods counselled on
- 90% felt comfortable asking questions
- 72% felt they received the right amount of information

7. Satisfaction
Ayanna is very happy with the service and would recommend MSI to others
- Respectfulness of Staff: ✓
- Privacy: ✓
- Hours: ✓
- Price: ×
- Waiting Time: ×

8. Advocacy
Ayanna is very happy with the service and would recommend MSI to others
- 72% are highly likely to recommend us in the future
- 76% are highly likely to return for future services.

Ayana plans to return
Value for money

Resourcing inputs for high quality outputs at the right price, e.g. robust procurement, analysing cost drivers.

Ensuring services reach their intended beneficiaries and do not exclude specific groups, e.g. % of clients living on less than $1.25 a day, % of clients aged 15-24 yrs.

Making the most strategic use of available resources to meet our clients’ needs and ensure high impact results

Definition

Assessment framework

Guiding principles

Economy
Efficiency
Effectiveness
Equity

Access
Quality
Choice

Maximising outputs for a given level of inputs, e.g. cost per CYP, CYP per FTE, cost per user served.

Ensuring outputs deliver the desired outcome, e.g. number of services, additional users and unintended pregnancies averted.
Measuring Impact

Designed by MSI to run off service provision data. Can be used from national & organisational perspective.

MSI Social Franchise Contribution 2012-2016

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Challenges

| SCALE & IMPACT – reaching areas of most need with a compelling value proposition |
| Franchising the right people for the journey is key (pro-choice; want to uphold clinical & data standards; to help drive footfall; and will price to meet needs of young people) |

| QUALITY - driving quality is constant work & supervision |
| Infection prevention, medical emergency management, learning from incident management, maintaining accurate records are all areas that demand relentless attention |

Putting client centred counselling at heart of client care and to strengthen standards

| SUSTAINABILITY - tension on cost sharing – someone has to pay |
| Our fee does not cover costs & not all pay fee |
| Ensuring core service offering is affordable with “High Impact” clients (poor, adolescents) |
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**Ayana’s journey of choice**

1. **Profile**
   - She is 28 years old
   - She lives on less than $2.50
   - She has three children
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- **68%** of our clients are as poor or poorer than Ayana
- **75%** of our clients are considered high impact clients* by MSI

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Client insight systems and metrics (cont.)

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4. Provider choice
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*45% of our clients are adopters*

*did not use contraception before their visit

*78% of social franchise clients arrive with a desired method in mind*
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Marie Stopes International
1 Conway Street
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London W1T 6LP
United Kingdom
**Mission**: Global Partners exist to develop communities across the global, delivering real, sustainable hope.

**Vision**: To provide sustainable health care solutions for West African communities.
Theory of Change model:

- Work with reliable and proven local health care leaders
- Provide startup cost for the construction of the Water Well, Buildings and Solar panels.
Theory of Change model:

Using the franchise system: We implement the same model in similar rural west African villages.

**Measure:** inputs, outputs, outcomes and impact

**Evaluate:** Support, value and Capacity

**KPI:** Number of patients, successful deliveries, child survival rate (1-5 years), spend per patient, total gross revenue and positive cash flow.