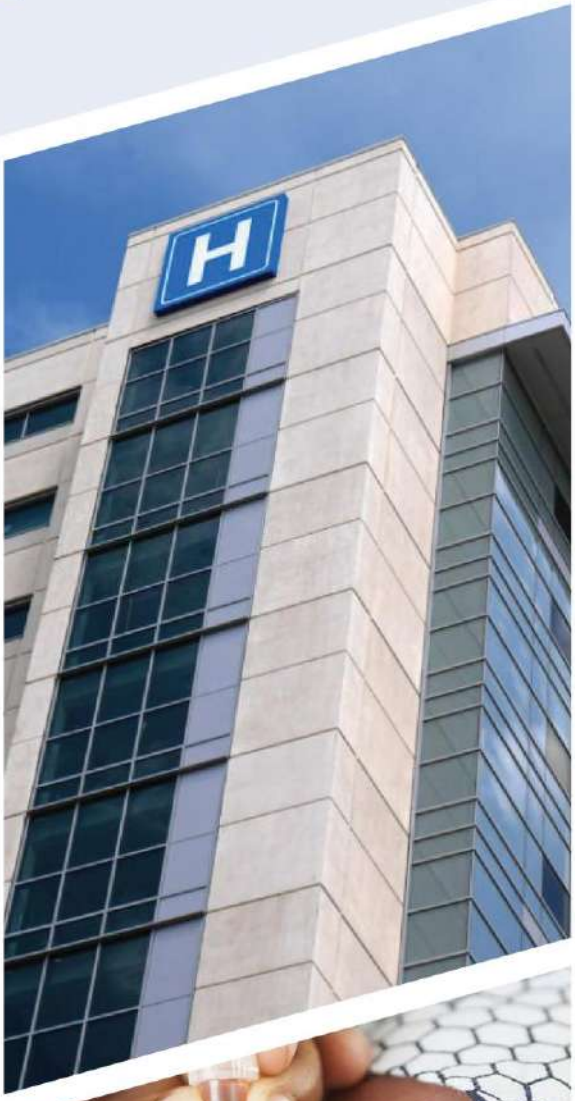
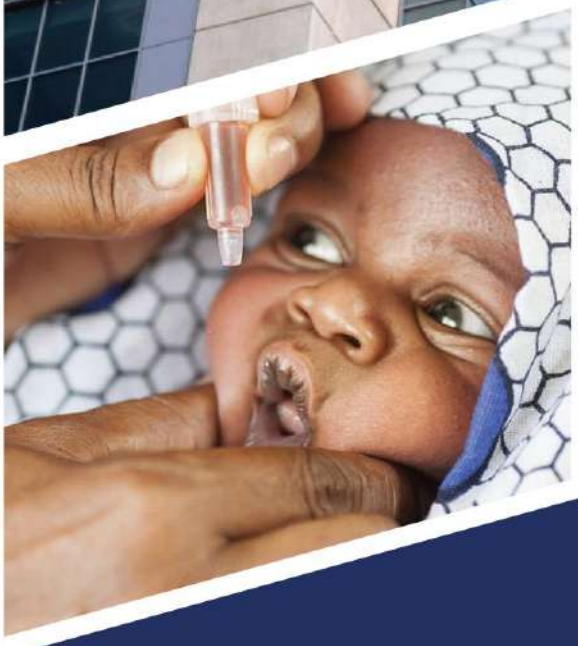
COMPANY PROFILE





www.hscgroup.org

HSCL
Health Systems Consult Limited

Who we are

HSCL is a health and development consulting firm established by a team with extensive experience in international development. HSCL is registered with the Nigerian Corporate Affairs Commission (2009); the Tanzanian Registry of Companies (2014); the Office of Administration and registration in Sierra Leone (2015) and the Office of the registration of companies in Zambia (2016). HSCL has established offices in Nigeria, Tanzania , Zambia and Sierra Leone.

Mission

To provide high impact and cost-effective technical assistance towards improving access to quality health care and achieving sustainable development.

Vision

To become a leading firm, providing sustainable development solutions in Africa.

Brand Promise

We provide top-quality, innovative health and development solutions at highly competitive prices.

Our Value Proposition

01 Our resources

Through our staff strength and network of global consultants, we are able to provide our clients with incisive solutions backed up by our strong understanding of the local environment in the countries where we operate.

02 Our experience

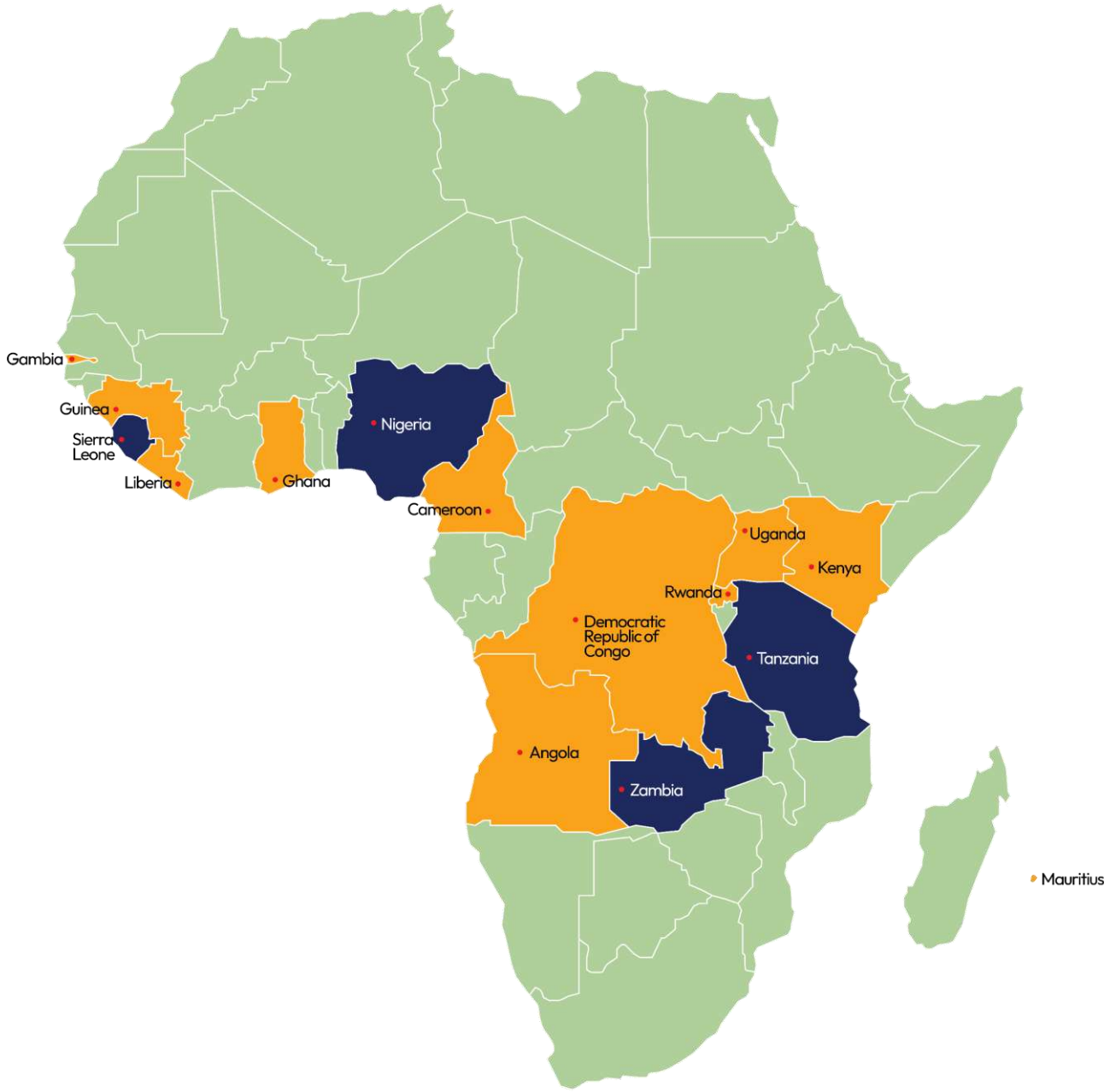
Our cross cutting and varied experience in providing solutions to a wide range of donors, governments and private organisations provides us with a holistic and deep knowledge of the health and development sector in Africa.

03 Our presence

We currently have operational presence in Nigeria, Sierra Leone, Tanzania and Zambia. Each location has an in-country partner that leads business development and program delivery.

Our African presence

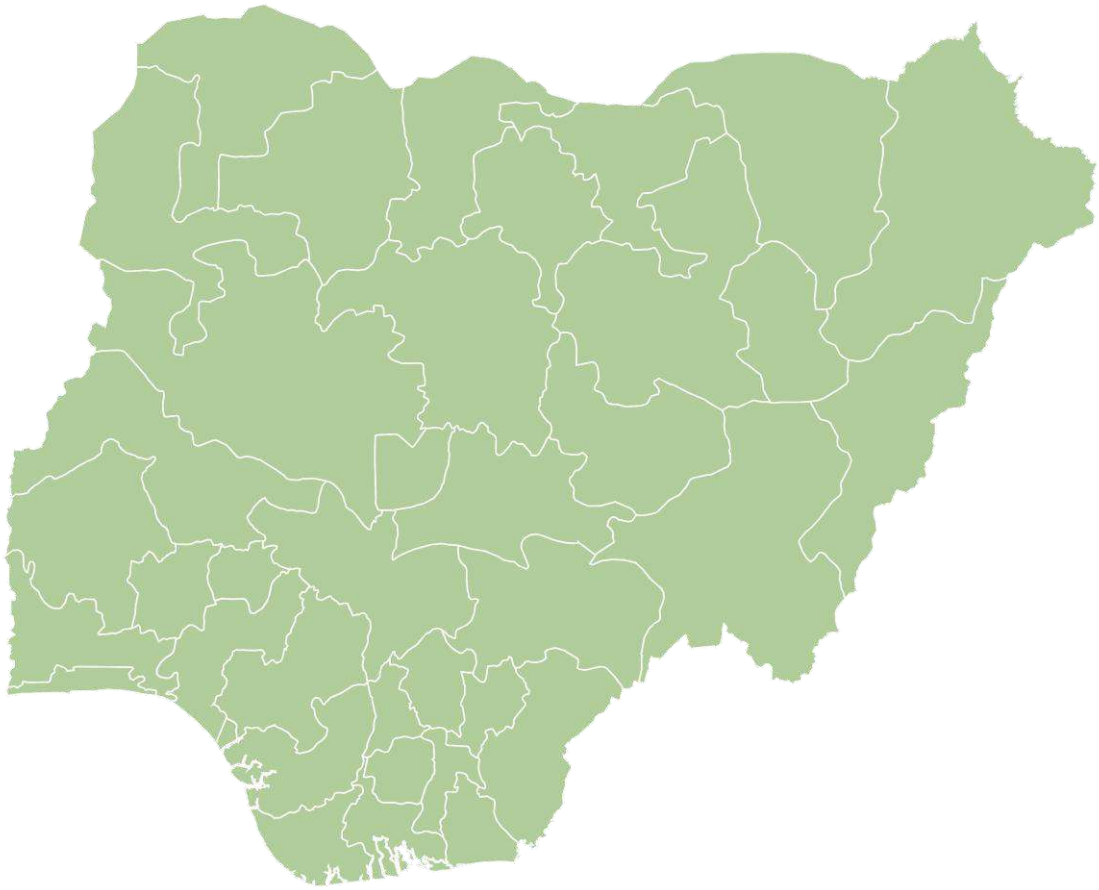
HSCL is registered in four countries within Africa - Nigeria, Sierra Leone, Zambia and Tanzania. Working closely with in-country partners, we have led work for technical assistance, capacity building and advisory work for government, donors and private sector clients in Nigeria, Angola, DRC, Gambia, Ghana, Kenya, Mauritius, Sierra Leone, Tanzania, Uganda and Zambia amongst others



Registered countries

Where we have worked

Our coverage areas within Nigeria



Established coverage states

- HSCL has provided services in all 36+1 states of Nigeria.
- Our offices are strategically located in Abia, Akwa-Ibom, Borno, FCT, Kaduna, Kebbi, Lagos, Niger, Sokoto and Zamfara states which allows us efficiently operate across all the geopolitical zones in the country.
- HSCL was the lead of a consortium (with an international sub-contractor) that implemented a component of the National Supply Chain Integration Project across 36 +1 states under a direct Global Fund contract since November 2015.
- Through these, HSCL has built a pool of mid –senior level local consultants across the different states in Nigeria.

Our Services

We provide a broad spectrum of Consultancy and Implementation services, and we continually strive to deepen our expertise base and expand our portfolio diversity.

Health Programmes Design and Implementation	Strengthening Procurement Supply Chain Management Systems	Policy Analysis & Development
Designing of development programmes and provision of technical assistance for implementation of HIV, TB, Malaria, MNCH, RH etc. programs.	Assessment and policy/strategy development for health products supply chain systems, technical assistance for improving coordination and integration of PSM for improved efficiency.	Provision of technical assistance to support the review and development of sector wide and program specific policies.

Monitoring, Evaluation, Research and Learning	Human Resources for Health (HRH) Development	Health Financing & Economic Reviews
Development of M&E systems including related technology, designing and conducting large scale public health and development research and evaluation and capacity building for MERL.	Health workforce planning, workload analysis, capacity building and temporary placement of consultants for defined projects/timelines.	Development of innovative financing strategies, design and assessment of insurance schemes, costing, economic evaluation of health programmes and public financial management.

Advisory Services
Conducting feasibility studies, market research and development of business plans for hospitals, pharmaceuticals, diagnostic centers etc. the advisory arm provides market intelligence and evidence for decision making ensuring the best-case return on investments

Our Workforce

With a staff size of 44 subject matter experts and a consultant pool of over 200 consultants, we provide our clients with quality services that are tailored to their peculiar context. Our approach to using local resources supported by our international teams gives us a cutting edge.

89	Number of Staff
23	Staff with Health Financing & Systems Strengthening Expertise
13	Staff with Monitoring & Evaluation & Research Expertise
34	Staff with Public Health Programs Design & Implementation Expertise
Over 200	Number of Consultants

Capacity Statement

While a significant portion of the firm's portfolio is focused on health systems strengthening (HSS) through program design, implementation, and evaluation services, the other sector is focused on providing advisory services through cost-effective approaches at national and sub-national levels across the region. With extensive experience in supporting governments and multiple clients' endeavors to achieve universal health coverage, HSCL has a strong track record of providing technical assistance to clients across Africa at national and subnational levels. We have a deep understanding of the Nigerian health system and have successfully delivered numerous public health projects for clients including the Nigerian government, the Global Fund, USAID, the UN System, the World Bank, the Bill and Melinda Gates Foundation, and GAVI. We are experienced in the HSS and RMNCH space and have a strong record in grant proposal development, stakeholder management, and coordination.

Our Core Service Areas & Project Expertise

1

Health Financing & Economic Reviews

- Strategic purchasing for FP/MNCH (Kaduna, Lagos, Bauchi, Yobe)
- Development of state health insurance schemes (Delta, Kaduna, Niger)
- Costed investment cases (ACTIVATE Africa, PVAC)
- Household health expenditure surveys (Abia, Ebonyi, Osun)
- Budgeting process assessments (Federal Ministry of Health)

2

Health Systems Strengthening (HSS)

- National Supply Chain Integration Project (NSCIP)
- Resilient and Sustainable Systems for Health (RSSH)
- Nigeria State Health Investment Project (NSHIP)
- Kaduna Integrated Healthcare System (AfDB proposal)
- Primary Health Care revitalization (10,000 PHCs nationwide)

3

Monitoring, Evaluation, Research & Learning (MERL)

- Gender analysis (TA Connect/BMGF)
- Evaluation of NFELTP, SUSTAIN, and mVacciNation
- Routine immunization grant evaluations (CHAI)
- Market feasibility studies (diagnostics, hospitals, pharmaceuticals)
- TB/HIV referral coordination and social mobilization impact studies

4

Policy Analysis & Development

- National Strategic Health Development Plan II
- Global Fund grant development (Nigeria & Sierra Leone)
- HRH strategic plans (Oyo State)
- HIV/AIDS & TB joint concept notes
- Contingency planning for outbreaks (African Union/ARC)

5

Procurement & Supply Chain Management

- Vaccine stock counts (GAVI/UNICEF)
- Supply chain dashboard development
- SRH commodity production strategy (PVAC)
- Local manufacturing feasibility studies (Abbott, PVAC)

6

Human Resources for Health (HRH)

- HRH strategic planning and labor market assessments
- Capacity building for frontline health workers
- Temporary placement of consultants for defined projects

7

Health Program Design & Implementation

- HIV/AIDS service delivery (USAID, FHI360, NACA)
- Nutrition services (ANRIN – World Bank)
- COVID-19 civil society response coordination (BMGF)
- SRH services integration and demand generation

8

Advisory & Business Development Services

- HMO setup and strategy (Skyda Health)
- Diagnostic center and hospital feasibility studies (KPMG)
- Pharmaceutical market due diligence (KPMG India)
- Economic city health component planning (Enyimba Economic City)

9

Private Sector Engagement

- Landscaping health innovations (PSHAN)
- Private provider integration in HIV/AIDS and FP programs
- Strategic partnerships for SRH and diagnostics manufacturing

Some of Our Publications

Evaluation of the choices and availability of family planning services in Lagos State: A secondary analysis of census-based health facility assessment data from Noi Polls

https://doi.org/10.18488/9.v10i1.3303

Evaluation of healthcare facilities and personnel distribution in Lagos State: implications on universal health coverage

https://doi.org/10.1080/21548331.2023.2170651

Lagos State Hospital Waste Management Practices: A Descriptive Overview with Stakeholders' Role and Key Recommendations. Journal of Environmental Protection, 14, 108-125.

https://doi.org/10.4236/jep.2023.142008

Evaluation of the choices and availability of family planning services in Lagos State: A secondary analysis of census-based health facility assessment data from Noi Polls

https://doi.org/10.4236/health.2023.153018

Choices and availability of family planning services: evidence from census-based health facility assessment data in Bauchi state, Nigeria. MOJ Public Health. 12(1): 61-65

https://doi.org/10.15406/mojph.2023.12.00411

Bed space, referral capacity and emergency response of the healthcare facilities in Lagos state: a key to improving healthcare. MOJ Public Health. 12(1):67–72.

https://doi.org/10.15406/mojph.2023.12.00412

Evaluating the Effectiveness of Quality Improvement Strategies in Mid-Level Private Healthcare Facilities of Lagos State: A Donabedian Model-Based Approach. Journal of Public Health International. 7(1):1-25.

https://doi.org/10.14302/issn.2641-4538.jphi-23-4871

Enhancing Private Healthcare Effectiveness in Lagos State, Nigeria: An Overview of the Effect of Quality Improvement Initiatives and Implications for Sustainable Healthcare Delivery. Health, 16, 93-104.

https://doi.org/10.4236/health.2024.162009

Lagos State Health Facility Assessment Datasets_ HSCL. figshare. Dataset.

https://doi.org/10.6084/m9.figshare.22118315.v3

Bauchi State Health Facility Assessment Datasets_ HSCL. figshare. Dataset.

https://doi.org/10.6084/m9.figshare.22126031.v2

Our Experience: RAPID HEALTH MARKET ASSESSMENT & FEASIBILITY STUDIES TO IDENTIFY OPPORTUNITIES

Client :

Presidential Initiative for Unlocking the Healthcare Value Chain (PVAC)

Service Area:
Technical Assistance

Area of Focus: Technical Assistance for the implementation of Strategic Purchasing for Family Planning

Project Timeline:
2024

Geographic Scope :

Nigeria

Contact for Reference:

Abdu Mukhtar

Abdu.mukhtar@pvac.gov.ng

Overview

To address the challenges of limited access to sexual and reproductive health (SRH) commodities in Nigeria, PVAC engaged HSCL to conduct a comprehensive market survey and feasibility study on Family Planning (FP), Maternal, Newborn, and Child Health (MNCH), and SRH services. This initiative seeks to generate evidence and identify investment opportunities that can strengthen FP, MNCH, and SRH services in Nigeria. It aligns with PVAC's mission to boost domestic manufacturing capabilities and enhance both the accessibility and quality of healthcare services across the country.

Project Goal

The goal of this project is to generate actionable insights and identify investment opportunities to improve access to and the quality of Family Planning (FP), Maternal, Newborn, and Child Health (MNCH), and Sexual and Reproductive Health (SRH) services in Nigeria. By strengthening domestic manufacturing capabilities and fostering strategic investments, the project aims to enhance the availability and sustainability of SRH commodities, ultimately contributing to better health outcomes across the country.

Objectives

- Assess the current market landscape for SRH in Nigeria.
- Identify gaps and opportunities for investment in FP, MNCH and SRH service delivery.
- To evaluate the practicality of implementing new FP, MNCH and SRH interventions.
- Develop recommendations for stakeholders to improve FP, MNCH and SRH ecosystem in Nigeria.

Related Activities

- Develop a health market report
- Conduct dissemination workshop
- Conduct desk review (unpacking SRH value chain, Analysis of key/major players
- Evaluation of trends, insights, challenges, and successes

Our Experience: INCLUSION OF SRH COMMODITY PRODUCTION & SUPPLY IN THE DEVELOPMENT OF PRESIDENTIAL INITIATIVE STRATEGY & VALUE PROPOSITION

Client :

Presidential Initiative for Unlocking the Healthcare Value Chain (PVAC)

Service Area:
Technical Assistance

Area of Focus: Technical Assistance for the Inclusion of SRH Commodity Production & Supply in the Development of Presidential Initiative Strategy & Value Proposition

Project Timeline:
2024

Geographic Scope :

Nigeria

Contact for Reference:

Abdu Mukhtar

Abdu.mukhtar@pvac.gov.ng

Overview

HSCL is providing technical assistance to the PVAC to address the gap in access to sexual and reproductive health (SRH) commodities.

By integrating SRH commodity production and supply into the PVAC framework, HSCL aims to enhance healthcare delivery, promote local production, and reduce reliance on imports. This effort will also help lower out-of-pocket expenses for consumers and improve overall health outcomes in Nigeria. HSCL's support ensures that the initiative effectively addresses the specific needs related to SRH commodities, contributing to broader economic and social development goals.

Project Goal

The overall goal of this project is to integrate sexual and reproductive health (SRH) commodities into the Presidential Initiative on Unlocking Healthcare Value Chains (PVAC) in Nigeria. This integration aims to enhance healthcare delivery, promote local production, reduce reliance on imports, and improve access to affordable SRH commodities. Ultimately, the project seeks to improve health outcomes, reduce out-of-pocket expenses for consumers, and contribute to Nigeria's broader economic and social development.

Objectives

- Conduct a comprehensive evaluation of PVAC's structure, objectives, and implementation processes.
- Perform a detailed analysis of the SRH landscape, including current needs and gaps.
- Develop a strategic plan to enhance and scale SRH commodity production and supply chains.

Related Activities

- Create a strategic value proposition document
- Develop financial models and risk assessment matrices
- Prepare an advocacy report
- Formulate a comprehensive strategic plan for scaling up SRH commodity production and supply
- Disseminate the updated Presidential Initiative strategy and value proposition
- Evaluate local manufacturing capacity for SRH commodities
- Analyze SRH landscape and needs

Our Experience: SUPPORT THE ROLLOUT OF SRH COMMODITIES PRODUCTION STRATEGY THROUGH CAPABILITY STRENGTHENING OF LOCAL MANUFACTURERS

Client :

Presidential Initiative for Unlocking the Healthcare Value Chain (PVAC)

Service Area:
Technical Assistance

Area of Focus: Technical Assistance for the Assessment of Capacity of Local Manufacturers of SRH commodities in Nigeria & Provide support through capacity strengthening Activities.

Project Timeline:
2024

Geographic Scope :

Nigeria

Contact for Reference:

Abdu Mukhtar

Abdu.mukhtar@pvac.gov.ng

Overview

This project, under the Presidential Initiative for Unlocking the Healthcare Value Chain (PVAC), aims to promote the local production of Sexual and Reproductive Health (SRH) commodities in Nigeria. By assessing the capacity of local manufacturers and providing targeted technical support, the initiative seeks to enhance local manufacturing capabilities, reduce reliance on imports, and improve access to quality-assured SRH commodities.

Additionally, the project will stimulate economic growth by creating jobs, generating revenue in the health sector, and fostering national self-reliance in health manufacturing. Through these efforts, the project aims to strengthen Nigeria's healthcare system, improve reproductive health outcomes, and contribute to broader economic and social development goals.

Project Goal

The overall goal of this project is to boost Nigeria's healthcare system by supporting and expanding the local production of Sexual and Reproductive Health (SRH) commodities. By evaluating the capabilities of local manufacturers and offering technical assistance to improve their operations, the project aims to reduce dependency on imported SRH products and ensure a steady supply of high-quality, affordable commodities.

Objectives

- Identify and evaluate local manufacturers of SRH commodities to understand their current production capacity, strengths, and operational gaps.
- Assess the alignment between production capacity and demand for SRH commodities, while exploring opportunities for diversification into other SRH products.
- Create tailored strategies to enhance the capabilities of local manufacturers, ensuring they can meet quality standards and scale production to meet national needs.

Related Activities

- Mapping and Assessing Local Manufacturers
- Technical Support and Capacity Building

Our Experience: RAPID DIAGNOSTICS LOCAL MANUFACTURING FEASIBILITY STUDY FOR NIGERIA

Client :

Abbott

Service Area:
Monitoring and Evaluation, Research and Learning

Area of Focus: Research to understand the legal and regulatory landscape for RDT manufacturing in Nigeria

Project Timeline:
2024

Geographic Scope :

Nigeria

Contact for Reference:

Overview

The local manufacturing of Rapid Diagnostic Test (RDT) kits in Nigeria is emerging as a key strategy to enhance healthcare outcomes and strengthen health security. RDTs, which provide quick, accurate, and cost-effective solutions for detecting infectious and non-communicable diseases, are valuable in resource-constrained settings

HSCL was engaged by Abbott to conduct to a comprehensive feasibility study of the local legal and regulatory landscape and make recommendations for Abbott's strategic entry into the local RDT manufacturing market in Nigeria.

Project Goal

The overall goal is gain crucial insights into the local regulatory landscape, identify potential Third-Party Manufacturers (TPMs) for partnership, and assess the political, economic, and legal factors influencing RDT manufacturing in Nigeria

Objectives

- Map the legal, regulatory, & government policy landscape in Nigeria related to RDT/medical device manufacturing
- Assess the Nigerian president's 'Unlocking the Healthcare Value Chain' mandate.
- Identify suitable TPMs for strategic partnerships
- Provide recommendations for Abbott's entry into local RDT manufacturing in Nigeria

Related Activities

- Conduct desk review (understanding key players, legal and regulatory requirements)
- Analyze existing and future policies and it's influence on RDT manufacturing in Nigeria
- Conduct TPM screening and selection
- Due diligence on selected TPMs
- Develop feasibility study report

Abbott

HSCL

Our Experience: PHYSICAL STOCK COUNT OF VACCINES AND RELATED COMMMODITIES IN NIGERIA

Client :

GAVI and UNICEF

Service Area:
Procurement and supply chain management

Area of Focus:
Strengthening of the vaccine supply chain system

Project Timeline:
2019

Geographic Scope:

North-Central Zone, North-East Zone, Nigeria

~~Project Budget:~~

~~₦90,426,356 (NE)~~

~~₦108,796,600 (NN)~~

Contact for Reference:

Onome Dibosa Osadolor
odibosaosadolor@unicef.org

Nadia Lasri
nlasri@gavi.org

Overview

Vaccine supplies and logistics are a quintessential element of any immunization architecture. An effective routine immunization (RI) sub-system is built around the uninterrupted availability of quality-assured vaccines, and devices (diluents, safe-injection equipment, and other vaccines-related commodities) at the last-mile service delivery points (SDPs). This is only possible when vaccines and related devices reach SDPs on time and in the right quantity as well as ensuring these products are properly stored and accounted for. Poor stock (data) visibility and weak vaccine accountability have been identified as major challenges to the management of vaccine logistics and supplies in Nigeria, especially at the lower levels of the supply chain. As a first step to addressing these challenges, a national stock count of vaccines and related commodities was conducted by the National Primary Health Care Development Agency (NPHCDA) with support from Global Alliance for Vaccine and Immunization (GAVI). HSCL was contracted to conduct the physical stock count in the North Central zone of the country.

Project Goal

To conduct a physical count of the vaccine and device forecasts to enable estimation of the procurement needs of the country for 2020.

Objectives

- To conduct a physical count of all antigens and devices in all the zones, states, satellites, Local Government Area (LGA) dry and cold stores as well as health facilities with cold chain equipment and other vaccine storage points across the zones
- To verify the accuracy and completeness of stock records at all levels
- To obtain key indicators that provide insight into the performance of the supply chain system towards the development of a supply chain dashboard aligned with the Global agreed "Dashboard for Immunization Supply Chain (DISC)"

unicef for every child
Gavi The Vaccine Alliance
HSCL

Our Experience: ENDLINE EVALUATION OF THE mVacciNation PILOT PROJECT

Client :

Adam Smith International

Service Area:
Immunization (Monitoring, Evaluation, Research & Learning)

Area of Focus: Research on the mVacciNation Nigeria pilot project for Routine immunization

Project Timeline:
2019

Geographic Scope:

Kaduna State, Nigeria

Project Budget:

₦ 17,752,900

Contact for Reference:

Queen Nwokonneya

queen.nwokonneya@adamsmithinternational.com

Overview

Immunization of children against vaccine-preventable diseases is a key strategy that has been used over the years to improve the health indices of countries. As part of efforts to improve immunization services in Nigeria, Adam Smith International in partnership with Vodafone, GlaxoSmithKline (GSK) and the National Primary Health Care Development Agency (NHPCDA) implemented the pilot of the mVacciNation mobile application in 48 Primary Health Care Centers (PHCs) across 2 Local Government Areas (LGAs) in Kaduna South and Zaria for a period of 18 months. HSCL conducted an endline evaluation of the pilot project to independently assessed whether the Nigeria mVacciNation project achieved its expected results.

Project Goal

To assess whether the mVacciNation Nigeria pilot project has achieved its objectives of improving data efficiency, stock management and safety; and enhanced health-seeking behaviour of caregivers.

Objectives

- Determine endline values for contextual outcome and impact level performance indicators as outlined in the project results framework
- Collect routine immunization data on data efficiency, stock management, and health-seeking behaviour
- Identify successes and constraints in each of the 5 projects pillars
- Assess stakeholder and beneficiary satisfaction with service provided by mVacciNation
- Document lessons learned from project implementation
- Identify recommendations for mVacciNation Nigeria on scalability and sustainability based on findings

Adam Smith International

HSCL

Our Experience: PHARMACEUTICAL DUE DILIGENCE

Client :

KPMG, INDIA

Service Area:
Monitoring and Evaluation

Area of Focus: Due Diligence of a pharmaceutical landscape in Africa

Project Timeline:
2021

Geographic Scope :

Nigeria, Ghana, DRC, and Angola

Project Budget :

$50,050

Contact for Reference:

Shanbhag, Rahul
rahulshanbhag@kpmg.com

Overview

HSCL in collaboration with KPMG India conducted a due diligence study to gauge market dynamics for the production and sales of pharmaceutical products (dermatology, pain, anti-infectives, anti-malarial) in Angola, Democratic Republic of Congo (DRC), Ghana, and Nigeria. Findings from the due diligence study informed the design of the overall strategy and business operating model for the proposed venture – through the design of a business plan.

Project Goal

To comprehensively evaluate the pharmaceutical healthcare sector within the African landscape, assess the performance of a pharmaceutical brand, and analyze the competitive landscape

Objectives

- To gain deeper insight into the market dynamics of the pharmaceutical industry in the selected countries.
- To review key findings with regard to market size, demand, and product pricing.
- Recommend viable markets for entry based on the understanding of local market realities
- To provide and identify the definition of critical success factors such as operational issues, pricing, and regulation.

Related Activities

- Conducted a market assessment to ascertain the overview of the pharmaceutical healthcare sector, value chain, and Segmentation of the market by patent
- Conducted customer and competitor analysis to assess the competitive landscape and the client's position within it.

Our Experience: NATIONAL SUPPLY CHAIN INTEGRATION PROJECT (NSCIP)

Client :

The Global Fund to fight AIDS, Tuberculosis and malaria

Service Area:
Strengthening Procurement Supply Chain Management Systems

Area of Focus: Technical Assistance for policy development, capacity building and strengthening supply chain management

Project Timeline:
2015 - 2017

Geographic Scope:

36 states in Nigeria and the Federal Capital Territory

Project Budget:

$3,373,657

Contact for Reference:

Moses Maputisi
moses.maputisi@theglobalfund.org

Overview

The Nation Supply Chain Integration Project (NSCIP) is an ambitious and innovative initiative anchored on the need to facilitate the development of an integrated supply chain for health commodities in Nigeria. The project was executed through the National Products Supply Chain Management Programme (NPSCMP) under the Department of Food and Drugs Services (DFDS) of the Federal Ministry of Health with support from major international donors. A baseline assessment of the supply chain systems of health commodities revealed: (i) Federal and State institutions responsible for health commodities supply chain management are grossly under-funded and lack the capacity to deliver their mandate; (ii) Government, donors & private sectors act independently with multiple parallel supply chains; (iii) ineffective last-mile distribution systems; (iv) weak data management systems; (v) waste and expiry of medicines in warehouses.

Project Goal

To address the challenges and strengthen the institutional framework of the Nigeria Supply Chain Management Programme

Objectives

- To integrate the National Health Supply Chain for HIV, Malaria, TB, and Vaccines, Family & Reproductive Health to improve access and availability of medicines to all Nigerians.
- To develop a streamlined, cost-effective and ultimately more sustainable National Health Supply Chain.
- To further engage with the private sector through public-private partnerships to boost supply chain capacity, accelerate performance improvement and deliver minimum pharmaceutical standards in storage and distribution.
- To strengthen National Health Supply Chain Management capabilities at both Federal and State levels via LMCUs to improve control and sustain performance in the long term

The Global Fund
To Fight AIDS, Tuberculosis and Malaria

HSCI

Our Experience: EVALUATION OF ROUTINE IMMUNIZATION GRANT IN NIGERIA

Client :

Clinton Health Access Initiative (CHAI)

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Evaluation of Vaccine delivery efficiency, Data Accuracy, and Coordination of Routine Immunization activities

Project Timeline:

2018

Geographic Scope:

Kano, Lagos, Nasarawa, Niger, Rivers and Yobe, Nigeria

Project Budget:

₦29,154,860

Contact for Reference:
Olukayode Fasominu
ofasominu@clintonhealthaccess.org

Overview

In line with international best practices and project milestones, Clinton Health Access Initiative (CHAI) contracted Health Systems Consult Limited (HSCL) as an independent research agency to conduct a Mid-line and End-line assessment of the routine immunisation grant implemented by CHAI Nigeria in six focus states including Kano, Lagos, Rivers Nasarawa, Niger and Yobe.

Project Goal

To track Chai Health Access Initiative progress in achieving the intended project outcomes.

Objectives

- Determine the extent to which training of RI personnel has improved capacities at different levels of service delivery;
- Evaluate the current capacities for cold chain management at state, LGA and health facility levels;
- Assess the data demand and use at various levels of service delivery points for routine immunization programming;
- Assess the extent to which strengthening of routine immunization(RI), and technical working groups (TWGs) has improved state ownership, institutionalization, and functionality of the TWGs; and,
- Assess the adequacy of local routine immunization planning and funding for the sustainability of routine immunization interventions

Related Activities

- Design of assessment methodology;
- Development of evaluation tools
- Recruitment and training of personnel for data collection;
- Desk reviews of relevant Project documents;
- Collection of data from the field;
- Analysing primary data and;
- Development of a final report on findings for the client

CLINTON HEALTH ACCESS INITIATIVE

HSCL

Our Experience: BASELINE AND MIDLINE SURVEYS FOR QUALITY-ASSURED RAPID DIAGNOSTIC TESTS (QARDTS) IN ANAMBRA, CROSS RIVERS AND OGUN STATES

Client :

UNITAID/Malaria Consortium

Service Area:

Monitoring Evaluation Research and Learning

Area of Focus:

Baseline and Midline Research

Project Timeline:

2016

Geographic Scope:

Katsina and Jigawa, Nigeria

Project Budget:

₦19,275,800

Contact for Reference:

Dr. Kolawole Maxwell
m.kolawole@malariaconsortium.org

Overview

A significant proportion of health care providers particularly in the private sector still practice presumptive diagnosis and treatment for malaria With a view of addressing this problem, Health Systems Consult Limited (HSCL) executed baseline and midline surveys for quality-assured Rapid Diagnostic Tests (QARDTs) with the support of the Malaria Consortium under the auspices of UNITAID. These surveys sought to evaluate the uptake of rapid diagnostic technology for prompt malaria detection.

Project Goal

To evaluate the uptake of quality-assured rapid diagnostic tests for prompt malaria detection.

Objectives

- To provide State-specific estimates for the uptake of QARDTs;
- To determine access to and affordability of QARDTs for malaria;
- To assess the quality of malaria case management
- Assess adherence to treatment algorithms and quality of care.

Related Activities

- Design of assessment methodology
- Development of evaluation tools
- Recruitment and training of personnel for data collection
- Desk review of relevant secondary documents
- Collection of primary data
- Analyzing primary data and;
- Development of a final report on findings for the client

UNITAID malaria consortium disease control, better health HSCL

Our Experience: AN EVALUATION OF THE NIGERIA FIELD EPIDEMIOLOGY AND LABORATORY TRAINING PROGRAM (NFELTP)

Client :

AFENET/CDC

Service Area:
Monitoring, Evaluation, Research and Learning

Area of Focus: Assessment of the NFELT program

Project Timeline:
2022

Geographic Scope :

The six geo-political zones in Nigeria

Amount:

N20,750, 000

Contact for Reference :

Dr Muhammad Shakir Balogun

Resident Advisor

msbalogun@afenet.net

Overview

HSCL evaluated the Nigeria Field Epidemiology and Laboratory Training Program (NFELTP) to assess progress towards the program's objective, serve as an opportunity for program improvement from lessons learned, and recommend strategies for smooth transitioning from donor funds to public funding and management.

The findings from the evaluation provided information on the effectiveness of the NFELTP and generated evidence to inform program improvement and developed sustainability plans

The evaluation targeted the stakeholders involved in NFELTP implementation across Nigeria's six (6) geopolitical zones through qualitative and quantitative data collection methods.

Project Goal

To assess the effectiveness of the NFELTP in achieving its primary objective and providing strategic recommendations for strengthening the coordination and sustainability of the program

Objectives

- To assess the process of program design and implementation;
- To assess progress towards program outcomes;
- To identify problems and constraints encountered in implementing the program;
- To identify essential lessons and make recommendations for future implementation.

Related Activities

- Conducted desk review of project documents
- Develop Evaluation Framework
- Develop protocol and tools for the evaluation
- Train research assistants
- Conduct data collection (Primary and Secondary)
- Analysed data and developed a report

AFENET African Field Epidemiology Network

CDC Centers for Disease Control and Prevention

HSCL

Our Experience: ACCELERATING CONTROL OF THE HIV EPIDEMIC IN NIGERIA

Client :

United States Agency for International Development (USAID)

Service Area:
Health System Strengthening

Area of Focus: Technical support for the implementation of Accelerating Control of the HIV Epidemic in Nigeria cluster 3

Project Timeline:
2022 - 2026

Geographic Scope:

Kebbi, Sokoto and Zamfara states

Project Budget:

$26,000,000

Contact for Reference:
Pamela Gado
pgado@usaid.gov

Overview

Accelerating control of HIV Epidemic in Nigeria Cluster three (ACE3) is a 5- year (2022-2026) project funded by USAID to implement best practices to facilitate HIV/AIDS epidemic control in North-West Nigeria covering the three states of Kebbi, Sokoto and Zamfara states. ACE3 is currently being implemented by a consortium led by Health System Consult Limited and Project HOPE with also a high-risk security challenged areas in Zamfara state. The project developed strategies and methodologies that are driven by evidence and draw from context specific understanding that facilitated access to quality services across the HIV continuum of care.

Project Goal

Our implementation model centers on active case finding, engaging indigenous community mobilizers to drive the community ARV refill group DSD model (CARG) whilst integrating community VL sample collection and partnering with community mentor mothers (ASWHAN) to ensure all pregnant women living in high-risk communities are tested to curb vertical HIV transmission in these communities. To improve linkage and retention, we prioritized same-day initiation using a peer navigator to facilitate assisted referrals, leveraging on facility generated line-list, to ensure clients are tracked and brought clients back to care (BTC), alongside ensuring the transition of eligible clients to Tenofovir/lamivudine/Dolutegravir (TLD) and DTG based regimen for paediatric clients

Objectives

- Increasing Resiliency, Responsiveness and Accountability on the Health System.
- Improved HIV counselling and testing.
- Increasing Access and Provision of HIV/AIDS Services.
- Enhance adherence and successfully suppress HIV viral load.
- TB/HIV integration.
- Gender Mainstreaming.
- Cervical Screening
- Laboratory services support and logistics management.
- Community-based services.
- Health System Strengthening

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Our Experience: ACTIVATE AFRICA- INVESTMENT CASE

Client :

Purpose Africa

Service Area:

Health Financing

Area of Focus:

Technical Assistance for developing the costed investment case in Nigeria

Project Timeline:
2024

Geographic Scope :

36 + 1 states, Nigeria

Contact for Reference:
Amir Hagos
ahagos@purposeafrica.com

Overview

The Federal Ministry of Health, in collaboration with Purpose Africa and supported by HSCL, led the ACTIVATE Africa investment case under the Presidential Initiative on Unlocking Healthcare Value Chains (PVAC). The focus is on restructuring Nigeria's health product manufacturing to boost domestic production of essential medicines, vaccines, and biologics. HSCL was engaged to provide technical assistance for developing the costed investment case aimed at strengthening clinical research capacity in Nigeria.

Project Goal

The goal is to establish functional clinical research centers, attract clinical trials, develop skilled personnel, ensure quality health data for decision-making, and generate jobs and revenue through sustained clinical trial opportunities, while adhering to regulations.

Objectives

- Establish functional clinical research centres and increase the number and distribution of clinical research and trials
- Set up a national clinical trials data repository
- Improve the mix of human resources for clinical trials. Goals

Related Activities

- Conducted desk review of relevant documents
- Developed assessment Framework
- Developed protocol and tools for the assessment
- Trained research assistants
- Conducted data collection (Primary and Secondary)
- Analyzed data and developed a report
- Development of an Investment case document

PVAC

Purpose Africa

HSCL

Our Experience: DEMAND SIDE FINANCING (DSF) PROJECT

Client :

Bill & Melinda Gates Foundation

Service Area:
Health Financing

Area of Focus:

Technical assistance to the states in the design and implementation of state contributory health scheme

Project Timeline:
2017-2020

Geographic Scope :

Kaduna, and Niger, Nigeria

Project Budget:

$1,779,000

Contact for Reference:
Benson Obonyo
bensonobonyo@gatesfoundation.org

Overview

Financial access is a key contributor to underutilisation of Primary Health Care(PHC) services in Nigeria. Healthcare is financed primarily through out-of-pocket expenditure which as of 2016, accounted for 70% of total health expenditure in Nigeria. As part of on-going national health reforms aimed at reducing Out of Pocket Expenditure (OOPE) through pre-payment mechanisms, HSCL in collaboration with Results for Development(R4D) provided technical assistance to the government of Kaduna, and Niger states for the design and implementation a social health insurance scheme (pro-poor scheme) in both states

Project Goal

To strengthen the strategic purchasing function of the State Health Insurance Scheme (SHIS) for family planning (FP) and maternal and child health (MNCH) services from private providers, to increase access and uptake of FP/MNCH services.

Objectives

- Provide technical assistance for the design of state-level health financing mechanisms;
- Support the implementation, and evaluation of these mechanisms;
- Build the capacity of state actors to continue to provide sustainable implementation support after the duration of the investment.

Related Activities

- Conducted a baseline assessment to generate evidence to guide scheme design
- Review of the bill establishing the scheme to ensure alignment with best practices
- Design of key components of the health insurance scheme including resource mobilization, pooling, purchasing, and performance management;
- Design of mechanisms for the definition, and identification of vulnerable and target populations;
- Support establishment of the Agency responsible for managing the scheme
- Development of a Monitoring and Evaluation plan for the scheme

Our Experience: NIGERIA STATE LED-STRATEGIC PURCHASING FOR FAMILY PLANNING AND MATERNAL NEWBORN AND CHILD HEALTH (SP4FP +MNCH)

Client :

Bill & Melinda Gates Foundation

Service Area:
Health Financing

Area of Focus: Technical Assistance for the implementation of Strategic Purchasing for Family Planning

Project Timeline:
2018-2023

Geographic Scope :

Bauchi, Lagos, Yobe, Nigeria

Amount:

$5,000,000

Project Budget:

Rodio Diallo

rodio.diallo@gatesfoundation.org

Overview

Family planning (FP) is crucial for advancing reproductive, maternal, and child health. FP has numerous positive benefits on the reproductive and sexual health of women including reducing unmet needs for contraception, lowering fertility, reducing complications from abortions and preventing maternal and child deaths. These numerous benefits make it a critical factor for the improvement of MNCH indices and development, especially in Nigeria, which has the largest population in sub-Saharan Africa. In most recent times, interventions aimed at improving poor Maternal Newborn and Child Health (MNCH) indices are focused on using financing mechanisms such as the State Social Health Insurance Schemes (SSHIS) as the vehicle for financing a basic package of health care for citizens and residents. In line with this, HSCL is providing technical assistance to the government at the sub-national level to strengthen the capacity for strategic purchasing for family planning services through private providers using the state health insurance scheme as a vehicle.

Project Goal

To strengthen the strategic purchasing function of the State Health Insurance Scheme for family planning services from private providers, to increase access and uptake of FP services.

Objectives

- Strengthen the infrastructure and capacity of the Lagos State Health Management Agency and associated agencies for strategic purchasing of health services (inclusive of FP)
- Strengthen the capacity of private sector providers for efficient delivery of FP services
- Build the capacity of state actors to develop and implement interventions on demand generation for FP services

Related Activities

- Conducted scoping assessment to determine the current status of the state health insurance scheme, FP integration efforts and refine technical assistance plan
- Engaged Lagos State Health Insurance Agency (LASHMA), the Health Facility Monitoring and Accreditation Agency (HEFAMAA), State Ministry of Health, development partners in the state, providers and other key stakeholders, to understand the landscape and develop the FP integration concept
- On-going technical assistance and capacity-building support to Lagos State Health Insurance Agency to improve the systems, processes, and capacity for health insurance management in Lagos.

BILL & MELINDA GATES foundation

HSCL

Our Experience: BASELINE ASSESSMENT FOR THE IMPLEMENTATION OF DELTA STATE CONTRIBUTORY HEALTH SCHEME

Client :

Delta State Government

Service Area:

Health Financing and Research and Evaluation

Area of Focus:

Research for the establishment of a Health Insurance Scheme

Project Timeline:

2016

Geographic Scope:

Delta, Nigeria

Project Budget:

$163, 790

Contact for Reference:

Dr. Ben Nkechika
Nkechika@hotmail.com

Overview

Delta State Government engaged Health Systems Consult (HSCL) to conduct a baseline assessment to determine key contextual and health factors that are important for the implementation of its contributory health scheme, a prepayment scheme for health care. The findings from the baseline assessment guided implementation of the scheme as well as providing a baseline for periodically assessing achievement of the health insurance program.

Project Goal

To determine key contextual and health factors needed to appropriately design and successfully implement the health insurance scheme in Delta State.

Objectives

- Determine health-seeking behaviour and geographical access to health services of Delta households.
- Determine household health care expenditure and willingness to pay for health insurance.
- Provide information that can guide the state in developing a fit-for-purpose implementation plan for rolling out a contributory health scheme to all Deltans
- Develop strategies to strengthen the health system and targeting interventions appropriately
- Provide a baseline against which progress in health systems improvement and health insurance coverage can be periodically measured.

Related Activities

- Design of assessment methodology which was adapted Service Availability and Readiness Assessment (SARA) tools
- Development of evaluation tools
- Recruitment and training of personnel for data collection
- Desk review of relevant secondary documents
- Collection of primary data
- Analyzing primary data and;
- Development of a final report on findings for the client

Our Experience: PRIMARY HEALTH CARE AND BASIC HEALTH CARE PROVISION FUND (BHCPF) LANDSCAPING ASSESSMENT

Client :

Bill and Melinda Gates Foundation (BMGF)

Service Area:
Monitoring and Evaluation

Area of Focus: Assessment of the PHC and BHCPF implementation landscape

Project Timeline:
2022-2023

Geographic Scope :

Borno, Gombe, Nasarawa, Niger, Sokoto, Bauchi, Lagos, Yobe, Kaduna, Kano, Nigeria

Amount:

N229,376,000

Project Budget:

Firdausi Umar Sadiq.-

Firdausi.umarsadiq@gatesfoundation.org

Overview

HSCL implemented a landscape assessment of the Basic Health Provision Fund (BHCPF) implementation across the 10 Gates Foundation focus states to identify critical priorities and gaps in order to guide on how to target and maximize BMGF support in the implementation states, as well as identify opportunities for configuring both system strengthening and policy and advocacy bodies of work for effectiveness and impact in driving BHCPF success. The findings of these assessments will guide more strategic investments in the states' general health financing and primary healthcare delivery systems.

Project Goal

The task is to assess the Primary Health Care landscape and BHCPF implementation across the 10 Gates Foundation focus states.

Objectives

- Identify critical priorities and gaps to guide on how to target and maximize BMGF support in the implementation states.
- Identify opportunities for configuring both the system strengthening and policy and advocacy bodies of work for effectiveness and impact in driving BHCPF success.

Related Activities

- Co-development of assessment tools, analysis plan
- Recruitment and training of personnel for data collection.
- Conducted Desk Reviews and primary data collection
- Analysis and synthesis of data
- Develop a Landscape Assessment Report and propose TA/Investment recommendations guided by findings

BILL & MELINDA GATES foundation

HSCL

Our Experience: DEVELOPMENT OF GLOBAL FUND PROPOSALS

Client :

The Global Fund Country Coordinating Mechanism & The National Tuberculosis and Leprosy Control Program/ National Agency for Control of AIDS (Nigeria)

Service Area:

Policy Analysis and Development

Area of Focus:

Technical Assistance for development of a joint concept note for HIV/AIDS and TB

Project Timeline:

2009 - 2014

Geographic Scope:

Nigeria

Project Budget:

$80,000

Contact for Reference:

Prof John Idoko
Director General, NACA
jonidoko@yahoo.com

Overview

Health Systems Consult Limited (HSCL) provided support to National Agency for Control of AIDS (NACA), the HIV/AIDS division of the Federal Ministry of Health, National Tuberculosis & Leprosy Control Program (NTBLCP) of the Federal Ministry of Health and the Country Coordinating Mechanism (CCM) in Nigeria to prepare a joint concept note for HIV/AIDS and TB that will highlight the country's high priority areas for the HIV and TB prevention and treatment needs for submission to the Global Fund. The project involved the provision of technical lead consultants for the development of Global Fund proposals from 2009 to 2014 including NFM Concept note. Specifically, policy and strategy document reviews were done, and successful proposals developed which included implementation and coordination frameworks for all relevant modules including PSM as a sub-set of Health Systems Strengthening. The Supply Chain integration project was one of the key themes articulated into the concept note.

Project Goal

Technical support for the preparation of a joint concept note for HIV/AIDS and TB that will highlight the country's high-priority areas for HIV and TB prevention and treatment needs.

Objectives

- Support organization, facilitation and preparation of summary tables for programmatic and financial gaps analysis workshop for a joint TB and HIV concept note that encompasses health systems
- Support preparation for writing, review, finalization and submission to the Global Fund of a joint TB and HIV concept note for Nigeria that encompasses TB, HIV and health systems strengthening interventions
- Facilitate preparation of a consultancy report summarizing the concept note development process, lessons learned and future recommendations

Related Activities

- preparation of the proposal
- Supported National Agency for Control of AIDS, National Tuberculosis & Leprosy Control Program, National AIDS & STDs Control Program, Country Coordinating Mechanism to facilitate gap analysis target to harmonize targets between TB and HIV programmes;
- And to coordinate concept note development and expanded teams
- Prepare final draft joint TB/HIV concept note, facilitate its review, endorsement and submission to the Global Fund.

FEDERAL MINISTRY OF HEALTH

NATIONAL AGENCY FOR THE CONTROL OF AIDS NACA

HSCL

Our Experience: GENDER ANALYSIS CONSULTANCY

Client :

TA Connect/Bill & Melinda Gates Foundation

Service Area:
Monitoring, Evaluation, Research and Learning

Area of Focus: Technical Assistance for the implementation of Strategic Purchasing for Family Planning

Project Timeline:
2023

Geographic Scope :

Bauchi, Yobe, Gombe, Borno and Sokoto, Nigeria

Project Budget:

NGN 45,000,000

Contact for Reference:

Adetosoye Adebanjo
adetosoye.adebanjo@taconnect-ng.org

Overview

HSCL is currently conducting an in-depth state-level gender analysis aimed to shed light on the multifaceted factors contributing to gender inequalities across the selected regions. These regions encompass a diverse range of sociocultural norms, economic conditions, and healthcare infrastructures, offering a valuable opportunity to identify both common themes and unique challenges related to gender disparities.

The analysis will also identify gaps, limitations, and available resources or structures that influence and determine the degree to which sexual behavior, risk-taking, and health-seeking behavior are affected, as well as the access to and utilization of the continuum of care for Reproductive, Maternal, Newborn, Child, and Adolescent Health and Nutrition (RMNCH+N).

Project Goal

The primary objective of this analysis is to examine and understand the numerous challenges and opportunities that confront women and girls within the context of Reproductive, Maternal, Newborn, Child Health, and Nutrition (RMNCH+N) services.

Objectives

- Assess the influence of gender roles and norms, investigate harmful gender norms and practices
- Evaluate the availability and quality of Gender-Based Violence (GBV) services
- Analyze socioeconomic factors affecting access to RMNCAH+N services.

Related Activities

- Develop Gender Analysis Protocol and Data Collection Tools
- Conduct primary data collection
- Conduct stakeholder mapping and engagement
- across the study states
- Develop Gender Strategies document/ Gender
- analysis report
- Develop Manuscript for Publication

TA CONNECT

BILL & MELINDA GATES foundation

HSCL

Our Experience: PREFEASIBILITY STUDY AND MARKET ASSESSMENT FOR THE HEALTH COMPONENTS OF AN ECONOMIC CITY

Client :

KPMG

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus: Research to understand the Nigerian healthcare institution, pharmacy, and medical device industry

Project Timeline:
2022

Geographic Scope :

Lagos, Abia State, FCT Nigeria

Project Budget:

$90,000

Contact for Reference :

Odede, Olasunkanmi
Olasunkanmi.Odede@ng.kpmg.com

Overview

Nigeria represents a huge untapped market for healthcare given it is the largest economy in Africa (by GDP) and the underinvestment in its health sector.

HSCL conducted a pre-feasibility study, market assessment, and modeled scenario investment options for the establishment of a Health Sub-city proposed to be developed as a core component of an Economic City in South-Eastern Nigeria with a view to ascertaining its bankability, The health components involved; i) a Medi City comprised of a Centre of Excellence Hospital and a Health Training Institution, ii) a Pharmaceutical Manufacturing Hub, and iii) Medical Device Manufacturing Park.

Project Goal

The overall goal of the project was to conduct a pre-feasibility study and market assessment for the Health Sub-city of EEC that will improve the capacity to provide quality and affordable healthcare in line with achieving universal health coverage.

Objectives

- Evaluate the current healthcare market in Nigeria to identify opportunities, gaps, and potential demand for healthcare services.
- Model and assess various investment options for the development of the Health Sub-city, considering cost-effectiveness and sustainability.
- Assess Regulatory and Compliance Requirements

Related Activities

- A detailed review of the health industry outlook, disease burden, regulatory and legal requirements, value chain, competitive analysis, market and location analysis, as well as strategic operations of health maintenance organizations.
- Benchmarking of similar hubs for medical services, health training institutions, medical devices, and pharmaceutical manufacturing
- Development of an execution plan for the proposed business; highlighting the structure, staff needs, and operational plan.

Our Experience: STRENGTHENING CONTINGENCY PLANNING MECHANISMS FOR OUTBREAKS & EPIDEMICS (O&E) IN SELECT AFRICAN UNION MEMBER STATES

Client :

African Risk Capacity (ARC)/African Union (AU)

Service Area:
Health Financing

Area of Focus:

Strengthening Response Systems for Outbreaks & Epidemics

Project Timeline:
2018

Geographic Scope:

Guinea & Uganda

Project Budget:

$80,786

Contact for Reference:
Amadou Bah
Amadou.bah@wfp.org

Overview

The African Risk Capacity (ARC), a specialized agency of the African Union (AU) provides financial tools and infrastructure to help the AU Member States to manage disaster risks and improve response to disasters by reducing the time it takes to mobilize financing for the response. This is achieved through the combination of three critical elements: early warning, contingency planning, and insurance. HSCL is contracted to execute workstream 2 of the project, which includes supporting the development of Outbreaks & Emergency contingency planning standards, guidelines, and templates that member states can adopt as well as develop country-specific, pathogen-specific contingency plans. Selected pathogens for pilot implementation in Uganda and Guinea include Ebola, Marburg, Lassa Fever and Meningitis. HSCL is also supporting African Risk Capacity in strengthening its technical review mechanism for contingency planning to improve efficiencies.

Project Goal

To support AU member states to improve their capacities to better plan, prepare and respond to extreme weather events & natural disasters.

Objectives

- To undertake a review of current global practices of responding to outbreaks & epidemics
- To develop standards, guidelines and templates for outbreak and epidemic contingency planning based on existing international standards
- To support pilot countries to develop country-specific, pathogen-specific contingency plans using the standards, guidelines and templates
- Support the review and revision of the current African Risk Capacity structure for outbreaks and epidemics.

Related Activities

- Review of existing international standards for responding to outbreaks and epidemics.
- Development of contingency planning templates
- Revision of the organization structure of African Risk Capacity for outbreaks and epidemics to reflect current realities.

African Risk Capacity

HSCL

Our Experience: UNDERSTANDING THE BARRIERS AND FACILITATING ACTORS IN SEEKING CARE FOR SICK CHILDREN UNDER THE AGE OF FIVE IN NIGERIA

Client :

USAID/John Snow Inc.

Service Area:
Monitoring, Evaluation, Research & Learning

Area of Focus:

Research to understand barriers in seeking care for U5 children

Project Timeline:
2018

Geographic Scope:

Ebonyi and Kogi State, Nigeria

Project Budget:

₦39,597,206

Contact for Reference:
Leanne Dougherty
Leannedougherty@jsi.com

Overview
HSCL designed and implemented formative research on understanding the barriers and facilitating factors in seeking care for sick children under the age of five in Nigeria. This was done to inform program design and implementation arrangements for the Maternal and Child Survival Program (MCSP) between 2017 and 2018.

Project Goal
To inform program design and implementation arrangements for the Maternal and Child Survival Program (MCSP) between 2017 and 2018.

Objectives
- Explore how presentation, recognition and interpretation of illness signs and symptoms in the household influence care-seeking for sick children;
- Understand how women, men and family members interact in terms of seeking advice and negotiating access to care;
- Explore how social norms, gender roles and financial and geographic access influence treatment and care-seeking decisions; and,
- Understand how previous experiences and perceptions of quality of care across types of providers affect care seeking patterns for sick children

Related Activities-
- Design of assessment methodology
- Development of evaluation tools
- Recruitment and training of personnel for data collection
- Desk review of relevant secondary documents
- Collection of primary data
- Analyze primary data and;
- Development of a final report on findings for the client0

USAID FROM THE AMERICAN PEOPLE
JSI JOHN SNOW, INC.
Maternal and Child Survival Program
HSCL

Our Experience: COVID-19: COORDINATING AND MOBILIZING CIVIL SOCIETY RESPONSE IN NIGERIA

Client :

Bill & Melinda Gates Foundation

Service Area:
Health Financing

Area of Focus: Supported the coordination and mobilization of multi-sectoral civil society response to the COVID-19 pandemic

Project Timeline:
2020-2021

Geographic Scope :

36 + 1 states, Nigeria

Amount:

$117,246

Contact for Reference :

Overview

HSCL led a consortium that implemented the Gate's Foundation-funded "Coordinating and Mobilizing Civil Society Response in Nigeria" (COMCIRIN) project to strengthen the capacity, coordination, and mobilization of civil society's response to COVID-19, to mitigate community transmission and minimize the health, social and economic impact at the community level. This involved establishing relationships with CSOs who have deep experience working across communities in the 36 + 1 states in Nigeria on varied development issues. Key TA implementation of the project was guided across four different pillars - coordination, capability, communication, and accountability.

Project Goal

To gain a deeper understanding of community experiences with the pandemic and its response to better inform policy and action.

Objectives

- To promote behavior change and contribute community insights to the COVID-19 response at national, state, LGA, and community levels
- To improve the capacity of CSOs to contribute to the government's COVID-19 response efforts; support communication and promote behavior change and contribute to community insights into the COVID-19 response
- To identify multi-sectoral local innovations responses for the pandemic at the LGA and community levels

Related Activities

- Established mechanisms to foster accountability and provide feedback that positively influences government policy and strategies
- Strengthened the technical and organizational capacity of the CSOs, and Improving coordination and integration of CSOs' efforts at the subnational and community level in contributing to the COVID-19 response within their communities,
- Mapped and tracked COVID-19 response innovations.

BILL & MELINDA GATES foundation

HSCL

Our Experience: HEALTH MAINTENANCE ORGANIZATION SET-UP AND BUSINESS DEVELOPMENT

Client :

SKYDA HEALTH NIGERIA LIMITED

Service Area:

Advisory

Area of Focus: Technical Assistance for the set up of a Health Maintenance Organization

Project Timeline:
2022-2023

Geographic Scope :

Nigeria

Project Budget:

Unspecified

Contact for Reference:

Professor Ibrahim Abubakar

ehdciabu@gmail.com

Overview

HSCL led a strategic business development initiative with the aim of establishing a Health Maintenance Organization (HMO) that would become one of the leading players in the highly competitive health insurance market in Nigeria. Recognizing the immense potential in Nigeria's healthcare sector and the growing demand for reliable health insurance, HSCL undertook this project with the objective of supporting Skyda in bringing high-quality, accessible healthcare coverage to a broader population while positioning itself as a key player in the industry.

Project Goal

To become one of the top five market leaders in the health insurance space in Nigeria.

Objectives

- To secure the necessary regulatory approvals and licenses for operating an HMO in Nigeria
- To develop a comprehensive business plan and strategy for the HMO's market entry and growth
- Develop insurance products tailored to the Nigerian market.

Related Activities

- Development of a Business plan and strategic documents
- Organizational Development, including revision of organogram and operating model
- Health Benefits Package Design
- Development of an Investment case and investor pitch kits

SKYDA HEALTH LIMITED

HSCL

Our Experience: SCALING UP (REVITALISING) THE PRIMARY HEALTH CARE DELIVERY SYSTEM

Client :

Federal Ministry of Health Nigeria

Service Area:

Health Programmes Design

Area of Focus:

Business Case Analysis of Model Options for Primary Health Reforms for the Ministry for Health, Nigeria

Project Timeline:

2016

Geographic Scope:

Nigeria

Project Budget:

₦ 10,000,000

Contact for Reference:

Dr Ritgak Tilley-Gyado
rasd2000@Hotmail.com

Overview

The Primary Health Care delivery remains the weakest link in the health care system – only approximately 1 out of every 5 primary health care center is functional - and without significant and drastic intervention at this level, Nigeria is not likely to achieve the health-related sustainable development goals. The Government of Nigeria as part of its commitment to achieving universal health coverage is set to revitalise the primary health care system by ensuring the functionality of 10, 000 primary health care centers - at least 1 functional primary health care center per political ward in Nigeria – to provide quality primary health care to 100million Nigerians. The scale-up of the 10,000 primary health service across the country was based on the key principle of long-term sustainability. Thus, the States will play a critical role in implementing the project and ensuring the expected outputs and outcomes are achieved.

Project Goal

To provide options for the governance, financing and operations of Primary Health centers to improve their performance and impact on the Nigerian Health systems.

Objectives

- Ensure equity in access to primary health care services
- Ensure health care services provided are of the appropriate quality
- Protect the poor and vulnerable from suffering financial hardship in accessing primary health care

Related Activities

- Definition of structures for accountability and transparency across the different government Ministries, Departments and Agencies which provide oversight of the primary health center's functions
- Definition of options for managing the operations of the primary health centers and consideration of public-private partnerships (outsourcing models) to drive efficiency and effectiveness

FEDERAL MINISTRY OF HEALTH

HSCI

Our Experience: RESILIENT AND SUSTAINABLE SYSTEMS FOR HEALTH (RSSH)

Client :

Management Science for Health (MSH)

Service Area:
Health System Strengthening

Area of Focus: Technical Assistance for public financial management, human resource for health, state health insurance scheme

Project Timeline:
2019-2020

Geographic Scope :

Kaduna, Imo, and Oyo States, Nigeria

Amount:

N689,171,574.90

Contact for Reference:
Chamberlin Onuoha
chamberlinonuoha@msh.org

Overview

As many countries continue to progress towards the achievement of UHC goals, sustainable mechanisms for financing healthcare, improvements in human resources for health management and budget processes for health as well as strengthening systems for health accounts have been identified as crucial.
The Global Fund's Catalytic Health System Investment Programme for prioritised states in Nigeria including Kaduna, Imo and Oyo clearly identifies a number of key interventions to strengthen health systems in the focus states. A landscape assessment was conducted in the focus states to determine if the priority interventions previously identified in the profiles remain relevant.

Project Goal

To improve access to, and utilization of quality primary health care services and the reduction of out-of-pocket payments with an emphasis on pregnant women, children, and those living in poverty.

Objectives

- These interventions include amongst others:
- Strengthen public financial management (PFM) capacity of the Ministries of Health in Kaduna, Imo and Oyo to develop, execute, and advocate for realistic and evidence-based spending on health in line with international best practices;
- Conduct necessary actuarial analysis and roll out/support state health insurance schemes; and,
- Strengthen human resources for health including assessing the health labour market in the focus states.

Related Activities

- Conducted a baseline assessment to generate evidence to guide scheme design
- Review of the bill establishing the scheme to ensure alignment with best practices
- Design of key components of the health insurance scheme including resource mobilization, pooling, purchasing, and performance management;
- Design of mechanisms for the definition, and identification of vulnerable and target populations;
- Support establishment of the Agency responsible for managing the scheme
- Development of a Monitoring and Evaluation plan for the scheme.

msh Management Sciences for Health

HSCI

Our Experience: DEVELOPMENT OF THE STATE HUMAN RESOURCES FOR HEALTH STRATEGIC PLAN

Client :

Intra-Health / Oyo state Ministry of Health)

Service Area:

Policy Analysis and Development

Area of Focus:

Technical assistance to the state in the development of the state-specific HRH Strategic and Implementation Plan

Project Timeline:

2014

Geographic Scope:

Oyo State, Nigeria

Project Budget:

$52,750.00

Contact for Reference:

Dr Sola Akande
ireeo@yahoo.co.uk

Overview

The National Human Resources for Health Policy 2007 and the draft National Human Resources for Health Strategic Plan (2008-2012) sets out the basis for human resource planning, management and development across the health sector. Ensuring availability and access to a well-skilled health workforce in areas where they are most needed poses a major challenge for the health sector. In line with the National Human Resources for Health Policy and the National Strategic Development Plan 2010-2015, each state is mandated to adopt and domesticate the National Human Resources for Health Policy to guide Human Resources for Health developments within the state. Health Systems Consult Limited (HSCL) provided technical assistance to Oyo State Ministry of Health (Nigeria) in the development of the documents.

Project Goal

To develop of state-specific human Resources for health Strategic and Implementation Plans that are aligned and integrated with the National Human Resources for Health Policy, the Human Resources for Health Priority Area of the State Strategic Health Development Plan and the state's planning and budgeting cycles.

Objectives

- Provide technical assistance for the development of human resources for health developments Strategic and Implementation Plans ;
- Support the state ministry of health to facilitate the establishment and functioning of a mandated state human Resources for health development technical working group to develop the human Resources for health Strategic and Implementation Plans

Related Activities

- Participated in preparatory meetings with client and stakeholders for briefing and joint planning for the project
- Documented and conducted a literature review on the national and state human resources context
- Conducted a situational analysis
- Developed a refined methodology, work plan and timeframe for project
- Facilitated regular human Resources for health development technical working group meetings to conduct further problem analysis, identify human resources for health issues and challenges, refine the situational analysis and develop strategies, activities and M&E framework for the human Resources for health Strategic and Implementation Plans
- Facilitated stakeholder consultations throughout the process to validate human Resources for health technical working group outputs, share information and build consensus and ownership
- Presented key deliverables for review and endorsement

Our Experience: ACCELERATING NUTRITION RESULT IN NIGERIA (ANRIN)

Client :

World Bank

Service Area:

Service Delivery

Area of Focus:

Community-Based Provision of Nutrition Commodities for Pregnant Women and U-5 Children

Project Timeline:

2022 - 2026

Geographic Scope:

Abia State, Nigeria

Project Budget:

N 1,061,098,884.88

Contact for Reference:

Dr Eugene Uhuaba
centeugene@yahoo.com

Overview

The Government of Nigeria, with support from development partners, has made efforts to address the issue of malnutrition through the development and introduction of several policies and initiatives. These initiatives have, however, made little impact in achieving the national target of reducing the proportion of people who suffer hunger and malnutrition by 50% by 2025. HSCL serving as a Non-State Actor (NSA) is creating demand and providing a community based basic packages of nutrition services (including commodities) on World Bank-supported Accelerating Nutrition in Nigeria ANRiN project in Abia State to improve access and utilization of community-based quality nutrition services towards reducing the malnutrition rates in the state.

Project Goal

The goal of HSCL's intervention is to improve access to and utilization of community-based quality nutrition services as well as the resultant impact of reducing the malnutrition rate in Abia state and Nigeria in general, through a mix of counseling and service delivery strategies, in an equitable and sustainable manner. Our intervention aims to create sustainable platforms for: Pediatric/Adolescent Care and Treatment, prevention of mother-to-child transmission (PMTCT), TB/HIV Care, and Prevention of pre-exposure Prophylaxis among others.

Objectives

- Creating awareness and knowledge on Maternal, Infant and Young Child Feeding (IYCF) practices through community structures to facilitate behavioral change;
- Strengthen mechanisms for distribution, tracking of commodities and challenges with data quality to reduce incidences of stock-out and resource accountability; and
- Establish and strengthen the existing and performing network of skilled and motivated personnel by building the capacity of community volunteers and health workers to deliver quality & gender friendly nutrition services.

THE WORLD BANK

HSCL

Our Experience: NIGERIA STATE HEALTH INVESTMENT PROJECT (NSHIP)

Client :

The World Bank/National Primary Health Care Development Agency

Service Area:

Health Systems Strengthening

Area of Focus:

PHC Service Delivery

Project Timeline:
2018 - 2020

Geographic Scope:

Borno State, Nigeria

Project Budget:

$480,800

Contact for Reference:
Hajia Binta Ismail
nationalnship001@gmail.com

Overview

The health conditions in the Northeast are among the worst in the country and the zone lags far behind the other geopolitical zones (except the North West) on key health indices. Under 5 mortality rates (U5MR) are 54% higher than in the south of Nigeria and malnutrition rates are even worse. Service delivery is also substantially worse in the south (In 2013, DPT3 immunization coverage was only 20.6% in the northeast compared to 72% in the southern zones). Based on these results and as part of the government's overall strategy for the development of the northeast, the World Bank is assisting the Government of Nigeria to rapidly strengthen health service delivery in the northeast. This will support the Federal Ministry of Health's strategy of ensuring at least one fully functional primary health care center per ward by using a Performance-based Financing (PBF) approach that builds on the successes of the original project. HSCL was contracted as a Contract Management & Verification Agency (CMVA) to manage project implementation in Borno state.

Project Goal

To strengthen the delivery of primary health care services and the capacity of all service providers

Objectives

- To improve the population coverage of high impact maternal and child health services (Minimum Package of Activities & Complimentary Package of Activities) by supporting the provision of cost-effective preventive and promotive interventions.
- To improve the quality of care provided in health facilities through regular capacity-building, coaching and mentoring
- To provide regular information on sustainable costing of the Minimum Package of Activities and Complimentary Package of Activities packages, ensuring that they can be replicable on a larger scale
- To support the provision of health services through the use of mobile teams and ensure increased access and equity in the use of both preventive and curative services among disadvantaged and underserved communities

THE WORLD BANK

HSCL

Our Experience: TECHNICAL SUPPORT ON HEALTH FINANCING TO BHCPF SECRETARIAT

Client :
Bill & Melinda Gates Foundation

Service Area:
Technical Assistance

Area of Focus : Technical assistance to the Ministerial Oversight Committee (MOC) on BHCPF

Project Timeline:
2022-Present

Geographic Scope:
Abuja, Nigeria

Project Budget:
$1,450,406.82

Contact for Reference:

Onyeka Igwebuike

Program Manager

onyeka.igwebuike@gatesfoundation.org

Overview
HSCL was contracted by the Bill and Melinda Gates Foundation to provide technical support to the Ministerial Oversight Committee (MOC) of the Basic Health Care Provision Fund program. HSCL's support aims to aid the committee carry out its mandate according to set guidelines as it plays its part in the delivery of universal health coverage.

Project Goal
To provide hands-on technical support to the Ministerial Oversight Committee as it carries out its mandate.

Objectives
- To support the MOC coordinate the operations of stakeholders to ensure alignment with the objectives of the National Health Act for the BHCPF.
- To support the implementation of financial audits by external auditors.
- To support the MOC in Preparing progress reports for the National Council on Health, the National Economic Council, the National Assembly, and other relevant stakeholders.

Related Activities
- Evaluate periodic program reports presented by the implementing agencies.
- Advocate for and ensure the provision of the required resources for planning and delivery of the BHCPF.
- Ensure compliance of all participating agencies and entities with guidelines.
- Ensure that funds are disbursed, managed, and accounted for in a transparent manner and in accordance with guidelines.
- Review updates on the flow of funds, performance management, and verification of results, as presented by the implementing agencies for guidance and feedback.

BILL & MELINDA GATES foundation

HSCL

Our Experience: HOUSEHOLD HEALTH EXPENDITURE SURVEY FOR ABIA, EBONYI AND OSUN STATES

Client :

USAID/HP+

Service Area:

- Monitoring, Evaluation, Research, and Learning.
- Health Financing

Area of Focus:

Research on the health financing landscape of the three focus states

Project Timeline: 2019

Geographic Scope:

Abia, Ebonyi, Osun states, Nigeria

Project Budget:

₦ 45, 000, 000

Contact for Reference:

Funke Falade
olufunke.falade@palladiumgroup.com

Overview

Over the last decade, Universal Health Coverage has become the ideal - embraced and propagated by leading health authorities in global health with its primary goal being to ensure that all people obtain the necessary health services that they require without suffering any financial hardship in doing so. One of the key drivers to achieving UHC is the use of pre-payment mechanisms such as health insurance. HSCL conducted a study to determine key state-specific health financing information such as the current Household Health Expenditure, Out-of-Pocket Expenditure (OOPE), and willingness to pay of the residents in Abia, Ebonyi, and Osun states to enable the client to adequately develop a product that maintains this balance and make the required policy directives for the implementation of the state health insurance scheme. The study is part of Health Policy Plus (H+) efforts to improve the health financing landscape of Abia, Ebonyi, and Osun States, and provide a body of evidence to develop responsive health insurance policies.

Project Goal

To provide contextual insight, on adequately quantifying the value and understanding the current patterns of out-of-pocket expenditure in the states, as well as obtaining contextual amounts that varying population groups in each state are willing to pay for health insurance products.

Objectives

- To determine the incidence and nature of expenditure on health incurred by households to estimate the amount of "out of pocket" payments for health.
- To determine the amount households are willing to pay for health insurance.

Related Activities

- Review of evaluation tools
- Design of field methodology
- Recruitment and training of personnel for data collection
- Collection of primary data

USAID FROM THE AMERICAN PEOPLE
HP+ HEALTH POLICY PLUS
HSCL

Our Experience: LANDSCAPING OF HEALTH INNOVATIONS – PRIVATE SECTOR HEALTH ALLIANCE OF NIGERIA

Client :

Private Sector Health Alliance of Nigeria

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Landscaping of Health Innovations in Nigeria

Project Timeline:

2015

Geographic Scope:

Nigeria

Project Budget:

₦6,000,000

Contact for Reference:

Muntaqa Umar-Sadiq
MD/CEO
Nigeria Private Sector Health Alliance

mumarsadiq@pshan.org
muntaqa.umarsadiq@gmail.com

Overview

Previous evaluation reports carried out by some key stakeholders in the health sector revealed that there is massive potential in the private sector which can be harnessed to enable developing countries such as Nigeria to achieve better health outcomes which are still at sub-optimal levels. Concerted efforts by the private sector are being made not only to develop innovative solutions to Nigeria's health problems but also serve as a platform for collaboration between relevant stakeholders in the health sector.

To gain an overview of the marketplace, Private Sector Health Alliance of Nigeria sought the research expertise of Health Systems Consult Limited (HSCL) to lead on landscaping and documentation of the current status of healthcare innovations in Nigeria including the development of a database of healthcare innovations

Project Goal

To create a database of health innovations in Nigeria including details in innovators, partners, funders, locations [State, Local Government Area ward, facility], thematic focus/area, project phase, and type.

Objectives

- Identify and document health innovations initiatives in the country;
- Validate innovations of a sample of innovators in seven Phase I States and obtain additional information;
- Identify development partners and private organizations working with or interested in working with innovators and innovations that are of interest to them;
- Create a database and map of health innovations and innovations stakeholders in Nigeria

Related Activities

- Desk review of existing health innovations
- Review of existing innovations database
- Key Informant Interviews in the seven Phase I States
- Identification of development partners and private organisations.
- Collection of Geospatial

Private Sector Health Alliance of Nigeria
INNOVATION | PARTNERSHIPS | SAVING LIVES

HSCL

Our Experience: DEVELOPMENT OF ONLINE REGISTRATION PLATFORM FOR DHML/NATIONAL HEALTH INSURANCE SCHEME (NHIS) RETIREES

Client :

Defence Health Maintenance Ltd (DHML)

Service Area:

Health Programmes Design and Implementation/Health Financing and Economic Reviews

Area of Focus:

Research for the development of a registration portal for the Military Health Insurance scheme

Project Timeline:

2014

Geographic Scope:

Abuja, Nigeria

Project Budget:

$95,849

Contact for Reference:

Col Akintunde Akinrinmade
Senior health adviser
akincube2000@yahoo.com

Overview

Defence Health Maintenance Limited (DHML) was established by the Ministry of Defence as a Health Maintenance Organization (HMO) to enable military personnel and their families to benefit maximally from the National Health Insurance Scheme (NHIS). In response to the challenge of maintaining medical combat readiness while providing the best healthcare services for all eligible personnel, the Ministry of Defence established the Defence Health Maintenance Limited (DHML). DHML is one of the Health Maintenance Organizations (HMOs) authorized and regulated by the National Health Insurance Scheme. DHML was accredited on the 27th June, 2006 with HMO CODE 022. It brings together the healthcare resources of the Nigerian Army, Navy and Air force and complements this with a network of civilian healthcare Professionals and Facilities. This provides better access and high quality service to the beneficiaries while maintaining the capability to support military operations, including conditions peculiar to the military environments and military health infrastructural development through regular annual budgeting.

Project Goal

To provide an online registration portal for military retirees to enrol into the National health insurance scheme under the auspices of the Defence Health Maintenance Limited

Objectives

- Review existing IT infrastructure to provide a situational analysis for the project
- Develop and deploy an online platform to be accessed through the internet and other portable mobile devices
- Develop and deploy an offline platform to be accessed hosted on the exiting Defence Health Maintenance Limited mobile computers
- Design and host the relational database on a cloud server

Related Activities

- Conducted desk review of existing literature
- Development of tools for data collection
- Collation, cleaning and analysis of data
- Upgraded the Defence Health Maintenance Limited local server to host enrolee data locally and synchronize with the cloud server
- Developed a user friendly and responsive helpdesk module for the platform
- Trained Defence Health Maintenance Limited staff on the use of the platform
- Report development and dissemination

Our Experience: KADUNA STATE INTEGRATED & FUNCTIONAL HEALTHCARE SYSTEM

Client :

The Kaduna State Government (KDSG)

Service Area:
Health Systems Strengthening, Advisory, Technical Assistance

Area of Focus: Technical Assistance for the Development of Comprehensive Technical and Financial Proposals for Investment in Kaduna State's Healthcare System

Project Timeline:
2024

Geographic Scope :

Kaduna State, Nigeria

Contact for Reference:

Overview

HSCL was contracted by the Kaduna State Government (KDSG) to develop a comprehensive technical and financial investment proposal, aligning with African Development Bank (AfDB) criteria and Kaduna State's health priorities.
The partnership focused on securing AfDB funding to improve primary and secondary healthcare facilities through targeted interventions in renewable energy, human resources for health (HRH), WASH and waste management, digitization, and referral systems. Recognizing the need for technical expertise in developing a robust investment proposal aligned with AfDB's priorities and guidelines, KDSG contracted HSCL to provide specialized technical assistance.

Project Goal

The Integrated and Functional Healthcare Initiative marks a transformative effort to overcome the challenges within Kaduna State's healthcare system. By leveraging strategic investments and collaborations, the KDSG is committed to building a sustainable and integrated healthcare system. This initiative aims to not only improve health outcomes but also elevate the overall well-being and quality of life for all residents of Kaduna State.

Objectives

- Develop detailed technical and financial proposals aligned with AfDB guidelines
- Identify key healthcare investment needs in Kaduna State
- Ensure proposals reflect Kaduna State's health priorities
- Provide strategic guidance for sustainable healthcare improvements

Related Activities

- Conduct Situation Analysis of selected facilities
- Develop a situation analysis report
- Develop an investment thesis
- Develop a cost-effective financial budget proposal

Our Experience: SECOND NATIONAL STRATEGIC HEALTH DEVELOPMENT PLAN

Client :

Bill & Melinda Gates Foundation

Service Area:
Policy Analysis and Development

Area of Focus:

Technical Assistance for Policy and Strategic Development

Project Timeline:
2018-2019

Geographic Scope:

Nigeria

Project Budget:

$199,641.00

Contact for Reference:
Olukayode Fasominu

ofasominu@clintonhealthaccess.org

Overview

HSCL provided technical assistance to the Federal Ministry of Health (Federal Ministry of Health (FMOH)) with funding from the Bill and Melinda Gates Foundation (BMGF) for the finalization of the National Strategic Health Development Plan (NSHDP)2 document. Specific work included leading the development of the Monitoring and Evaluation (M&E) framework, establishing an "efficient" secretariat that reconvened partners and consultants to complete the draft narrative and costing for the strategy, support for consolidation and stakeholder consensus building workshops and development of an implementation roadmap.

Project Goal

To provide technical assistance to the Federal Ministry of Health (FMOH) to finalize the National Strategic Health Development Plan (NSHDP)2 document and develop an implementation roadmap.

Objectives

- Development of an implementation road map for the National Strategic Health Development Plan (2018 – 2022).
- Strengthen coordination of stakeholders in the Federal Ministry of Health (FMOH)
- Development of a monitoring and evaluation framework

Related Activities-

- Developed a new roadmap (work plan) for taking the entire document development process to completion in the shortest possible time;
- Assisted the Federal Ministry of Health (FMOH) in mobilizing partners and other stakeholders for several roundtable discussions to agree on the new roadmap/work plan (clearly defined deliverables and delivery dates) as well as solicit financial support for the process.;
- Provided technical support in the review of M&E plans for the federal and some states and the development of national M&E plan for NSHDP II;
- Provided technical assistance to the Federal Ministry of Health (FMOH) in the development of an implementation roadmap.

BILL & MELINDA GATES foundation

FEDERAL MINISTRY OF HEALTH

HSCL

Our Experience: ASSESSMENT OF SEXUAL AND REPRODUCTIVE HEALTH CHOICES AND SEEKING BEHAVIOUR OF ADOLESCENTS AND YOUNG WOMEN IN NORTHERN NIGERIA

Client :

Clinton Health Access Initiative (CHAI)

Service Area:
Monitoring, Evaluation, Research & Learning

Area of Focus:

Evaluation of the Attitude, Practice and Constraints of female adolescents and young women in the focus states

Project Timeline:
2018

Geographic Scope:

Kano, Kaduna and Katsina states, Nigeria

Project Budget:

₦ 12,999,514

Contact for Reference:
Dr. David Adeyemi
dadeyemi@clintonhealthaccess.org

Overview
Health Systems Consult Limited (HSCL) was contracted by Clinton Health Access Initiative (CHAI) to carry out a study to understand Sexual and Reproductive Health (SRH) seeking behaviour and awareness among women and girls (15-24) in the focus states (Kaduna, Kano, and Katsina) to inform the design and implementation of the integrated approach to reach the intended population.

Project Goal
To generate evidence regarding the current behaviours and attitudes towards the sexual and reproductive health of adolescents and young women in northern Nigeria.

Objectives
- Understand current attitudes, knowledge and health care seeking behaviours of female adolescents and young women to sexual and reproductive health services and identify factors that influence these attitudes and behaviours
- Explore the role of parents or caregivers (particularly mothers) and community influencers/gatekeepers in the uptake of sexual and reproductive health services by female adolescents and young women
- Identify what services are available for adolescents and young women, especially through private sector service delivery points in the target communities
- Identify potential barriers (social, political or economic) to program acceptance and uptake of family planning services in target communities.

Related Activities-
- A review of relevant literature, existing policies and program implementation documents
- Design of assessment methodology and development of tools
- Recruitment and training of personnel for data collection;
- Data collection
- Analysing primary data and;
- Development of a final report on findings

CLINTON HEALTH ACCESS INITIATIVE

HSCL

Our Experience: PRIVATE SECTOR ENGAGEMENT FOR SURE-P HIV/AIDS PROJECT IN ABIA STATE

Client :

National Agency for Control of AIDS

Service Area:

Health Program Design and Implementation

Area of Focus:

Technical Assistance for the implementation of Service Delivery for HIV AIDS

Project Timeline:

2015-2016

Geographic Scope:

Abia, Nigeria

Project Budget:

₦49,956,082

Contact for Reference:

Dr. Sam Ohaeri,
ohaeri5@yahoo.com

Overview

Not less than 60% of the population In Abia state access care in private health facilities. Health Systems Consult Limited (HSCL) worked with a broad range of private health facilities in the State to provide direct prevention of mother to child transmission (PMTCT) services to pregnant women and their partners and build the capacity of service providers under the SIDHAS project. After the 12 months pilot, the project was handed over to the NACA SURE-P HIV/AIDS Programme by President's Emergency Plan for AIDS Relief (PEPFAR) and Health Systems Consult Limited (HSCL) was contracted to support the project through the provision of technical assistance for building the capacity of private health facilities to deliver high quality HIV services as well as the capacity of the state programme implementation unit to ensure project sustainability.

Project Goal

To scale-up HIV service delivery to reach the underserved through private sector engagement.

Objectives

- To ensure that the community linkages to care and other service elements will be provided to HIV positive persons after testing
- To promote routine facility HIV testing
- To strengthen Couple HIV counseling and testing, (CHCT), scale-up of HCT uptake amongst Most-At-Risk Populations (MARPs) and the general population

Related Activities

- HIV testing and Provision of Antiretroviral for prevention of mother to child transmission for HIV positive pregnant women and exposed infants
- Early infant diagnosis services for HIV exposed infants through dried blood sample transfer for DNA-PCR test
- Referral of HIV positive individuals from the general population.
- Improved capacity of the private health facility staff in documentation and the use of National Health Management Information System (NHMIS).
- Built the capacity of the state programme implementation unit to ensure sustainability

Our Experience: SCALING UP (REVITALISING) THE PRIMARY HEALTH CARE DELIVERY SYSTEM

Client :

Federal Ministry of Health Nigeria

Service Area:

Health
Programmes
Design

Area of Focus:

Business Case Analysis of Model Options for Primary Health Reforms for the Ministry for Health, Nigeria

Project Timeline:

2016

Geographic Scope:

Nigeria

Project Budget:

₦10,000,000

Contact for Reference:
Dr Ritgak Tilley-Gyado
rasd2000@Hotmail.com

Overview

The Primary Health Care delivery remains the weakest link in the health care system – only approximately 1 out of every 5 primary health care center is functional - and without significant and drastic intervention at this level, Nigeria is not likely to achieve the health-related sustainable development goals. The Government of Nigeria as part of its commitment to achieving universal health coverage is set to revitalise the primary health care system by ensuring the functionality of 10, 000 primary health care centers - at least 1 functional primary health care center per political ward in Nigeria – to provide quality primary health care to 100million Nigerians. The scale-up of the 10,000 primary health service across the country was based on the key principle of long-term sustainability. Thus, the States will play a critical role in implementing the project and ensuring the expected outputs and outcomes are achieved.

Project Goal

To provide options for the governance, financing and operations of Primary Health centers to improve their performance and impact on the Nigerian Health systems.

Objectives

- Ensure equity in access to primary health care services
- Ensure health care services provided are of the appropriate quality
- Protect the poor and vulnerable from suffering financial hardship in accessing primary health care

Related Activities

- Definition of structures for accountability and transparency across the different government Ministries, Departments and Agencies which provide oversight of the primary health center's functions
- Definition of options for managing the operations of the primary health centers and consideration of public-private partnerships (outsourcing models) to drive efficiency and effectiveness

FEDERAL MINISTRY OF HEALTH

HSCI

Our Experience: PRIVATE SECTOR ENGAGEMENT FOR SIDHAS-FHI360 PROJECT

Client :

USAID/FHI 360

Service Area:

Health Programmes Design and Implementation

Area of Focus:

Technical Assistance for the implementation of PMTCT of HIV/AIDS

Project Timeline:

2013 – 2015

Geographic Scope:

Abia State

Project Budget:

$ 1,429,269

Contact for Reference:

Dr. Sam Ohaeri Executive Secretary ABSACA

ohaeri5@yahoo.com

Overview

The SIDHAS project funded by USAID through FHI360 was implemented to strengthen the Prevention of mother-to-child transmission of HIV using public health facilities. A need for broader coverage was discovered to ensure a more holistic approach, hence a private sector engagement with the consideration that many Nigerians patronize private health facilities and therefore the intervention in public facilities alone would miss out on this very important group.

Through an extensive network of experienced partners engaged in delivering HIV/AIDS prevention, care, and support services, Health Systems Consult Limited (HSCL) worked with a broad range of private health facilities in Abia State to provide direct prevention of child transmission services (PMTCT) and build the capacity of service providers to offer quality prevention of mother to child transmission services.

Project Goal

To increase access to SIDHAS intervention through the engagement of private health facilities In Abia State.

Objectives

- To improve the capacity of private health facilities in Abia State in providing integrated HIV/AIDS services
- To actively participate in advocacy and mobilization for prevention of mother to child transmission.

Related Activities

- HIV testing for pregnant women and the general population
- Provision of Antiretrovirals for prevention of mother-to-child transmission for HIV-positive pregnant women at ANC and postpartum and for exposed infants
- Provision of Antiretrovirals for post-exposure prophylaxis (PEP)
- Early infant diagnosis services for HIV-exposed infants through dried blood sample transfer for DNA-PCR test
- Referral of HIV-positive individuals from the general population.
- Improving the capacity of the private health facility staff in documentation and the use of the National Health Management Information System

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fhi360 THE SCIENCE OF IMPROVING LIVES

HSCL

Our Experience: TECHNICAL ASSISTANCE FOR THE PROVISION OF MONITORING, EVALUATION AND LEARNING (MEL) SUPPORT TO THE HEALTH WORKFORCE MANAGEMENT (HWM) ACTIVITY FOCUS STATES.

Client :

Bayan Global/USAID

Service Area:
Monitoring, Evaluation, Research and Learning

Area of Focus: Technical Assistance for the implementation of Strategic Purchasing for Family Planning

Project Timeline:
2022

Geographic Scope :

Bauchi, Ebonyi, FCT, Kebbi, and Sokoto State, Nigeria

Amount:

PY 4: NGN 53,970,650.00

Contact for Reference:

Olufolake Akeju
oakeju@banyanglobal.com

Overview

HSCL conducted research to gather evidence regarding the recruitment, deployment, attraction, and retention of frontline health workers. The project aimed to establish a cost-effective, well-trained, and motivated health workforce, particularly in the rural and remote areas of the targeted states as well as support monitoring, evaluation, and learning (MEL) activities in the states of Ebonyi and Bauchi. HSCL recruited, embedded, and managed MEL Specialists in Bauchi and Ebonyi State. The state specialist supported HRH-related research, monitoring, evaluation, and learning (MEL) activities in the State.

Project Goal

To identify factors affecting frontline health worker recruitment, deployment, attraction, and retention in two focus States, especially in remote and rural areas of the two States. The study also aims to identify and prioritize evidence-based strategies to improve frontline health worker recruitment, deployment, attraction, and retention

Objectives

- Assess the HRH situation in both states: FLHW quantity, recruitment, deployment, and retention.
- Identify the push and pull factors affecting recruitment, deployment, attraction, and retention
- Identify and examine contextual factors that enable or constrain the adoption and implementation of existing national policies and strategies for HRH planning and management by state and local governments.
- Make recommendations for improved HRH recruitment, deployment, attraction, and retention mechanisms for frontline healthcare workers in both states.

Related Activities

- Developed a workplan, recruitment report, research protocol, and data collection tools.
- Convened stakeholder engagement
- Conducted HRH situational analysis (SITAN).
- Recruited and trained research support staff (research assistants/interviewers).
- Conducted research to identify the factors influencing FLHWs' recruitment, deployment, attraction, and retention, particularly in remote and rural areas
- Developed state-specific research reports and policy briefs
- Presented, validated, and disseminated research findings and policy briefs.
- Provided HRH and MEL support in the HWM focus State

BILL & MELINDA GATES foundation

HSCL

Our Experience: MARKET RESEARCH AND DEVELOPMENT OF A BUSINESS PLAN FOR THE ESTABLISHMENT OF A DIAGNOSTIC CENTER

Client :

KPMG

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Research to gain an understanding of the Nigerian medical diagnostics industry

Project Timeline:

2019

Geographic Scope:

Abuja, Rivers and Lagos states

Project Budget:

₦15,000,000

Contact for Reference:
Ijeoma Emezie-Ezigbo

ijeoma.emezie-ezigbo@ng.kpmg.com

Overview

HSCL in collaboration with KPMG conducted a pre-feasibility study to gauge market dynamics for the set-up of a diagnostics center in Abuja, Lagos, and Port-Harcourt. Findings from the market feasibility study informed the design of the overall strategy and business and operating model for the proposed venture – through the design of a business plan.

Project Goal

To provide a detailed analysis of the medical diagnostics industry value-chain.

Objectives

- To gain deeper insight into the market dynamics of the diagnostics industry in Nigeria
- To review key findings with regards to market size, demand and product pricing.
- Recommend viable markets for entry based on the understanding of local market realities
- To provide and identify the definition of critical success factors such as operational issues, pricing, and regulation

Related Activities

- Administered questionnaire to understand the market size, demand, and product pricing
- Recommended viable markets for entry based on the understanding of local market realities
- Developed operational and business plans
- Conducted primary market research to obtain insights into the medical diagnostics space in Nigeria, especially Lagos
- Identified other medical diagnostics centers based on select criteria, their value propositions, and the scale of services and assessed the level of competition

Our Experience: MARKET FEASIBILITY STUDY AND DEVELOPMENT OF A BUSINESS PLAN FOR A 200-BED MULTI SPECIALTY HOSPITAL (ARMED FORCES VETERAN HOSPITAL)

Client :

KPMG

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Research to gain an understanding of the Nigerian medical industry

Project Timeline:

2018

Geographic Scope:

Abuja, Nigeria

Project Budget:

₦13,000,000

Contact for Reference:

Olukayode Fasominu
ofasominu@clintonhealthaccess.org

Overview

On behalf of KPMG Nigeria and Defence Health Management Limited (DHML), Health Systems Consult Limited (HSCL) conducted a market feasibility study and development of a business plan for a 200-bed multispecialty hospital (Armed Forces Veteran Hospital) in Abuja, Nigeria. The feasibility study utilized a mixed research methodology approach including both qualitative and quantitative components. Findings from the study informed the development of both business and clinical strategy for the hospital.

Project Goal

To provide high-end quality diagnostics and specialist healthcare services to military personnel and the general public reducing the need for medical tourism.

Objectives

- To gain deeper insight into the market dynamics of the diagnostics industry in Nigeria
- Review of key findings with regards to market size, demand, and product pricing
- Recommend viable markets for entry based on the understanding of local market realities.

Related Activities

- Administered questionnaire to understand the market size, demand, product pricing
- Assessed the healthcare market to aid understanding of market trends, current market position, growth potential, demand and supply gaps (including factors responsible for medical tourism), and competitive forces
- Developed a model for operation, costing, manpower and technology/equipment
- Forecasted market size and growth rate for the hospital

Our Experience: PERCEPTION SURVEY ON THE NIGERIA NATURAL RESOURCE CHARTER AND ITS PRECEPTS

Client :

Nigeria Natural Resource Capacity (NNRC)

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Research on the NNRC and its precepts among stakeholders in the oil and gas sector

Project Timeline:

2018

Geographic Scope:

Lagos, Port-Harcourt, and FCT, Nigeria

Project Budget:

£ 5,500.00

Contact for Reference:

Tengi George Ikoli
george_ikoli@yahoo.co.uk

Overview

The Natural Resource Charter is an international initiative that aims to help governments, industries and societies of resource-rich countries make the most of extractive resources. The Charter is structured around 12 precepts of good practice developed by a group of international experts. In 2011 and 2012, Oxford Policy Management (OPM) applied and adapted the Natural Resource Charter to Nigeria's oil and gas sector, as part of the work of the Department for International Development (DFID)-funded 'Facility for Oil Sector Transparency and Reform' (FOSTER). Health Systems Consult Limited (HSCL) surveyed the level of understanding of the Nigeria Natural Resource Capacity (NNRC) and its precepts among oil and gas stakeholders .

Project Goal

To assess the level of understanding and acceptance of the Nigeria Natural Resource Capacity and its precepts by extractive sector stakeholders.

Objectives

- Determine the level of acceptance of the 12 Nigeria Natural Resource Capacity principles among the major stakeholders;
- Assess the level of understanding of the 12 Nigeria Natural Resource Capacity precepts among major stakeholders; and,
- Determine the level of compliance to the 12 Nigeria Natural Resource Capacity precepts among major stakeholders

Related Activities

- Desk review of relevant secondary documents
- Design of assessment methodology and survey tools
- Recruitment and training of personnel for interviews
- Primary data collection
- Analyzing data collected;
- Development of a final report on findings for the client

NIGERIA NATURAL RESOURCE CHARTER

HSCL

Our Experience: DEVELOPMENT OF GLOBAL FUND GRANT DOCUMENTS

Client :

The Global Fund Country Coordinating Mechanism (CCM) and the Ministry of Health and Sanitation, Sierra Leone

Service Area:

Policy Analysis and Development

Area of Focus:

Technical assistance on the development of Global Fund grant documents

Project Timeline:

2017

Geographic Scope:

Sierra Leone

Project Budget:

$ 246,001

Contact for Reference:

Lyntton Tucker
Lyntton.tucker@ccmsieraleone.org

Overview

In December 2016, the Country Coordinating Mechanism (CCM) Sierra Leone was allocated by the Global Fund the sum of US$90.9 million for HIV, Tuberculosis (TB), Malaria, and Resilient and Sustainable Systems for Health (RSSH) programs covering the period of 1 January 2018 to 30 June 2021.

Against this backdrop, the CCM Sierra Leone contracted Health Systems Consult Limited (HSCL) to support the development of grant documents for HIV, TB, Malaria, and RSSH components. HSCL also provided advisory services to the country to optimize its grant management processes for improved efficiency.

Project Goal

To develop grant documents for HIV, Tuberculosis (TB), Malaria, and Resilient and Sustainable Systems for Health (RSSH) programs.

Objectives

- Review and update the programmatic and financial gap analysis for HIV, TB, Malaria and Resilient and Sustainable Systems for Health.
- Develop and finalize the budgets of the HIV, Z and Catholic Relief Service grants
- To ensure alignment of the grant documents (performance framework, list of health products, procurement and supply management plan and budget) based on the current funding
- Propose performance frameworks for a prioritized above allocation request for HIV, Tuberculosis, Malaria and Resilient and Sustainable Systems for Health; and budget and prioritize activities that are required for the programs

Related Activities

- Carried out a comprehensive review of the existing programme documentation
- Reviewed existing support from government and partners as well as across the Global Fund grants
- Led discussions with primary recipients (PRs) and partners, including the Country Coordinating Mechanism Management team and key population representatives
- Prepared and submitted a report to the Country Coordinating Mechanism Management outlining in detail any challenges and lessons for grant implementation
- Developed and finalize budgets with detailed assumptions for the grants

MINISTRY OF HEALTH AND SANITATION
THE REPUBLIC OF SIERRA LEONE

The Global Fund
To Fight AIDS, Tuberculosis and Malaria

HSCL

Our Experience: STOCK-TAKING STUDY OF THE BUDGETING PROCESS OF THE FEDERAL MINISTRY OF HEALTH

Client :

Results for Development (R4D)/Federal Ministry of Health

Service Area:

Research and Evaluation/ Health Financing and Economic Reviews

Area of Focus:

Evaluation of the budgeting processes of the Federal Ministry of Health (FMOH)

Project Timeline:

2017

Geographic Scope:

FCT, Nigeria

Project Budget:

$30,000.00

Contact for Reference:

Adeel Ishtiaq
aishtiaq@r4d.org

Overview

Over the last several years, the Government of Nigeria has developed policies and initiatives aimed at improving health outcomes for all Nigerians including the National Health ACT, 2014 and the National Health Policy, 2016. The Federal Ministry of Health (FMOH) has over the years, faced challenges in using available funding to enact these policies. Some of these challenges are external - such as insufficient allocations of financial resources and delays in the receipt of funding while others are internal including the inability to link strategic priorities/policies to its year-over-year budgets largely due to its inadequate capacity across budget development, execution, and implementation. To determine bottlenecks with the budgeting process within the Federal Ministry of Health (FMOH), HSCL in collaboration with Results for Development conducted a budget study.

Project Goal

This study aimed to determine the root causes of sub-optimal budget process outcomes by the Federal Ministry of Health (FMOH) and recommend solutions to address identified challenges and bottlenecks

Objectives

Specific objectives of the study included:

- To identify current mechanisms for budget development, execution and monitoring by the Federal Ministry of Health (FMOH)
- To identify key challenges and bottlenecks across the budgeting process
- To proffer recommendations on improving the efficiency of the budgeting process based on identified challenges and bottlenecks
- To provide considerations to the Federal Ministry of Health (FMOH) on how they might go about implementing those recommendations

Related Activities

- Desk review of documents relevant to the study.
- Design of methodology and development of study tools
- Primary data collection
- Analyzing primary data and;
- Development of a final report on findings for the client

RESULTS FOR DEVELOPMENT

Federal Ministry of Health

HSCL

Our Experience: ASSESSMENT OF TB/HIV REFERRAL COORDINATION IN PEPFAR-SUPPORTED PRIORITY LOCAL GOVERNMENT AREAS IN NIGERIA

Client :

US center for Disease Control (CDC)

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Research on the HIV/TB referral coordination

Project Timeline:

2017

Geographic Scope:

Benue, Lagos, Nasarawa and FCT, Nigeria

Project Budget:

$93,000

Contact for Reference:

Dr Patrick Dakum
pdakum@ihvnigeria.org

Overview

In response to the challenge of estimated high undiagnosed Tuberculosis(TB) cases amongst People Living with HIV in Nigeria, the President's Emergency Plan for AIDS Relief (PEPFAR) through partnership with United States Centers for Disease Control and Prevention (CDC) supported the Institute of Human Virology, Nigeria (IHVN) implemented TBHIV referral coordination activities in selected health facilities within the President's Emergency Plan for AIDS Relief priority LGAs to TB case detection amongst People Living with HIV/AIDS, putting them on anti-TB and ART (anti-retroviral therapy) as early as possible thereby reducing the morbidity & mortality in the co-infected patients as well as reducing TB burden among PLHIV.

Project Goal

To guide and inform PEPFAR towards continued support and if possible, expansion of TB/HIV referral coordination initiative in Nigeria.

Objectives

- To determine the level of accomplishment of key deliverables of the referral coordinators.
- To assess the level of decrease in the drop-off of patients along the TB/HIV cascade compared to baseline in each of the implementing facilities.
- To assess the extent and timeliness of the linkage to ART from Directly Observed Treatment (DOT) services and to DOT services from anti-retroviral therapy clinics for TB/HIV co-infected patients.

Related Activities

- Desk review of relevant secondary documents
- Design of assessment methodology
- Development of evaluation tools
- Recruitment and training of personnel for data collection
- Collection of primary data
- Analyzing primary data and;
- Development of a final report on findings for the client

PEPFAR · CDC · INSTITUTE OF HUMAN VIROLOGY · HSCI

Our Experience: MID-TERM REVIEW OF THE SUSTAINABLE HIV/AIDS TREATMENT ACTION IN NIGERIA

Client :

PEPFAR/ United States Center for Disease Control and Prevention (CDC)

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Review of HIV/AIDS Treatment action in Nigeria

Project Timeline:

2017

Geographic Scope:

Benue, Delta, Kaduna, Kogi, Lagos, Nasarawa, Ogun, Ondo, Oyo and Plateau States and the FCT

Project Budget:

$174,000

Contact for Reference:

Dr. John Okpanachi Oko
Project Director
johnokpanachi.oko@ccfng.org

Overview

The Catholic Caritas Foundation of Nigeria (CCFN) - an indigenous non-governmental organization that provides HIV/AIDS prevention, care, and treatment services through a 5 – year PEPFAR (President's Emergency Plan for AIDS Relief) funded Sustainable HIV & AIDS Treatment Action in Nigeria (SUSTAIN) project in thirteen states in Nigeria. Health Systems Consult Limited (HSCL) was contracted by CCFN to conduct the mid-term project review of the project in line with international standards for project monitoring and evaluation. The evaluation was conducted to provide information on the achievements, lessons learned, best practices and recommendations concerning relevance, effectiveness, efficiency, impact, and sustainability of the project and concerning relationships. Data was collected across the eleven states where the SUSTAIN Comprehensive Care and Treatment (CCT) centers are located.

Project Goal

To determine if the SUSTAIN project met its strategic objectives and consider what "success stories" were as well as what needed to be improved or changed.

Objectives

- To determine the adequacy of the Programme design and implementation in preventing new HIV infections in target populations (prevention of mother to child transmission rate, transmission rate among discordant couples and Post-Exposure Prophylaxis transmission rate)
- To measure the level of client's satisfaction with the quality of service, the patient's level outcome (PLO) of care and treatment & investigate the quality of life of people living with HIV
- To review the opinions of key stakeholders about the effectiveness of Faith-based Health facilities and their management structures in managing HIV Programs.
- To make recommendations in terms of sustainability activities for the project while presenting possible exit strategies for the fiscal year 2017.

Related Activities

- Development of research methodology, protocol & tools
- Data collection
- Collation, cleaning and data analysis
- Report development

PEPFAR U.S. President's Emergency Plan for AIDS Relief
CDC Centers for Disease Control and Prevention
CCFN Caritas NIGERIA
HSCL

Our Experience: END-LINE EVALUATION OF THE GLOBAL FUND SOCIAL MOBILISATION PROJECT

Client :

The Global Fund to Fight AIDS, Tuberculosis (TB) & Malaria (GFATM)/Society for Family Health (SFH)

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Review of Impact of Malaria Social Mobilisation Interventions

Project Timeline:

2016

Geographic Scope:

Anambra, Bauchi, Benue, Edo, Kano and Ondo state

Project Budget:

₦19,891,750

Contact for Reference:

Dr. Ernest Nwokolo
Director, Global Fund Malaria
enwokolo@sfhnigeria.org

Overview

Society for Family Health (SFH) was a Principal Recipient of the Global Fund malaria grant under the new funding model in Nigeria. In line with the National Malaria Strategic Plan (NMSP) 2014 - 2020, Society for Family Health implemented a social mobilization project intending to increase community awareness and promote positive behavioral change for increased uptake of recommended malaria interventions. Health Systems Consult Limited (HSCL) was contracted as an independent research agency to conduct an end-line evaluation of social mobilization activities with a specific focus on infection, prevention and control activities implemented between October 2015 and December 2016. The evaluation was intended to provide recommendations that will inform better programming for social mobilization in the national malaria response. Data was collected through qualitative and innovative qualitative research methodologies that involved the use of the most significant change technique to collect information on the project's impact on target beneficiaries.

Project Goal

To measure the impact of the social mobilization intervention specifically the inter-personal communication intervention.

Objectives

- Review social mobilisation strategies and processes to determine their suitability towards meeting the social mobilisation goal
- To identify the measurable achievements of Global Fund Malaria social mobilisation interventions (comparing targets with achievement & target population reached; knowledge or awareness of an aspect of Malaria control)
- To identify best practices that have resulted in the optimal achievement of the project's social mobilisation goal
- To develop recommendations for improving social mobilisation practices

Related Activities

- Development of research methodology, protocol & tools
- Data collection
- Collation, cleaning and data analysis
- Report development

The Global Fund To Fight AIDS, Tuberculosis and Malaria

Society for Family Health ...Creating Change, Enhancing Lives

HSCL

Our Experience: DATA COLLECTION AND ANALYSIS OF THE SEASONAL MALARIA CHEMOPROPHYLAXIS (SMC) DATA FROM SENTINEL SITES

Client :

DFID/ Malaria Consortium

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Research on SMC Data from Sentinel sites

Project Timeline:

2015

Geographic Scope:

Kastina and Jigawa, Nigeria

Project Budget:

₦6,000,000

Contact for Reference:

Dr. Kolawole Maxwell
m.kolawole@malariaconsortium.org

Overview

Seasonal Malaria Chemoprevention is a feasible and cost-effective strategy to reduce the incidence of Plasmodium falciparum malaria amongst children under five. In Nigeria, seasonal malaria chemoprevention is one of the major strategic foci of the National Malaria Elimination Program (NMEP). With support from Malaria Consortium (MC), NMEP implemented seasonal malaria chemoprevention in select Local Government Areas of Katsina and Jigawa States to create evidence to support the maximization of benefit and scale-up of this malaria control. To bridge the data gap in seasonal malaria chemoprevention implementation, Health Systems Consult Limited (HSCL) was contracted to capture the relevant indicators for evidence generation.

Project Goal

To bridge noted data gaps in the seasonal malaria chemoprevention project and generation of a trend analysis of Health Management Information System data of sentinel health facilities from both the intervention and non-intervention (control) Local Government Areas before and post-implementation of seasonal malaria chemoprevention.

Objectives

- Identification of gaps in the National Database District Health Information System (DHIS) 2 and available program data
- Actively source the missing data through data abstraction from health facility records
- Scientifically demonstrate the impact of seasonal malaria chemoprevention on malaria morbidity and mortality trends among children under 5
- Document any rebound effect of discontinuation of seasonal malaria chemoprevention rounds in intervention Local Government Areas.
- Generate evidence to be used as an advocacy tool and to advocate the states to buy into seasonal malaria chemoprevention and scale up the intervention

Related Activities

- Design of assessment methodology
- Development of data collection tools
- Recruitment and training of personnel for data collection
- Desk review of relevant documents
- Data Abstraction at the Health facilities
- Analyzing primary data

Department for International Development

malaria consortium
disease control, better health

HSCL

Our Experience: COST ANALYSIS OF THE SEASONAL MALARIA CHEMOPROPHYLAXIS PROJECT IN KATSINA STATE, NIGERIA

Client :

Bill and Melinda Gates Foundation/Malaria Consortium

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Cost Analysis Research

Project Timeline:

2015

Geographic Scope:

Kastina, Nigeria

Project Budget:

₦6,303,260

Contact for Reference:

Dr. Kolawole Maxwell
m.kolawole@malariaconsortium.org

Overview

As a result of the seasonal surge in malaria incidence particularly seen in the Sahel region of northern Nigeria, the BMGF funded the Seasonal Malaria Chemoprevention (SMC) project, which involves the administration of full treatment course of antimalarial drugs, was implemented in Katsina state. The project aimed at reducing illnesses and deaths attributable to the disease especially among children under 5. With the project in its second year, a cost analysis was pertinent to determine the financial and economic cost per child to receive a complete course of treatment in all four cycles of seasonal malaria chemoprevention drugs in a transmission round. Health Systems Consult Limited (HSCL) was contracted to conduct the costing study findings of which informed project implementers, donors and partners on cost of scale-up to other similar regions.

Project Goal

To undertake a costing analysis of implementing Seasonal Malaria Chemoprophylaxis in 4 Local Government Areas (LGAs) in Katsina State, Northern Nigeria.

Objectives

- To generate an outline of all financial and economic costs required for design, start-up and actual seasonal malaria chemoprevention delivery through the proposed delivery system
- To identify the main cost drivers for seasonal malaria chemoprevention delivery (% allocated to each category) and Costs which could benefit from (reduce with) economies of scale (i.e. through scale-up)
- To determine the economic cost per child of receiving at least the first dose of all four courses of seasonal malaria chemoprevention (acceptably covered)

Related Activities

- Desk review of relevant secondary documents and Extensive review of reference materials and project documents
- Design of study tools
- Study area description,
- Sample size determination
- Recruitment and Training of data collectors
- Data collection and analyses

BILL & MELINDA GATES foundation

malaria consortium
disease control, better health

HSCL

Our Experience: NRS ON THE COVERAGE, RETENTION, AND USE OF LONG-LASTING INSECTICIDAL NETS (LLINs) DISTRIBUTED DURING THE MARCH/APRIL 2014 LLIN MASS CAMPAIGN IN OGUN STATE, NIGERIA

Client :

UNITAID/Malaria Consortium

Service Area:

Monitoring, Evaluation, Research and Learning

Area of Focus:

Research to assess the levels of coverage, retention, and use of bed nets

Project Timeline:

2015

Geographic Scope:

Ogun State, Nigeria

Project Budget:

₦6,265,050

Contact for Reference:

Dr. James Ssekitooleko
Technical Adviser,

SuNMaP
j.ssekitooleko@malariaconsortium.orgm

Overview

As a result of the high prevalence of malaria (above 50%) in the South West region of the country, the National Malaria Elimination Programme (NMEP) and the Roll Back Malaria (RBM) Partnership recommended the use of Long-Lasting Insecticidal Nets (LLINs), especially among people living in malaria-endemic areas. It was based on this recommendation Society for Family Health (SFH) conducted a mass LLIN distribution campaign in Ogun state in March/ April 2014. The Support to National Malaria Programme (SuNMaP) was set up to support the Government of Nigeria (GoN) and relevant partners in tracking the massive burden of malaria in the country and measuring efforts at its control.

Project Goal

To assess the levels of coverage, retention, and use of bed nets among the people of Ogun state following the Long-Lasting Insecticidal Nets (LLIN) mass distribution campaigns

Objectives

- Assess the coverage of the universal Long-Lasting Insecticidal Nets access campaigns in the state and the outcomes
- Assess the levels of net retention after the distribution
- Assess the levels of net use and its determinants

Related Activities

- Obtained the detailed information on net use and sleeping patterns in the family
- Evaluated the success of Behaviour Change Communication (BCC) activities associated with the campaign
- Assessed the influence of LLIN campaign nets on the availability and use of previously owned Insecticide Treated Nets (ITN) or untreated nets
- Assessed the status and physical condition of LLIN campaign nets after distribution
- Obtained the detailed information on net handling and washing patterns

Our Experience: TEMPERATURE SCANNING SYSTEMS TRAINING

Client :

Dangote Foundation /Federal Ministry of Health, Nigeria

Service Area:

Human Resources for Health (HRH) Development

Area of Focus:

Technical Assistance on strengthening response systems for outbreaks and epidemics

Project Timeline:

2014

Geographic Scope:

Kano, Enugu, Rivers and Lagos states

Project Budget:

₦1,400,000

Contact for Reference:

Adhiambo Idaga
a.odaga@dangotefoundation.org.ng

Overview

Previous evaluation reports carried out by some key In the wake of the 2014 Ebola Viral Disease (EVD) outbreak in West Africa and its spread to Nigeria, a declaration of an Ebola emergency was made in Lagos State. The Federal Government of Nigeria implemented a rapid response to contain the spread of the disease using all available public health assets. Handheld Thermal scanners were deployed to all airports and were used to screen passengers as they disembarked from aircraft and on departure. This was pertinent because high body temperature is one of the symptoms of ebola viral disease and this process provided the first line measure in screening for and later detecting the virus.

Project Goal

To build the capacity of Port Health Service staff and other relevant stakeholders on the installation and use of thermal Imaging Scanners.

Objectives

- Understanding the basic concepts of thermal imaging
- Understanding the applications of thermal imaging with a focus on medical and veterinary applications
- Highlight the advantages of the thermal imaging cameras over the conventional handheld temperature scanner

Related Activities

- Training of a pool of staff from the Port Health Services and other concerned authorities on proper installation and use of thermal scanning systems.
- Practical mounting the thermal imaging camera and using the equipment to scan a person's body temperature and read the result.

DANGOTE FOUNDATION

FEDERAL MINISTRY OF HEALTH

HSCI

Our Experience: ASSESSING THE ENABLING ENVIRONMENT FOR ICTS FOR HEALTH IN NIGERIA: A LANDSCAPE AND INVENTORY

Client :

United Nation Foundation/Saving One Million Lives

Service Area:

Monitoring Evaluation Research and Learning

Area of Focus:

Research on Information Communication Technology for Health

Project Timeline:

2014

Geographic Scope:

Nigeria

Project Budget:

$52,750

Contact for Reference:

Dr. Patricia Michael
pmechael@unfoundation.org

Overview

Under the auspices of the mHealth Alliance initiative, Health Systems Consult Limited (HSCL) conducted a baseline assessment, rapid benchmarking & Inventory of Information Communication Technology for Saving One Million Lives (ICT4SOML) in Nigeria. This contributed to the development of an e-health strategy for improving health outcomes for the country.

Project Goal

To provide a comprehensive picture of existing information communication technology (ICT) for health implementations in Nigeria and to identify and ensure that all activities within Information Communication Technology for Saving One Million Lives are informed and contextualized to the Nigerian environment.

Objectives

- To assess the current state of Save One Million Lives (SOML)-relevant technology platforms implemented in Nigeria and low middle-income countries;
- To identify and provide recommendations that impact the broader Save One Million Lives programme .

Related Activities

- Design of assessment methodology and assessment tools
- A comprehensive desk review of relevant documents
- Review of the Nigeria health ICT policy to examine relevant strategies, regulations and legislation addressing at minimum, capacity, standards and interoperability
- Rapid benchmarking of governance structures for similar ICT projects to help identify convergences, differences and best practices
- Collection of primary data – Focused group discussion and key informant interviews
- Analyzing primary data

UNITED NATIONS FOUNDATION

SOML P R

HSCL

Our Experience: ENDLINE EVALUATION FOR THE IMPROVED COOKSTOVE FOR COMMUNITY DEVELOPMENT (ICCD) PROJECT

Client :

Christian Aid

Service Area:

Monitoring Evaluation Research and Learning

Area of Focus:

Evaluation to measure the impact of the ICCD project

Project Timeline:

2014

Geographic Scope:

Plateau State, Nigeria

Project Budget:

₦1,700,000

Contact for Reference:

Sunny Okoroafor
Senior M&E Specialist,
Christian Aid Nigeria

Overview

In Nigeria, firewood is the most utilized source of energy for cooking, providing about 60% and 92.3% of cooking energy in urban and rural households respectively. The negative effects on health and the environment associated with the use of traditional cooking energy sources such as firewood, charcoal, crop residue, and animal dung have created increased global concern. One of the effective interventions aimed at reducing the negative effects associated with the use of traditional cooking methods is encouraging the sustainable use of Improved CookStoves (ICS) among households in Lower and Middle-Income Countries (LMIC). In a bid to improve the health status of poor and marginalized households through the adoption and sustainable use of improved cook stoves, Christian Aid implemented an Improved CookStove for Community Development (ICCD) project in Plateau State, North Central Nigeria. In line with best practice, Health Systems Consult Limited (HSCL) was engaged to evaluate the impact of the project.

Project Goal

To conduct an Endline evaluation to assess the successes and challenges of the ICCD project activity

Objectives

- To determine the behaviour Change Communication (BCC) activities
- To determine the knowledge attitudes and practices (KAP)of the project communities concerning cooking methods
- To access awareness on the Improved CookStoves, its use and benefits, willingness and ability to pay for an Improved CookStove and ownership
- To access Perceptions of the project teams and communities on the Improved CookStove for Community Development project, acceptance, usefulness, sustainability

Related Activities

- Design of evaluation methodology and tools (survey questionnaires, focus group discussions (FGDs) and key informant interviews (KIIs)
- Recruitment and training of personnel for data collection
- Primary data collection
- Analyzing primary data and;
- Development of a final report on findings for the client

Our Experience: RE-ASSESSMENT OF SUB-RECIPIENTS OF THE GLOBAL FUND PHASE II HIV SSF GRANT

Client :

National Agency for the Control of AIDS (NACA)

Service Area:

Human Resources for Health (HRH) Development

Area of Focus:

Capacity-building and development for Sub-recipients of the Global Fund grant

Project Timeline:

2014

Geographic Scope:

Nigeria

Project Budget:

₦10,212,000

Contact for Reference:

Prof John Idoko
Director General, NACA
jonidoko@yahoo.com

Overview

The project involved the assessment of the organisational capacity of shortlisted sub-recipients to successfully implement the Global Fund HIV/AIDS Grants and the development of a capacity-building plan where gaps where identified. Sub-recipients were then ranked according to (a) those who had the capacity to commence implementation (b) those who could commence implementation and fill observed capacity gaps while implementing (c) those were capacity gaps that must be addressed before any disbursement. The organisations assessed include FHI 360, APIN (AIDS Prevention Initiative in Nigeria), CIHP (Center for Integrated Health Program), Hygeia, PPFN (Planned Parenthood Federation of Nigeria), and IHVN (Institute of Human Virology).

Project Goal

To assess the organisational capacity and develop capacity-building plans for the sub recipients of the Global Fund grants

Objectives

- Assessment of the capacities of the Sub-recipients in the area of program management, monitoring and evaluation, financial management and supply chain management to identify related capacity gaps;
- Provide actionable recommendations on the assessed capabilities of the sub-recipients to inform the development of a capacity-building plan

Related Activities

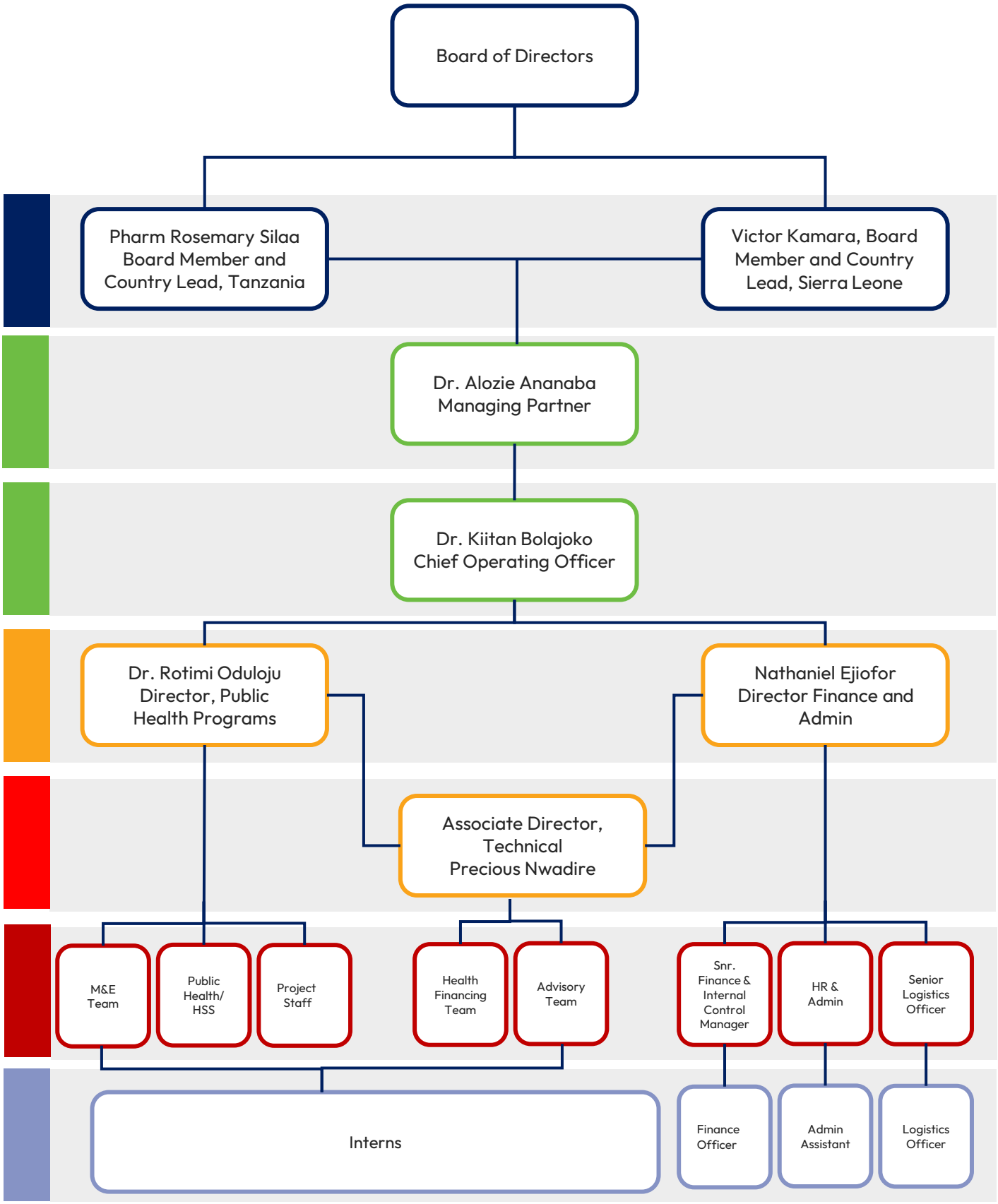
- Participated in inception/preparatory meetings with the client for the planning of the project
- Developed implementation plan for the assessment exercise
- Developed a finalized assessment tool used for the assessment exercise
- Conducted capacity reassessments of proposed sub-recipients in conformity to the Global Fund guidelines
- Presented findings of the assessment
- Development and dissemination of a final report to the client.

FEDERAL MINISTRY OF HEALTH

NATIONAL AGENCY FOR THE CONTROL OF AIDS NACA

HSCI

Our Organizational Structure



Our Leadership team

Dr. Alozie Ananaba MBBS, MPH, MBA, MWACP

Managing Partner & Board Member, HSCL

Brief Profile

Alozie is a seasoned medical doctor and public health expert with over 20 years of senior-level experience. He holds an MSc in Public Health from the University of Lagos, is a Fellow of the West African College of Physicians and has an MBA from the prestigious Lagos Business School.

He has managed large-scale public health programs globally, including roles with the Global Fund, WHO, CDC-GAP, US-DOD, and UNICEF. He has consulted for major international organizations like UNDP, UNAIDS, WHO, USAID, and UNITAID.

He has vast experience at developing and managing partnerships with Governments and other International agencies with the USG, EU, DFID, CIDA and the UN family as examples.

He has played key roles in policy and strategy initiatives in Africa including authoring the acclaimed Presidential Comprehensive Response Plan for HIV/AIDs in Nigeria; The Nigeria Malaria Strategic Plan (2014 -2020); Global Fund proposals for Nigeria, South Sudan, Zimbabwe, Zambia, Tanzania, Zanzibar, Kenya, Lesotho and Sierra Leone.

Dr. Kiitan Bolajoko, BDS, MScPH

Chief Operating Officer

Brief Profile

Kiitan holds a bachelor's in dental surgery (BDS) from the University of Ibadan, Nigeria and a master's in public health (Health Services Management) from the London School of Hygiene and Tropical Medicine, LSHTM, UK.

She has led project management, execution and delivery of multidisciplinary transformation projects in Global health, financial services, public sector and Public Private Partnerships. She was responsible for optimizing patient services operations at a 165-bed tertiary health facility with operations in Nigeria and South Asia.

She brings extensive experience in healthcare operations, business strategy, project management and business development. She combines healthcare operations expertise with financial acumen (CFA Level I) to deliver sustainable, data-driven solutions.

Our Leadership team

Precious Nwadire, MBA (in view)

Director, Health Systems Strengthening & Business Advisory

Brief Profile

Precious is a health and development expert with over 6 years of experience in designing and implementing health systems strengthening initiatives at National and subnational levels. She is currently enrolled on the MBA program at Nexford University.

She played a key role in the development of technically sound and operationally feasible national pathogen-specific contingency plans. A major component of parametric insurance for the African Risk Capacity Outbreaks and Epidemics (O&E) program in African countries.

She supports the advisory unit and successfully led the implementation of several market research and feasibility studies including the Enyimba Economic City- Health Segment Market research in Nigeria, African Pharmaceutical Market Research in Nigeria, Angola, Ghana and DRC and the Horizon Clinic Due Diligence in The Gambia. She is leading the development of a multimillion-dollar investment case for improved clinical trial capacity in Nigeria.

Dr. Rotimi Oduloju

Director, Public Health Programs

Brief Profile

Rotimi is a medical doctor and a seasoned public health and development expert with over 16 years of experience in program design, implementation, monitoring, and evaluation. With a strong educational background, including an MBA from Lagos Business School and a master's in public health from LSHTM- University of London.

Dr. Rotimi is currently the public health program director at HSCL where he oversees the design and development of public health interventions. Prior to joining HSCL, he worked at HSDF as a Senior Manager/State Team Lead in Kaduna, Abuja, and Bauchi. He led the BMGF-funded PHC management strengthening project which involved systems development and capacity building for frontline PHC Managers in Kaduna State.

In his prior roles with prominent organizations like the National Primary Health Care Development Agency, ICAP and CIHP Nigeria, Dr. Rotimi consistently championed the cause of advancing public health. His work focused on critical areas, including HIV/AIDS integration, decentralization, and capacity building.

Our Leadership team

Ejiofor Nathaniel Uchenna, FCA ACCA ACS

Director, Finance and Administration

Brief Profile

Nathaniel is a seasoned finance professional with over 20 years of experience spanning multiple industries and roles, including grant fund accounting, audit, tax management, risk management, financial reporting, and investment banking. Known for his analytical acumen and leadership, Nathaniel has successfully led major initiatives like the IFRS conversion and audit completion at Silverbird Group.

He is an active member of ICAN, ACCA, and CIS, reflecting his commitment to professional excellence. Currently, as Associate Director of Finance at HSCL, he leads finance management on various donor-funded projects. Nathaniel also holds qualifications in Data Science and Business Analysis from the University of Texas and is furthering his expertise in artificial intelligence.

Vera Niniola, MBA (in view)

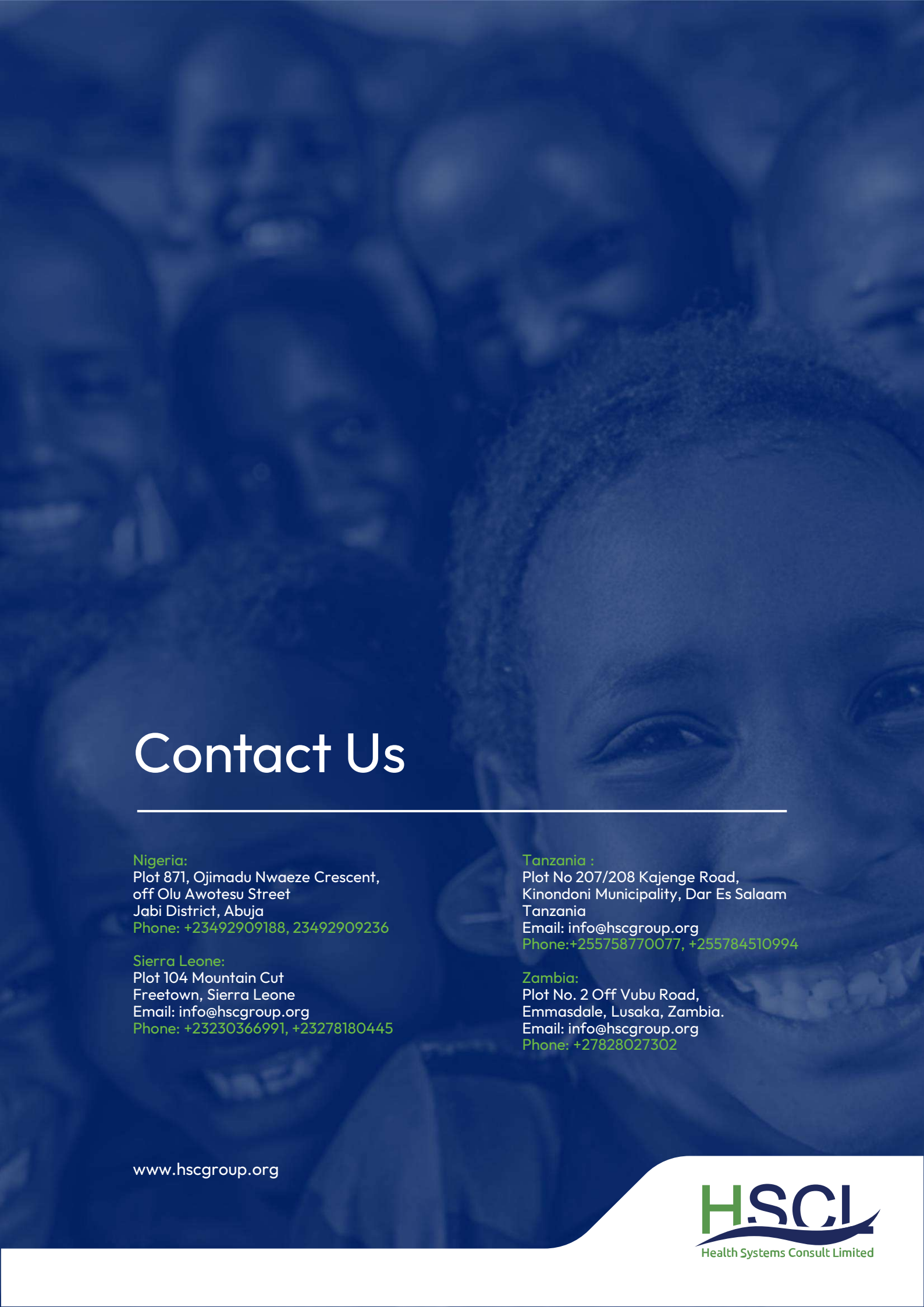
Principal Technical Officer

Brief Profile

Vera is a dedicated public health professional with 6 years of experience in health and development. She holds a BSc in Public Health and is currently pursuing an MBA from Ahmadu Bello University.

She provides technical assistance for the design, implementation, and management of business advisory and public health projects. Notably, she led the development of an operations and partnership guideline for a medical school and teaching hospital and co-led the successful implementation of an African Pharmaceutical Market Research initiative across Nigeria, Angola, Ghana, and the Democratic Republic of the Congo.

In her capacity, she has supported the design and implementation of business plans, feasibility studies, market research, and health systems strengthening programs, enabling the development and execution of effective strategies.



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HSCL
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