



<p>Case Title: CLA-inspired enhanced COVID-19 specimen collection and transportation in the conflict area of Mindanao, Philippines</p>
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<p>Organization: Prime: ICF and Local implementing partner: FHI 360 Implementing mechanism: USAID’s Infectious Disease Detection and Surveillance (IDDS) project</p>



A health worker in Davao del Sur province with COVID-19 specimen packages on the way to hand them over to IDDS provided vehicles to transport them to the laboratory for rapid and quality assured diagnosis and to enhance diagnostic accessibility in conflict areas of South Philippines.
Photo Credit: IDDS Project/Philippines

SUMMARY:

The USAID Infectious Disease Detection and Surveillance (IDDS) project in the Philippines worked with the government and other implementing partners in an emergency response to address challenges across the COVID-19 specimen referral and transport pathway. An innovative specimen transport model was designed and implemented to ensure functional and timely COVID-19 specimen processing and diagnosis.

Establishing a patient-centered, time efficient, and quality-assured specimen referral and transport system in a rapidly changing operating environment demanded collaboration at both demand and supply side of the prevailing COVID-19 crisis. Stakeholders included service providers, affected communities, and national, regional, and local governments. Systematic and consistent adaptive management practices were urgently needed. The project incorporated components of USAID’s CLA Framework during planning and implementation of the intervention. IDDS conceptualized and operationalized the project by fostering multi-faceted collaborations, employing evidence-based adaptations to facilitate decision making, and generating replicable knowledge products informed by impactful practices.

The project interventions aimed to strengthen capacity of health care workers on COVID-19 specimen collection, handling, packaging, and transport as well as reinforce required human resource and logistics. The IDDS/Philippines project led to an improved COVID-19 specimen transport system, while ensuring safe transportation and maintaining the quality of specimens. This resulted in increased access to testing and significantly reduced the transport and test results return time. Reducing the test results time is critical for early diagnosis, treatment, initiation, and reduction of COVID-19 transmission. This is of particular importance in the Mindanao region, Philippines, which is a conflict area characterized by sectarian armed insurgency. The Mindanao region was under martial law for almost three years until January 2020, due to armed conflicts. Post-martial law, the restive region was placed under a state of emergency. In the context of socio-political challenges, the IDDS project in the Philippines contributed to the strengthening of diagnostic networks and laboratory systems in support of country goals for the Global Health Security Agenda and infectious diseases control program like the COVID-19 pandemic.

Think about which subcomponents of the **Collaborating, Learning & Adapting (CLA) Framework** are most reflected in your case so that you can reference them in your submission:



- Internal Collaboration
- External Collaboration
- Technical Evidence Base
- Theories of Change
- Scenario Planning
- M&E for Learning
- Pause & Reflect
- Adaptive Management
- Openness
- Relationships & Networks
- Continuous Learning & Improvement
- Knowledge Management
- Institutional Memory
- Decision-Making
- Mission Resources
- CLA in Implementing Mechanisms

1. WHAT: What is the general context in which the case takes place? What organizational or development challenge(s) prompted you to collaborate, learn, and/or adapt?

At the beginning of the COVID-19 outbreak in the Philippines, there were only one national and five subnational laboratories performing COVID-19 real time polymerase chain reaction (RT-PCR) tests in a country with 110 million people. The imposition of quarantine and other pandemic control measures led to prolonged suspension of mass public transportation, crippling the movement of almost all types of transportation, and therefore, the transportation of specimens from collection sites to the designated laboratories was severely disrupted, affecting timely collection, transportation, and diagnosis. Transportation challenges were particularly serious in the conflict-affected area of Mindanao, which already suffered from poor access to health services.

Mindanao region, the IDDS/Philippines project site, was under martial law for almost three years until January 2020 due to armed conflicts in the region. Historically, the island of Mindanao has been the perennial flashpoint of various armed conflicts in the country. A recent example of regional conflict is the Islamic State (ISIS)-linked armed takeover of Marawi City, triggering the displacement of thousands of families. These conflicts exacerbated existing travel and transportation challenges; suspension of all means of land, air, and sea travel in the country due to the pandemic; and police and military checkpoints resulted in long lines of people and delays in moving commodities. The resulting delays and disruptions significantly contributed to health inequities.

In the prevailing socio-political background, FHI 360 and ICF applied their global experience and institutional memory in strengthening laboratory systems and developing strategic plans, guidelines, training materials, and standard operating procedures. Both institutions have enduring relationships with USAID, hence collaborated with the USAID country mission in partnerships with the Department of Health (DOH) at national, regional, and provincial levels, as well as key Implementing Partners (IPs) in the area, to rapidly plan, adapt, and implement the IDDS project in the Philippines. IDDS/Philippines was planned and operationalized with the objective of increasing laboratory testing capacity and increasing access to timely quality COVID-19 test results through the expedited and safe collection and transportation of specimens. The overall intent was to curb the spread of COVID-19 in the Mindanao region. A broad goal of the project was to help the Philippine government address the threat of the pandemic by strengthening the capacity of the DOH in the detection and surveillance of the COVID-19 pandemic.

2. WHY: Why did you decide to use a CLA approach? Why was CLA considered helpful for addressing your organizational or development challenge(s)?

The island of Mindanao has been the perennial flashpoint of different armed conflicts, and COVID-19 forced suspension of all means of land, air, and sea travel in the country. Coupled with this, police and military

checkpoints were placed at all entries and exits of local borders causing long lines of people and commodities going in and out. These both exacerbated the already challenging situation and significantly contributed to health inequities. At the beginning of the COVID-19 outbreak in the Philippines, there were only one national and five subnational laboratories performing COVID-19 RT-PCR tests. The Southern Philippines Medical Center (SPMC) Molecular Laboratory was the only COVID-19 sub-national laboratory catering to the whole island of Mindanao. The imposition of quarantine and other pandemic control measures led to prolonged suspension of mass public transportation, crippling the movement of almost all types of goods and services transportation, and therefore, the transportation of specimens from collection sites to the designated laboratories was severely disrupted affecting timely collection, transportation, and diagnosis.

Given these epidemiological and socio-political challenges, the IDDS/Philippines project team knew that the most appropriate strategy to bring immediate and impactful results in a rapidly changing operating environment in a security-sensitive region was to employ our CLA learnings and well-established adaptive management practices which we gained over the years implementing different health projects. We intentionally planned for and used different components of the CLA framework. Coordination and collaboration across the IDDS project team, partners, and government ensured that CLA approaches were consistently and systematically used at the project management level. Partners enabled CLA conditions by relying on an organizational culture of openness and existing networks and knowledge management practices for continuous improvement and timely decision-making. The CLA framework also provided us with strategic insights and tools to identify and streamline independent activities of the project and work together by mutually reinforcing project objectives and goals.

3. HOW: Tell us the story of how you used a collaborating, learning and/or adapting approach to address the organizational or development challenge described in Question 2.

At the onset of the COVID-19 outbreak, there were only five Subnational laboratories in the country performing COVID-19 RT-PCR tests. Only one laboratory (Southern Philippines Medical Center) was available to serve the entire Mindanao area, which has a population of 27 million (2020 Census of Population and Housing, PSA, Government of the Philippines).

The IDDS/Philippines project and embedded in it the CLA approaches in our project management cycle, enabled us to remain adaptive and responsive to the dynamic operating environment to quickly detect, track, and respond to threats posed by COVID-19. At the request of USAID, IDDS worked with the Government of the Philippines, regional governments, the Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO), and others to identify challenges across the specimen referral and transport pathway. Partners then designed an innovative transport model to provide a functional and timely mechanism for safe collection, referral, and transport of specimens for COVID-19 testing. The model included capacity strengthening of health care workers, recruitment of additional staff, vehicle rentals, and procurement of necessary commodities and supplies such as viral transport medium (VTMs), specimen transport boxes, and automated PCR machines. Together, these interventions aimed to improve the testing capacity of frontline healthcare workers and the COVID-19 laboratory at the Southern Philippines Medical Center.

Prior to IDDS implementation in Mindanao, the local IDDS team led a series of introductory and consultation meetings with health officials at the national, regional, and local government unit (LGU) levels, including the regional epidemiology and surveillance unit (RESU), provincial epidemiology and surveillance unit (PESU) and other USAID IPs already on the ground conducting COVID-19 emergency response. A landscape assessment was conducted to scan and identify immediate and specific needs of the proposed IDDS project sites in addressing the COVID-19 crisis. These collaborative efforts of IDDS were anchored in an established national, regional, and local protocol for COVID-19 surveillance, recording, and reporting. The presence of other USAID IPs in the area aided the local IDDS team to optimize and streamline COVID-19 emergency response by integrating and harmonizing USAID and Philippine government resources and technical assistance being provided to the frontline healthcare workers such as capacity building, provision of commodities, and increasing testing

capacity of the sub-national laboratory in the area, thereby preventing redundancies in the scope of work of all USAID IPs and government counterparts.

With this backdrop, the local IDDS team has managed to bring the technical assistance and emergency response to Mindanao areas by forging partnerships with the Department of Health at the national, regional, and LGU level COVID-19 surveillance units including sub-national laboratories, specimen collection units as well as quarantine facilities established by the Philippine government and other USAID IPs present and operating within IDDS project sites. As our counterpart in this emergency effort, the national level DOH cascaded communications to the regional DOH, paving the way to smooth implementation of IDDS efforts in all sites. Further, the regional-level DOH and LGUs have provided checkpoint clearances and quarantine passes to IDDS field teams necessary to cross borders between project sites and deliver all COVID-related commodities and support on the ground. Meanwhile, the local IDDS field team streamlined efforts and resources by harmonizing all ground-level activities and technical assistance with other USAID IPs already operating in the same areas. Through these partnerships and whole-of-government approach, transport teams were deployed to cater to different COVID-19 swab collection units and COVID-19 sub-national laboratories, achieving the development results reported in response to question 5.

In the CAL-inspired process of collaboration with regular pause-and-reflect, and by establishing these evidence informed systems, IDDS strengthened the ability of health systems of the Philippines, enhanced capacity of health providers, and developed a documented blueprint to plan and execute interventions in a rapidly changing operating environment to bring immediate and measurable impact to manage health crisis like the COVID-19 pandemic. The fundamentals of CLA tools and approaches were consistently and systematically employed in the project, such as the collaboration and coordination mechanism, evidence-based knowledge management system, generating and capturing measurable changes with evidence, leveraging organizational culture of openness and existing networks, and knowledge management practices for continuous improvement for timely decision-making ability. CLA approaches enabled a direct emergency response to the pandemic in a conflict-affected region and helped to establish a replicable model of patient care as an integral component of disease outbreak response and surveillance.

4. ORGANIZATIONAL IMPACT: How has collaborating, learning and adapting affected your team and/or organization? If it's too early to tell, what effects do you expect to see in the future?

The organizational approaches in IDDS' COVID-19 emergency response are guided by the national, regional, LGU actionable information provided to the IDDS local team during the landscape assessment, the series of virtual consultation meetings with different tiers of epidemiology surveillance units of the Philippine government, and close collaboration with other USAID IPs working at the same project sites. The local IDDS Team has managed to overcome barriers brought about by strict implementation of community quarantine by closely working with LGU counterparts. Due to local lockdowns, the central IDDS Team based in Manila could not travel to the project site to conduct and directly oversee the implementation of IDDS activities on the ground.

However, as the result of IDDS collaboration with LGUs within the project sites, the deployment of local IDDS field personnel, dedicated vehicles, and COVID-19 laboratory equipment and consumables were expedited through the support of concerned LGUs. Collaborative work with other USAID IPs on the ground has been a model of success in harmonizing and streamlining efforts and resources during the COVID-19 emergency response provided through IDDS. This model of successful collaboration with national, regional, LGU, and other IPs on the ground has been instrumental in developing strategies and work plans in the succeeding IDDS work.

5. DEVELOPMENT IMPACT: How has using a CLA approach contributed to your development outcomes? What evidence can you provide? If it's too early to tell, what effects do you expect to see in the future?

The IDDS/Philippines project was informed and implemented with CLA approaches embedded in its design. The project led to an improved COVID-19 specimen transport system, while ensuring safe transportation and

maintaining the quality of specimens. This resulted in increased access to testing, thereby reducing test results return time and contributing to early diagnosis, treatment, and reduced COVID-19 transmission in the conflict area of Mindanao, Philippines. The transfer of new skills to critical frontline health providers in the fight against COVID-19 ensured maximal reach and accessibility, as well as faster and quality-assured diagnosis to achieve health outcomes. Our intervention achieved measurable positive impact at scale. Major results included:

- 347 frontline healthcare workers trained at five project sites in Mindanao in COVID-19 on (1) specimen collection; (2) handling; (3) packaging and (4) transportation. Training of critical frontline health providers in the fight against COVID-19 ensured maximizing reach and accessibility, faster and quality assured diagnosis to achieve health outcomes.
- More than two and a half times increase in the collection units with COVID-19 trained frontline healthcare workers from 29 to 100 facilities in the five IDDS-supported sites
- 29,333 specimens for COVID-19 testing transported by the IDDS project from May 12 to November 30, 2021 (and an almost 400 percent increase in the daily average number of specimens transported, which increased from 55 to 214)
- Laboratory testing capacity of Southern Philippines Medical Center increased five-fold from 300 to 1,500 tests per day
- Specimen transport time from collection units to the assigned COVID-19 testing laboratory reduced from around 72 hours (3 days) to around 24 hours (1 day)

The measurable impact illustrates the fundamental role of CLA tools and approaches consistently and systematically employed in the project, such as the collaboration and coordination mechanism, generating and capturing measurable changes with evidence, making best use of organizational culture of openness and existing networks, and use of knowledge management practices for continuous improvement for timely decision-making ability. CLA approaches enabled us to trigger health improvements in a conflict-affected and politically sensitive region and establish a replicable model of patient care as an integral component of disease outbreak response and surveillance. IDDS/Philippines project facilitated diagnosis-based clinical and public health decision-making which are critical to patient care, surveillance, and disease outbreak early warning system response.

6. ENABLING CONDITIONS: How have enabling conditions - resources (time/money/staff), organizational culture, or business/work processes - influenced your results? How would you advise others to navigate any challenges you may have faced?

During the initial wave of COVID-19 in the Philippines, imposition of quarantine suspended mass public transportation, crippling the movement of almost all types of transportation, and therefore, the transportation of specimens from collection sites to laboratories. As a result, this severely affected the timely collection, transportation and testing of specimens and the diagnosis of COVID-19. Transportation challenges were especially serious in the conflict-affected area of Mindanao which already suffered from poor access to health services. As mentioned in question-1, the island of Mindanao has been the perennial flashpoint of different armed conflicts. These, on top of geographic and socio-economic attributes, suspension of all means of land, air, and sea travel in the country, aggravated the already challenging situation and significantly contributed to health inequities.

Our experience and learning using different approaches of the CLA framework during the IDDS/Philippines project implementation underpinned the importance of understanding the needs, operating environment, adaptability, and power of convening partners at all levels to collectively address the issue at hand and attain positive outcomes. Also, properly understanding the strengths and weaknesses on both the demand (community)

and supply (government and IPs) sides of an issue is critical to enabling realistic planning and implementation of community-oriented interventions. CLA approaches also help project implementers to identify shared needs and mission overlap and provide tools to enhance this common ground whenever possible. As evident from results achieved by the IDDS/Philippines project, customized products and services adapted to the local context keep the community's wellbeing at front and center while ultimately aiming for long-term impact and organizational goals; this can be achieved by embedding CLA tools and approaches at all levels of the project management. In summary, collectively, this whole-of-government and USAID IPs approach has improved the fighting chance of the people in Mindanao in battling the COVID-19 pandemic, alleviating the burden of disease exacerbated by strict travel restrictions in the country.