



# HEALTH BUILDERS

## 2022-2027 Strategic Plan

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### PURPOSE

The five-year strategic plan will help to determine Health Builders' direction and to ensure that everyone in the organization is working towards defined goals. This will also assist to align resources for optimal results and to engage management and staff to communicate what needs to be done and how best to achieve it.

### STRATEGIC GOALS

The overall objective is to ensure access to quality health services for the rural communities in Rwanda with the most need.

*Note: Health Builders' interventions address U.N. Sustainable Development Goal number 3: to ensure healthy lives and promote well-being for all at all ages.*

### MONITORING AND EVALUATION (M&E)

The Health Builders M&E framework is based on its Theory of Change. It has also been guided by priorities identified by the Rwandan Ministry of Health (MOH) to improve the quality of care and services in health facilities.

Health Builders' impact is consistently monitored and evaluated, with identified metrics collected either quarterly or annually to track progress. To evaluate each health center's performance, we will conduct an annual performance survey through direct observation of activities, document reviews, staff interviews, and an inspection of the physical facility and staff. Data collected will be analyzed to identify specific weak spots for follow-up at each center. In addition to those annual performance surveys, Health Builders will also collect quarterly data from Rwanda's Health Management Information System (HMIS) to measure health outcomes. Through strong M&E, Health Builders seeks to demonstrate that improved management and clinical care in health facilities leads to equitable and easy access to quality healthcare services and outcomes.

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# Improve the quality of primary health care and patient safety

STRATEGY A

**Improve patient care through mentoring and education of health facility staff. Primary focus is on: Reproductive, Maternal Neonatal and Child Health (RMNCH), Non Communicable Diseases (NCDs) and Infection Prevention and Control (IPC)**

EXPECTED RESULTS

- ✓ Increase health center performance in quality of care from 59.5% to 85%
- ✓ Increase patient satisfaction from 76% to 85%
- ✓ Increase the number of health centers with youth friendly Adolescent Sexual and Reproductive Health (ASRH) corners from 16 to 39
- ✓ Reduce the case fatality rate of diarrheal diseases for children <5 years old from 4% to 2%
- ✓ Reduce the case fatality rate of pneumonia and other acute respiratory infections among the under-five from 2.7% to 1.5%
- ✓ Increase the proportion of hypertension patients with controlled blood pressure from 22.5% to 40%
- ✓ Increase the proportion of diabetic patients with controlled glycaemia from 24% to 34%
- ✓ Reduce the incidence of postpartum infections from 4% to 2%
- ✓ Ensure availability of evidence-based patient care guidelines, protocols and other tools in child health and NCD care in all the health facilities we support

STRATEGY B

**Expand the capacity of Community Health Workers (CHWs) as they move into new broader roles to ensure our interventions go deeper into the community**

EXPECTED RESULTS

- ✓ Increase the % of cases treated at the community level by CHWs from 29% to 50% for malaria and from 19% to 50% for diarrhea
- ✓ Increase the % of cases well managed by CHWs from 74% to 85% for malaria, from 61% to 85% for diarrhea and from 31% to 70% for pneumonia

STRATEGY C

**Continuously assess the focus areas and identify other areas as needs and resources change**

EXPECTED RESULTS

- ✓ Evaluate health center performance and community needs assessments annually (review of Rwanda Demographic and Health Survey, Health Management Information System and other health statistics) and recommend any changes needed

STRATEGY D

**Enhance use of healthcare technology and digital health for care provision**

EXPECTED RESULTS

- ✓ Expand the number of health facilities with ultrasound scan technology from 30 to 60
- ✓ Deliver a digital health tool for diabetes, hypertension and under-five children's illnesses
- ✓ Evaluate other opportunities for additional digitalization of reproductive, maternal and neonatal health and electronic medical records

# Increase accessibility and use of primary healthcare services

STRATEGY A

**Strengthen government efforts to further expand the health infrastructure to sectors without health centers**

EXPECTED RESULTS

- ✓ Complete, equip and operate Mwulire health center in Rwamagana District
- ✓ Renovate six existing health centers in poor condition

STRATEGY B

**Increase geographical accessibility of primary health care through the rollout of innovative modular health posts**

EXPECTED RESULTS

- ✓ Complete, equip and operate the three health posts constructed in Rulindo District
- ✓ Build, equip and operate at least five new health posts in partnership with local governments
- ✓ Evaluate rollout of initial health posts to inform a recommendation on further expansion

STRATEGY C

**Strengthen availability and functionality of essential medical equipment in primary health care facilities**

EXPECTED RESULTS

- ✓ Ensure basic equipment is available and functional in 60 health facilities

STRATEGY D

**Support the health centers in delivering increased community education**

EXPECTED RESULTS

- ✓ Enhance the coverage of eight antenatal care visits from 0 to 20%
- ✓ Increase the coverage of hypertension treatment from 10% to 60% and diabetes treatment from 6% to 21%
- ✓ Educate more than 70% of women in reproductive age (~217,000) on Reproductive, Maternal, Neonatal and Child Health (RMNCH)
- ✓ Reach more than 70% of adolescents (~195,000) with education on Adolescent Sexual and Reproductive Health and Rights (ASRH&R), drug and substance abuse and gender-based violence

STRATEGY E

**Raise community awareness of Non-Communicable Diseases (NCDs) and launch the door-to-door mass screening program for diabetes and hypertension**

EXPECTED RESULTS

- ✓ Screen at least 90% of the population between 15 and 60 (~600,000 people) for diabetes and hypertension
- ✓ Enroll more than 100,000 patients in the NCDs care

# Strengthen management systems of the primary healthcare facilities

STRATEGY A

**Strengthen leadership and governance of health facilities**

EXPECTED RESULTS

- ✓ Increase health center performance in leadership and governance from 69% to 85%

STRATEGY B

**Improve data quality at the health centers**

EXPECTED RESULTS

- ✓ Increase maternity data accuracy from 58% to 85%
- ✓ Increase malaria data accuracy from 90% to 95%
- ✓ Increase vaccination data from 67% to 85%
- ✓ Increase hypertension data accuracy from 8% to 50%

STRATEGY C

**Collaborate with health centers to improve their pharmaceutical management**

EXPECTED RESULTS

- ✓ Increase availability of core medicines from 75% to 90% in all the health facilities
- ✓ Reduce the financial loss due to expiration of medicines by 50%
- ✓ Increase the proportion of health centers with a positive pharmacy net profit margin from 55% to 85%

STRATEGY D

**Support the health centers in increasing their financial stability**

EXPECTED RESULTS

- ✓ Reduce the financial loss due to healthcare invoices inaccuracies by 50%
- ✓ Reduce the CBHI (Community Based Health Insurance) invoice discrepancy rates from 12% to 5%
- ✓ Increase the % of financially stable health centers (i.e. with a positive net profit margin ratio) from 36% to 60%



# Ensure our organization and its Board is appropriately structured and resourced to achieve its goals

**STRATEGY A**

**Ensure availability of a multidisciplinary team to deliver on the strategic goals**

**EXPECTED RESULTS**

- ✓ Add critical skills that are necessary for the organizational growth
  - Ensure each district is supported by two staff members with clinical and managerial skills
  - Recruit a Development & Communications Officer

**STRATEGY B**

**Strengthen the Health Builders Board to support the organization’s mission**

**EXPECTED RESULTS**

- ✓ Add three to five new Board members with a focus on development and/or access to new networks
- ✓ Establish a Board of Advisors to leverage additional resources and expertise

**STRATEGY C**

**Identify and maximize the use of electronic tools to optimize resources and facilitate reporting**

**EXPECTED RESULTS**

- ✓ Finalize and roll-out our Monitoring & Evaluation (M&E) digital tool
- ✓ Explore upgrading our M&E digital tool to be used for primary healthcare accreditation self-assessment

**STRATEGY D**

**Ensure Health Builders raises a steady stream of revenue to support its programs and ensure sustainability**

**EXPECTED RESULTS**

- ✓ Increase the organization’s revenue by 10% each year
- ✓ Approach and establish new partnerships with at least five family foundations or corporate partners
- ✓ Increase the proportion of unrestricted funding from 33% to >50% of total revenue
- ✓ Explore opportunities to optimize our business model and our ability to scale:
  - Are there criteria we would set for a “lightened” relationship with strong performing health centers?
  - What decision criteria should we use to consider geographic expansion opportunities?