



INTEGRATE HEALTH

Quarterly Progress Report Q4 FY 2018 (April 1 - June 30 2018)

Summary

Integrate Health (formerly Hope Through Health) exists to end preventable deaths in forgotten communities. By integrating professional Community Health Workers (CHWs) with improved care in public clinics, we are achieving lifesaving results. This report describes progress made over the past three months towards our ambitious goals. Integrate Health is pleased to share these “headlines” including successes and challenges, as well as output, outcome, and funding metrics to date. Please let us know if you have any questions or if we can expand upon any of the information provided in this report. Integrate Health is deeply grateful for your continued and generous support.

Outputs and Outcomes

	FY 2018 Q3	FY 2018 Q4	FY 2018 Total	FY 2018 Target
Delivery Indicators				
Total Population Served	40,000	40,000	40,000	40,000
# Clinics	9	9	9	9
# CHWs	43	43	43	43
# Home Visits	12,681	10,023	50,236	50,000
# Consultations of Children Under Five	4,667	5,596	20,102	20,000
# Facility Based Deliveries	135	198	706	600
# Women Started Family Planning	191	225	806	500
# Women enrolled in Prevention of Mother to Child Transmission	30	35	35	30

Results Indicators	FY 2018 Q3	FY 2018 Q4	FY 2018 Total	FY 2018 Target	Notes
Under-five Mortality Reduction	N/A	N/A	TBD	75%	30-month data is still under analysis.
Child Health Coverage (% of children under five consulted by CHW or in Clinic)	N/A	N/A	118%	95%	Rate over 100% due to an estimated 25% of patients treated coming from outside of the catchment population.
Timeliness (% cases of childhood illness treated within 72 hours of symptom onset)	93%	94%	96%	85%	IH is pleased to maintain a very high timeliness rate for the treatment of childhood illness cases.
Prenatal Consultation Coverage (% of women receiving 4 prenatal consultations before delivery)	27%	36%	39%	50%	Despite low rate, 97% of women received at least one. IH hypothesizes that impact of adding home-based pregnancy testing by CHWs will be seen in increased rates of prenatal consultation coverage over coming year.
Facility-based Delivery Coverage (% of women who deliver at a health facility, out of estimated number of deliveries)	65%	95%	85%	75%	IH is pleased to have exceeded the facility-based deliver target.
Contraceptive Coverage Rate (% of women effectively protected by a modern FP method, out of eligible women)	23%	29%	29%	25%	IH is pleased to have exceeded the contraceptive coverage rate target. This is likely due to the initiation of home-based family planning by CHWs.



Program Highlights

Successes

1. Integrate Health hosted two successful site visits from the Director of the Ministry of Health Division of Family Planning and Lomé-based Board Member Dr. Meskerem Grunitzky and UNAIDS Togo Country Director, Dr. Christian Mouala. All visitors highlighted the program's effectiveness, strong collaboration with the public sector and the quality of Community Health Worker performance.

Challenges

1. While the Medic Mobile application has officially launched in the pilot sites, CHWs and clinic staff continue to enter data in the app as well as on paper as back up. IH and Medic Mobile teams continue to work through various bugs and errors in the forms and dashboards in order to make sure work flows and indicator reports are accurate.

Expansion Highlights

Successes

1. Phase II is on track to launch in mid-July in five clinics and surrounding communities in the Bassar District. One clinical mentor and two CHW Supervisors were hired and trained. 32 CHWs were recruited and trained. Clinical training was also completed for 8 nurses, 1 midwife and 8 birth attendants.

2. Research is on track. 30-month data collection is completed, and Phase II baseline data collection for the stepped-wedge pragmatic cluster trial is underway and on schedule to be completed in early July.

Challenges

1. IH has been forced to negotiate a new procurement system with the national government pharmacy distributor, CAMEG. Upon separating from our local partner, AED-Lidaw, IH unknowingly lost our legal authority to procure from CAMEG (which had been predicated upon AED's status as an accredited clinic). Upon learning this, IH worked with the district and regional directors of the MOH to propose a new system. IH-supported clinics will procure from CAMEG directly with IH serving in an advisory and signatory role. IH has signed a contract with CAMEG to begin this new system, which will take effect as of July 1 2018.

Organizational Highlights

Successes

1. We have rebranded! We are now [Integrate Health](#). We've received overwhelmingly positive feedback on the new brand. If you haven't already, please read our [post](#) and watch a short film to understand more about why we undertook this change.

2. IH hosted a productive and inspiring annual in-person board meeting on April 28 2018 in New York City.

Challenges

1. The development of the new French-language site for Integrate Health (Santé Intégrée) is behind schedule but hopefully will launch in July 2018.

Financial Highlights

Successes

1. Integrate Health launched a redesigned chart of accounts and budget template to facilitate stronger reporting.

2. Integrate Health secured two new funding partnerships, received five grant renewals from existing partners, and became an official Big Bang Philanthropy grantee organization.

Challenges

1. Based on past cash flow trends illustrating that the majority of funds are received in June and December each year, IH set an internal target to have a 9-month funding runway as of July 1st and January 1st (6 months in operating account plus 3 months in reserve account). As of July 1 2018, IH had a 6.5-month funding runway, 2.5 months short of this internal goal.

Funding Snapshot

Metric	Result	Notes
Four-Year Funding Need	14M	Fiscal Years '19, '20, '21, '22
FY 2019 Projected Expenses	\$2.3M	
Current Funding Runway	6.5 months	Based on cash in operating and reserve accounts and scheduled disbursements as of July 1 2018