

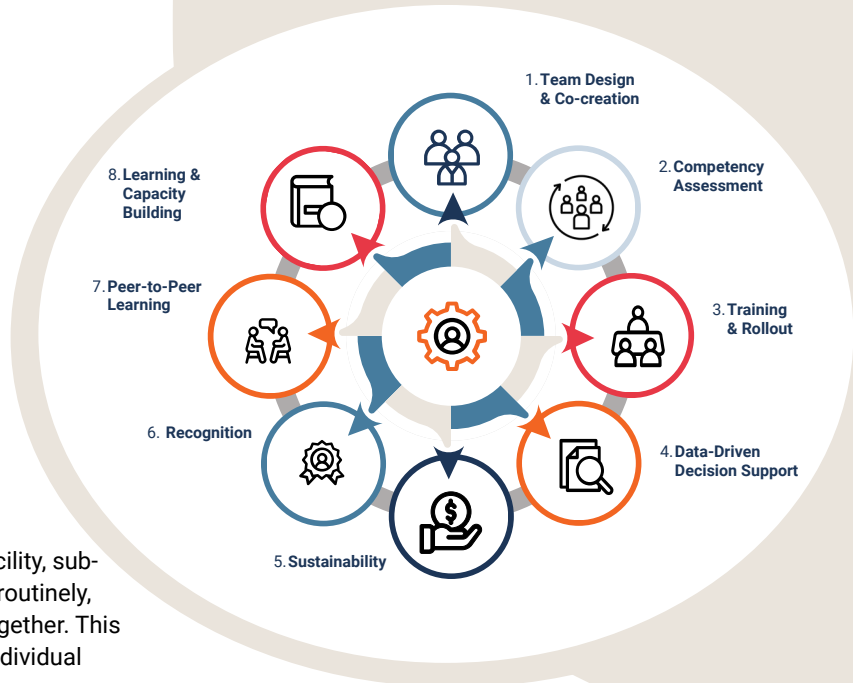
IMPACTT Approach: Building People-Centered, Data-Driven, High-Performing Supply Chains

What is the IMPACTT Approach?

Countries have invested heavily in digital systems, but performance gaps persist because data availability alone doesn't drive decisions.

The IMPACTT (Information Mobilized for Performance Analysis and Continuous Transformation Teams) approach fills this gap by building the teams and processes needed to turn data into action.

It is a people-centered, data-driven continuous improvement model that strengthens supply chains by mobilizing teams to use data for decision-making, problem-solving, and accountability.



The IMPACTT Framework



People: Multi-disciplinary teams across facility, sub-national/ regional and national levels meet routinely, review performance, and solve problems together. This shifts supply chain management from an individual task to a shared responsibility.



Data: IMPACTT leverages existing HMIS/LMIS systems and enhances use by improving access and visualization, building confidence in data quality, and linking data to operational and strategic decisions.



Processes: Teams follow a disciplined cycle (Review > Analyze > Prioritize > Act > Track > Learn). This creates a disciplined culture of performance management, accountability, and adaptive learning.

"We had a debt of TZS 140 million to MSD for the year 2024/2025. Through other initiatives alongside the IMPACT intervention, we now only order commodities that are needed and not out of routine. This has led to a reduction of debt to TZS 12 million." - Pharmacist, Tanga City Council

Institutionalizing Success: Key Features of the IMPACTT Approach

IMPACTT is designed for sustainability, embedding continuous improvement into existing health system structures. Key features include:

- **Designing & Co-Creating IMPACTT Teams:** Using initial profile assessments to define competencies and team composition.
- **Training & Rollout:** Building capacity to interpret indicators, set targets, and use action-oriented dashboards.
- **Structured Meetings:** Regular performance review meetings that connect facility, sub-national, and national levels, establishing a habit of data use.
- **Leadership Support:** Coaching and clear role definition from national and sub-national leaders to reinforce accountability.
- **Structured Problem-Solving:** Using systematic processes (e.g., 5 Whys, brainstorm, fishbone) to identify root causes and propose feasible, local solutions.
- **Action Planning & Follow-Up:** Developing clear actions with timelines, owners, and progress tracking.
- **Recognition & Peer Learning:** Implementing rewards, recognition, and cross-learning to motivate teams and reinforce improved performance.
- **Planning for Sustainability:** Integrating team structures, meeting routines, and performance processes into institutional policies and operational workflows.

Across Kenya, Tanzania, and Ethiopia, the IMPACTT approach has accelerated a shift from routine reporting to active data use, problem-solving, and measurable performance improvement. Despite vast differences in geography, health system maturity, and context, the trend shows when teams meet regularly, use data, and follow structured follow-up, supply chain performance improves.

Kenya

In Kenya, the IMPACTT approach was implemented in Nairobi, Isiolo, Nakuru, Kakamega, and Trans Nzoia counties, generating meaningful gains across diverse contexts.

- Meeting regularity varied by context but demonstrated strong adoption of performance review routines, with counties averaging roughly **40% of planned meetings held**, and two counties exceeding 50%.
- Reporting timeliness improved across most counties, with the **five-county average reaching above 90%** for the majority of program areas over the past year. Counties with higher meeting regularity demonstrated the strongest gains, underscoring the link between routine review and timely reporting.
- Data quality strengthened across all counties. On average, **about 90% of facilities achieved less than 10% reporting variance for sampled MNCH commodities**, reflecting greater alignment between opening balances, stock movements, and physical counts. Counties registering more consistent meeting follow-up achieved the strongest improvements.
- Commodity availability also improved in most counties. Facilities with more than three months of stock increased steadily, with notable gains recorded in counties with consistent reporting, allowing teams to identify gaps early and redistribute or procure accordingly.

"I previously did not know how to conduct a DQA; following the training, now I know how to do it and can follow up on the quality of data of a commodity through the DQA tool." - Pharmacist, Mikanjuni, Health Centre

Tanzania

In Tanzania, IMPACTT teams demonstrated exceptional consistency, with 100% of supported facilities completing all planned meetings during the year.

- Supply chain performance showed clear gains. **All 10 facilities achieved 100% reporting timeliness**, improving the predictability of ordering and enabling MSD to distribute commodities on schedule.
- Data quality improved significantly, with accuracy of "quantity consumed" rising from **14% to 60%**, contributing to more precise ordering and a reduction of **over USD 86,000 in medical debt** owed to MSD.
- Commodity availability remained consistently high, increasing from **92% to 93%**, signaling well-managed inventory with fewer emergency stockouts.

"[IMPACT teams] gave us a chance to use data for decision making." - Ona Panga, Regional laboratory scientist, Geita, Tanzania

Ethiopia

In Ethiopia, 23 facilities implemented IMPACTT through Performance Monitoring Teams. The teams conducted **70% of planned meetings**, with seven facilities achieving 100% meeting completion.

- Regular data review led to stronger reporting performance, **with reporting rates improving by up to 40.7%. Inventory accuracy increased to 95%** across both implementation areas, significantly above baseline levels.
- These system-level improvements translated into better availability of RMNCH products. Overall **commodity availability increased from 78% to 93%**, and the proportion of **facilities experiencing stockouts dropped by over 26%**. Facilities **achieving 100% availability rose from 17% to 53%**.
- Prescription fill rates also improved, reaching 93% in Jarso and 91% in Dire Dawa, indicating that more clients could receive all prescribed medicines without referral delays.