



Fostering a critical shift in Technical Assistance (TA) delivery in Nigeria

ABOUT US

Technical Advice Connect (TACONNECT) is an innovative Technical Assistance (TA) delivery platform, set up to respond to TA priorities to promote sustainable improvements in State Primary Healthcare (PHC) systems' performance and to increase the uptake of Reproductive, Maternal, Newborn, Child, Adolescent Health and Nutrition (RMNCAH+N) services. TACONNECT curates and deploys comprehensive, cohesive technical assistance and institutional strengthening support to state governments, using a tailored and coordinated approach to promote sustainable PHC systems strengthening and enhanced PHC service delivery

To foster a critical shift in the TA delivery in Nigeria, TACONNECT works with states and donors to define issues, identify solutions, and the skills/expertise needed to help strengthen the effectiveness, efficiency, and quality of services while it manages the selection and deployment of technical assistance by providing technical and programmatic oversight to ensure efficiency, effectiveness, and value for money

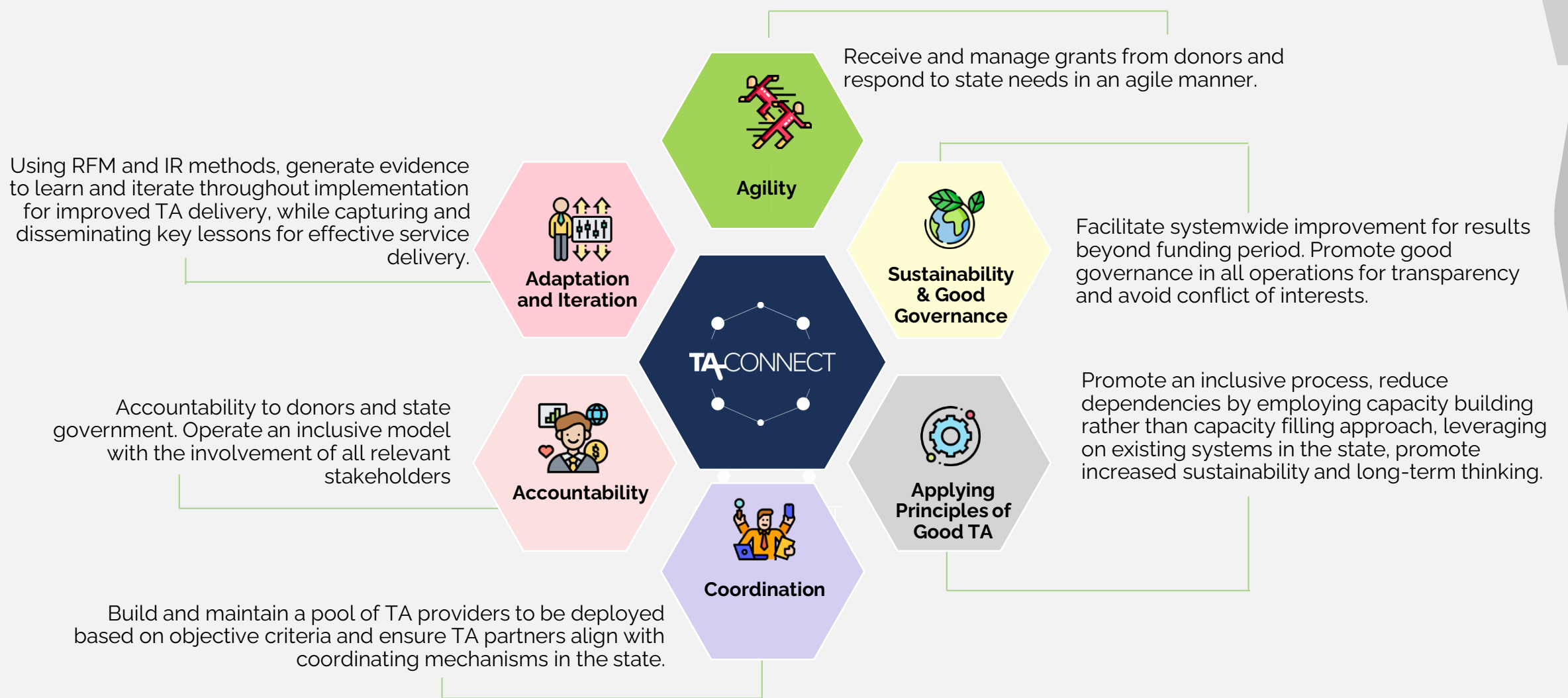
TACONNECT has deployed an innovative operational model that facilitates a paradigm shift from the traditional top to bottom approach of technical assistance, to a demand driven bottom to top approach, involving states in problem identification, project design and implementation hence promoting ownership and long-term sustainability, as well as improving synergy and coordination.

OUR OPERATIONAL MODEL



OUR PRINCIPLES OF ENGAGEMENT

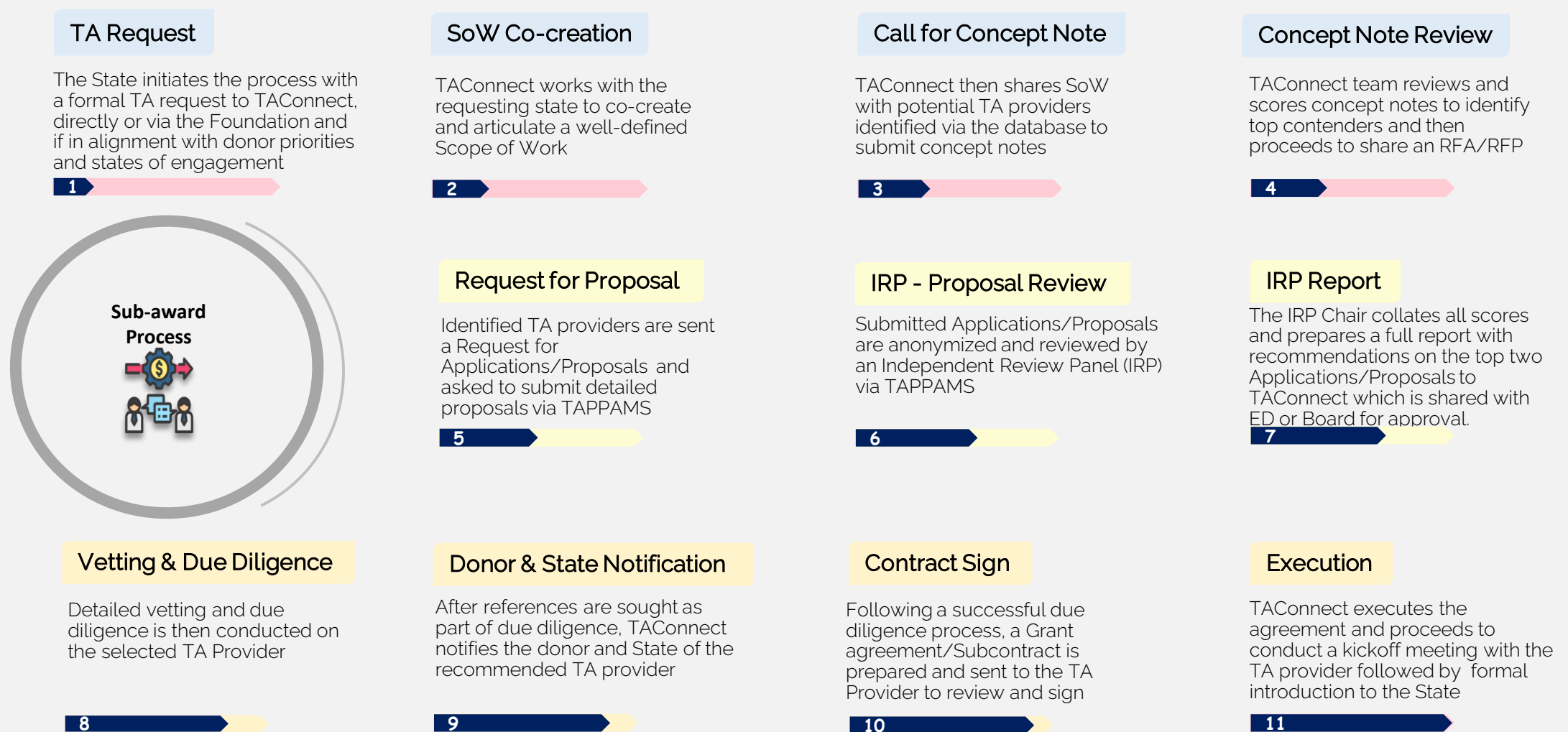
In line with our operational model, TACONNECT has evolved key principles of engagements to serve as a vehicle of cost-effective and sustainable technical assistance support to state PHC systems. These principles include:



OUR SUB-AWARD PROCESS

TACONNECT deploys a functional, transparent, and responsive mechanism to disburse sub-grants for technical assistance across a range of PHC domains. To ensure this system can function efficiently while maintaining a lean management structure, TACONNECT procured and deployed an innovative and robust grant management software to handle current and future deployments and ensures customization of TA provider to respond to state TA needs based on expertise. This database is continuously updated to ensure a robust pool of TA Providers who are delineated based on their areas of expertise. The process is well structured and systematically well-ordered as illustrated below:

11 steps of the TACONNECT sub-award process: Initiation and partner selection



NB: Most of the sub-award processes occur via the TAPPAMS (steps 3 – 10) in addition to the grant management and evaluation process

*TAPPAMS: Technical Assistance Provider Portal and Award Management System

OUR PROGRAMS:

Group Antenatal Care (G-ANC)

Currently TACConnect supports 7 states in Nigeria to adapt, adopt, implement, and sustain G-ANC as an alternative model for ANC service delivery using a human-centred approach that addresses both the demand and supply side barriers to MNCH uptake, access, and impact. Working with the State Ministries of health (SMoH), State Primary Health Care Development Agencies (SPHCDA), and Local Government Health Authorities and departments, the goal of this intervention is to ensure G-ANC is adopted, implemented, and sustained as a health systems intervention while serving as a platform to improve the uptake and quality of well-integrated Reproductive, Maternal, Newborn, Child, Adolescent Health and Nutrition (RMNCAH+N) services. Below are some of the output of our interventions;

G-ANC is currently implemented in

1542
health facilities

32%
of total public PHCs
across the States



1,028,766
pregnant women have
been enrolled in G-ANC



81,473
cohorts of
pregnant women
have been formed

Data from Dec. 2020 – Feb. 2023

Kano
Progress towards
program targets
• Data from Jan.
2021 – Nov 2022



100%
of target HCWs have been
trained as G-ANC
facilitators



487,653
pregnant women have
been enrolled in G-ANC



43,128
Cohorts of pregnant women
have been formed till date

Kaduna
Progress towards
program targets
• Data from Dec.
2020- Aug. 2022



100%
Of HCWs from target facilities have
been trained as G-ANC
facilitators



450,589
pregnant women have
been enrolled in G-ANC



31,410
Cohorts of pregnant women
have been formed till date

Nasarawa
Progress towards
program targets
• Data from Aug.
2021 - Sept 2022



100%
Of HCWs from the facilities have
been trained as G-ANC
facilitators



34,792
pregnant women have
been enrolled in G-ANC



1,857
Cohorts of pregnant women
have been formed till date

Yobe
Progress towards
program targets
• Data from Apr.
2022- Feb 2023



100%
Of HCWs from target facilities have
been trained as G-ANC
facilitators



29,308
pregnant women have
been enrolled in G-ANC



1,634
Cohorts of pregnant women
have been formed till date

Borno
Progress towards
program targets
• Data from Aug.
2022- Feb. 2023



100%
Of HCWs from target facilities have
been trained as G-ANC
facilitators



11,580
pregnant women have
been enrolled in G-ANC



1,482
Cohorts of pregnant women
have been formed till date

Niger
Progress towards
program targets
• Data from Sept.
2022- Feb. 2023



54.9%
Of HCWs from target facilities have
been trained as G-ANC
facilitators



14,844
pregnant women have
been enrolled in G-ANC



1,962
Cohorts of pregnant women
have been formed till date

Lagos
Progress towards
program targets
• Data from Sept.
2022- Feb. 2023



37.2 %
Of HCWs from target facilities have
been trained as G-ANC
facilitators



779
pregnant women have
been enrolled in G-ANC



71
Cohorts of pregnant women
have been formed till date



Early results from the states that have adopted GANC/PNC across supported facilities (using facility-based data through the NHMIS tools/DHIS2) have shown increase in retention of care (with increased antenatal visit), reduction in prevalence of malaria in pregnancy, increased facility delivery by pregnant women, increased postnatal care within 72 hours by both mothers and newborns.



OUR PROGRAMS



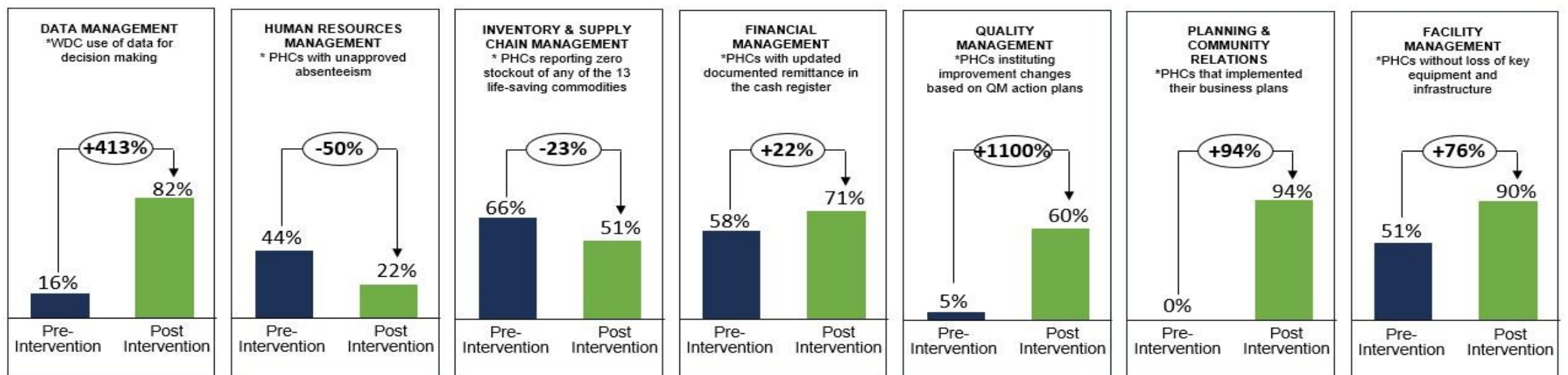
Primary HealthCare (PHC) systems strengthening for accelerated service delivery

Since 2020, TAConnect has been working to strengthen PHC systems in some Nigerian states. One of the approach is to improve the management capacity of PHC Managers (also known as Officers in Charge-OIC) and operational efficiencies of the PHC facilities through systems development and capacity-building interventions to address gaps in PHC management for quality service delivery. The key focus is on 3 distinct cross-cutting themes of capacity building, systems development and state engagement for an improved operational efficiencies to deliver quality reproductive, maternal, newborn, child, and nutrition services.

In Kaduna state, TAConnect supported a consortium of Health Strategy and Delivery Foundation (HSDf) and Solina Centre for International Development and Research (SCIDaR) to provide Technical Assistance to the State Primary Health Care Development Board to implement the Kaduna State Primary Health Care Management Capacity Strengthening Project (KPMSP) with Funding from the Bill & Melinda Gates Foundation.

By the end of active TA support in Kaduna state, findings from post program assessment indicate significant progress in the 7 domains from baseline: Utilization of data for decision making has seen a remarkable improvement of 413%. Human resource for health (HRH) optimization efforts have led to a 50% reduction in unapproved absenteeism among PHCs compared to the baseline. Supply chain management has seen a positive shift, with a 23% reduction in PHCs reporting zero stockout of any of the 13 lifesaving commodities, compared to the baseline. The number of PHCs with updated documented remittance in cash register has increased by 22%. Planning and community relations have improved significantly, resulting in a 94% increase from the baseline in PHCs that implemented their business plan. Substantial progress was recorded in facility management with a 76% increase from the baseline in PHCs that have managed to avoid loss of key equipment or infrastructure. These outcomes are pivotal for the revitalization of PHC and improving the quality of services offered, including key High Impact RMNCAH+N interventions.

Post program assessment data



Strengthening PHC monitoring and evaluation system

TAConnect provides customized solutions aimed at addressing the interconnected challenges that impede the efficacy of PHC monitoring and evaluation (M&E) systems. In line with our unwavering commitment to deliver technical assistance that makes a difference, we have conducted M&E System Assessments across several states including Kano, Nasarawa, Niger, Lagos, and Borno. Findings from these assessments highlight some key factors that hampers the effectiveness of the PHC M&E systems. These include the lack of standardized and updated data reporting tools, low reporting rates from facilities, and data quality gaps, amongst others. To address these challenges, we leverage our expertise and partnerships to develop interventions aimed at addressing the identified gaps. By working closely with stakeholders at the state level and healthcare workers at the facility level, we are able to implement a range of contextualized solutions that have led to a more efficient and effective, M & E system. We have also provided support in the development and implementation of comprehensive M&E frameworks and costed M&E system strengthening plans. As a result, we have addressed a myriad of issues that hindered the optimal utilization of available data for decision-making purposes paving the way for more efficient, effective and data driven decision making processes at the PHC level across four states.

PHC system diagnostic and management capacity assessment

TAConnect is a leading provider of technical assistance to Nigerian states seeking to improve the operational efficiency of their primary healthcare (PHC) facilities and enhance the uptake and quality of reproductive, maternal, newborn, and child (RMNCH+N) plus nutrition services. We work with our partners to identify gaps within the PHC system and co-create tailored solutions to address them. In Gombe, we conducted an in-depth diagnostic assessment of the state's PHC system across all six system pillars, with a particular emphasis on health financing, human resources for health (HRH), and data management. This comprehensive evaluation formed the basis for a grant secured by the state, aimed at strengthening its PHC system. We have also supported other states, including Nasarawa, Lagos, Yobe, and Kano, in assessing their PHC facility managers capacity and evaluating the impact of COVID-19 on their PHC systems. The findings and recommendations from these assessments have been used to develop tailored PHC management capacity strengthening plans for each state. At TAConnect, we remain committed to providing technical assistance to Nigerian states to ensure they overcome the challenges facing their PHC systems, achieve greater operational efficiency, and improve health outcomes.