SAVICS
Everyone matters!

Photo by Annie Spratt on Unsplash

SAVICS

Everyone matters

Who we are

IT social start-up	Founded in **Brussels** in **2016**	**Flat structure** with **self-managed teams**	**Profitable** since Year 1
Focused on **health information systems**	**+40 FTEs** of which **70% are Africans** living **in Africa**	**33 year**s team average age	**+500** labs/clinics connected in 4 years
1M EUR turnover in 2019	Operating in **15 LMICs** countries	**Innovation & co-creation**	

SAVICS
Everyone matters

Savics solutions – One connected platform
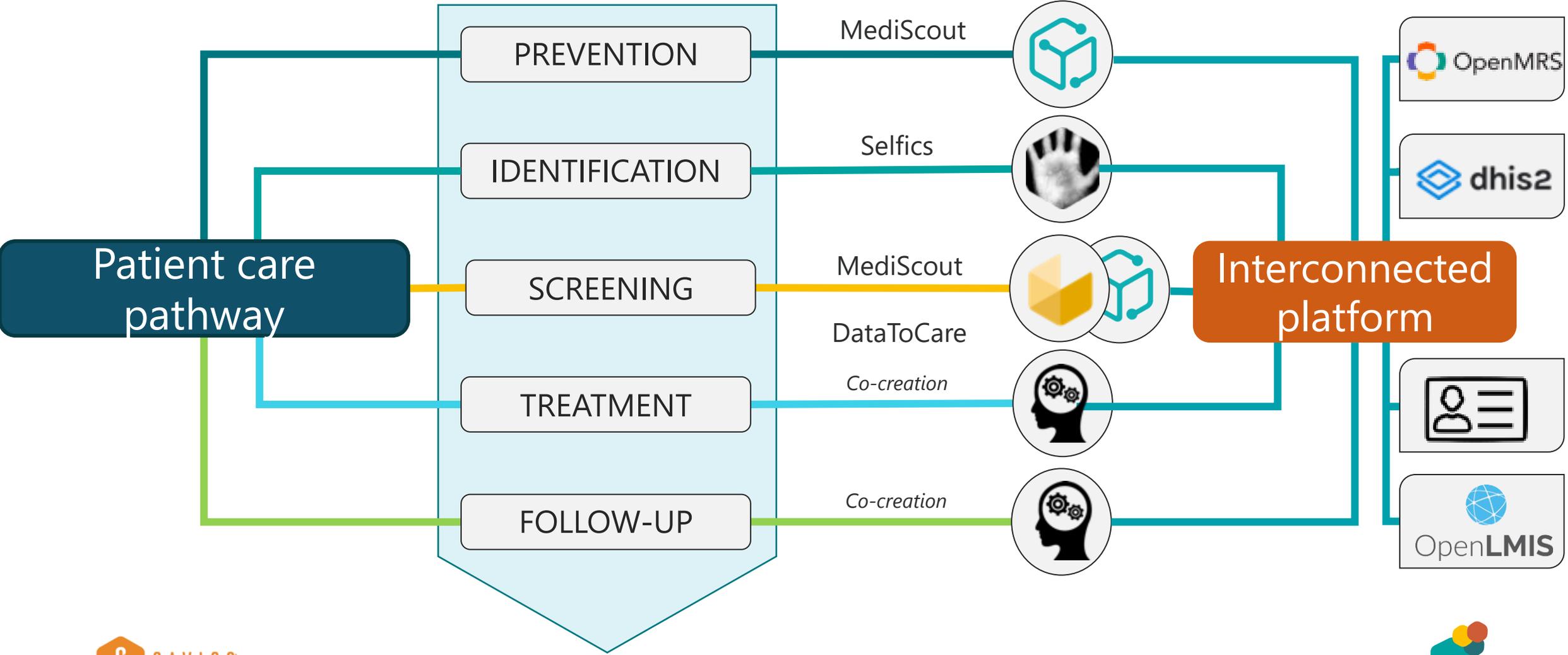
Patient care pathway

	MediScout
PREVENTION	
IDENTIFICATION	Selfics
SCREENING	MediScout
	DataToCare
TREATMENT	Co-creation
FOLLOW-UP	Co-creation

Interconnected platform

OpenMRS

dhis2

OpenLMIS

SAVICS

3

MediScout©

Finding Missing patients with Innovative Community-Based Surveillance Tools

Addressing Health systems challenges

Difficulties in **targeting high-risk communities** to focus screenings

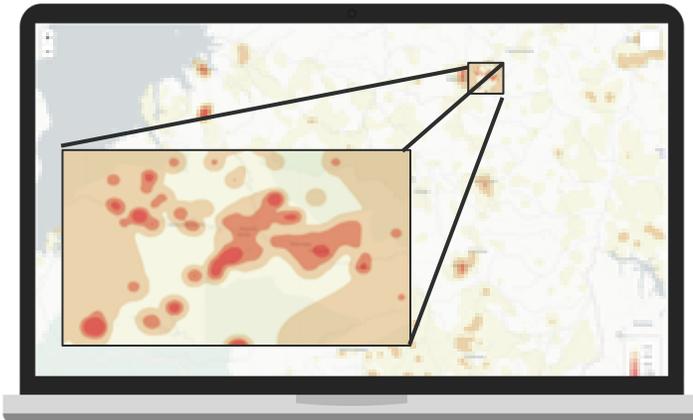Difficulties in **disease monitoring & surveillance**

How can we find missing cases effectively and link them to diagnosis for faster treatment?

OUR SOLUTION:

A DATA-DRIVEN, RESOURCE-EFFICIENT APPROACH FOR ACTIVE CASE FINDING AND CONTACT TRACING
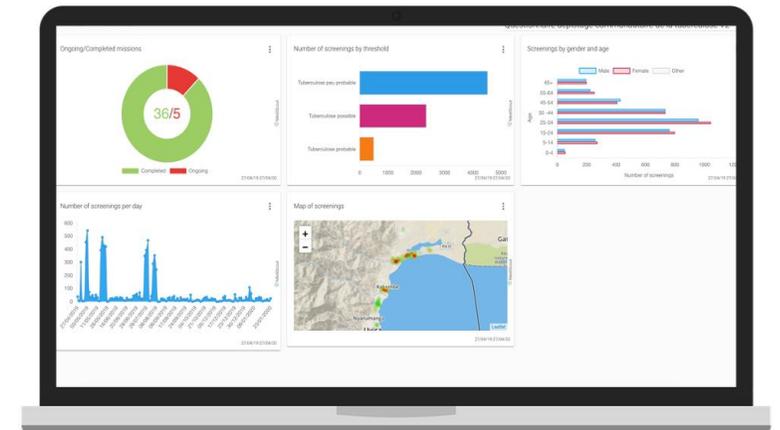
MediScout - Our approach

1

Prediction map
data-driven mapping of high-risk communities to focus surveillance efforts

2

Mobile application
digital data collection tool that estimates individual disease risk, and enables referrals of the most at-risk.
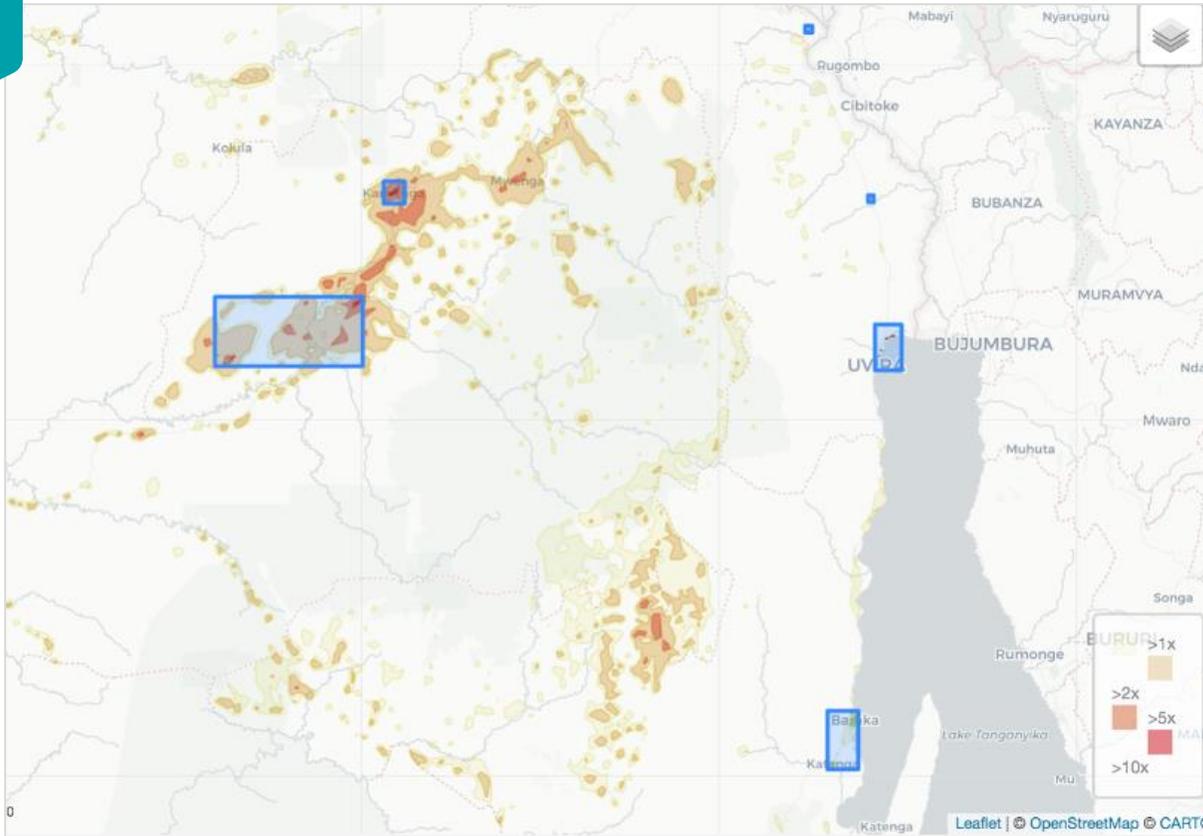
3

Web application
dashboard for planning and monitoring of large-scale field screenings

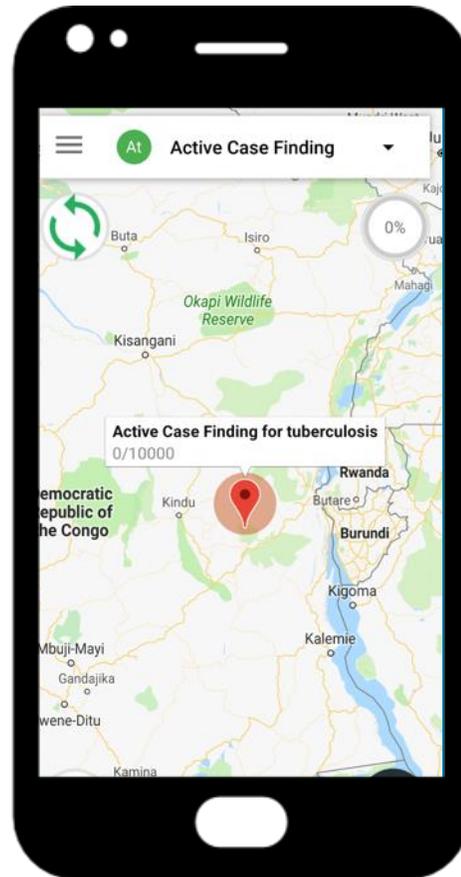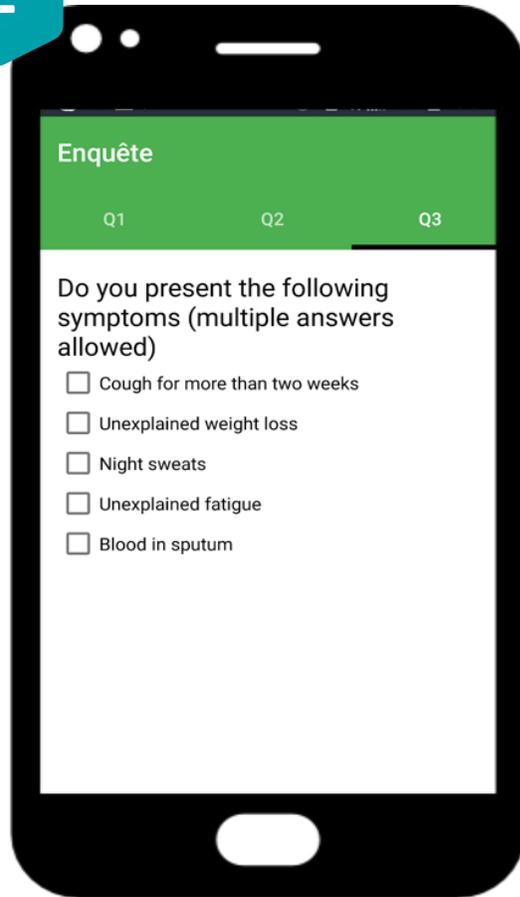# Data-driven mapping of high-risk communities

1

Predictive maps use algorithms applied to satellite images and data such as:

- ○ **Open source data** (WHO incidence levels, population density and distribution, mines camps, health facilities, etc.)

- ○ **Annual reports** from the local health system

https://maurofaccin.github.io/cartotb/en/

MediScout© Mobile App

Works offline and online

Even in the most demanding contexts
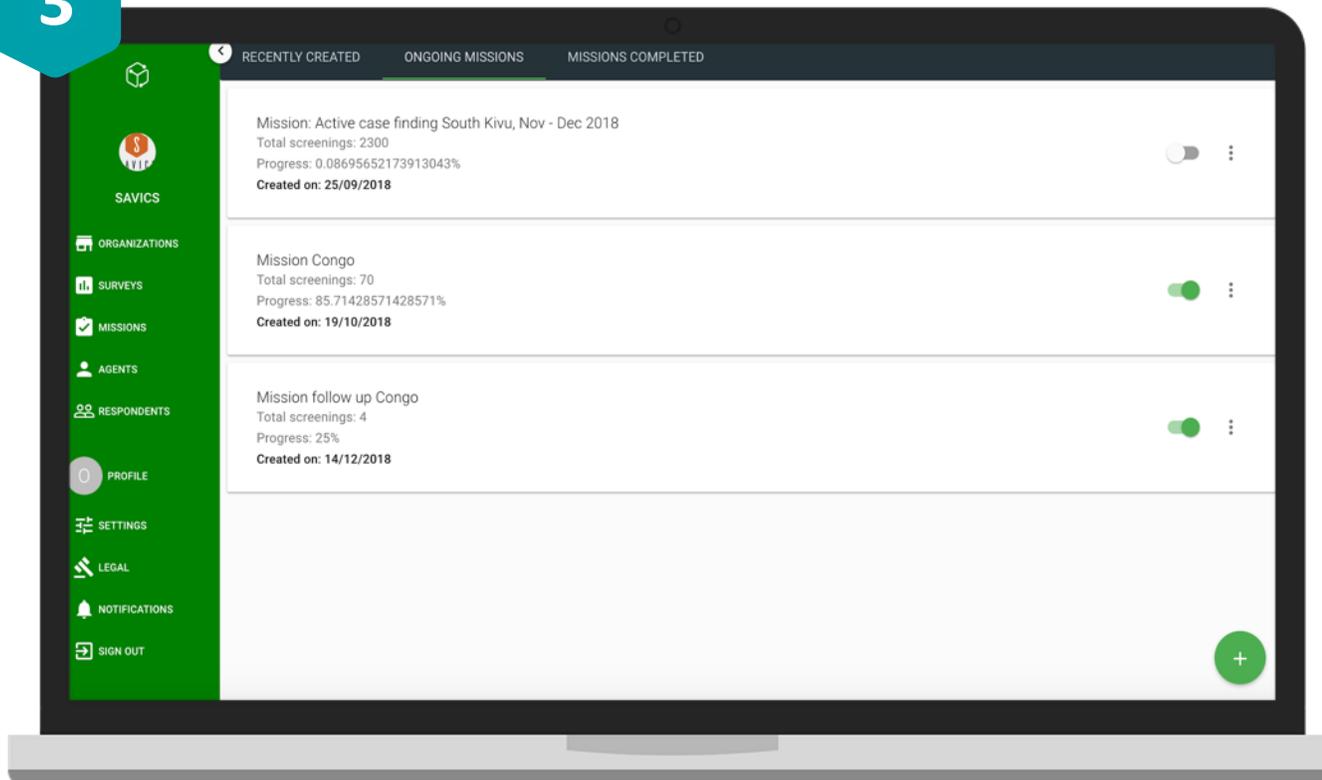
Disease risk assessment

CHWs administer questionnaires that scores and risk-stratifies patients.

Adjusted guidance

According to the disease risk scores, CHWs are auto-guided to offer patient care seeking advice.

MediScout© Web App

Faster planning

plan and monitor active case finding missions on the web app

Easy analysis of collected data

standardized data gathered in real-time.

Successfully tested in the field

Pilot study performed in South Kivu (Democratic Republic of Congo) in 2019

Objective: Improve the organization and number of TB cases found via active-case finding efforts in South Kivu.

Pilot Results in South Kivu

- **13,481 screenings** performed by 25 community health workers (CHWs)

- Medium to high-risk patients were **referred for microscopy tests** at nearby labs

- Increased number of found missing cases in those communities: **More than 10X cases found with this approach**

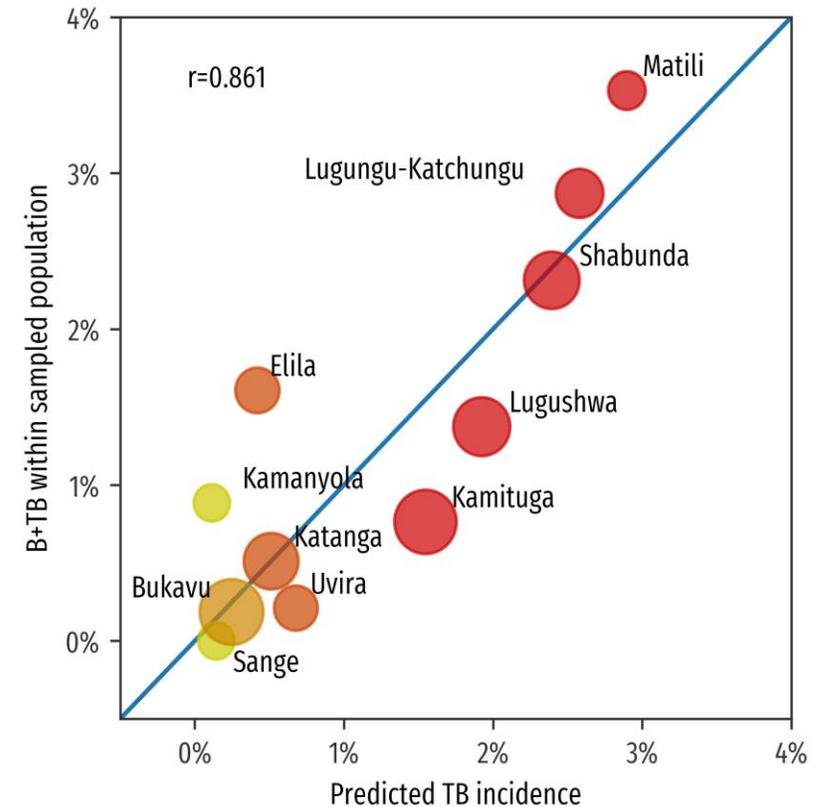- Increased efficiency of CHWs: **CHWs screened 3x as many patients compared to before MediScout©**

HOT-SPOT PREDICTION

The prediction maps can be used to prioritize locations of screening interventions:

○ **Strong correlation** of predicted TB incidence rate with confirmed TB positivity ratio within sampled population

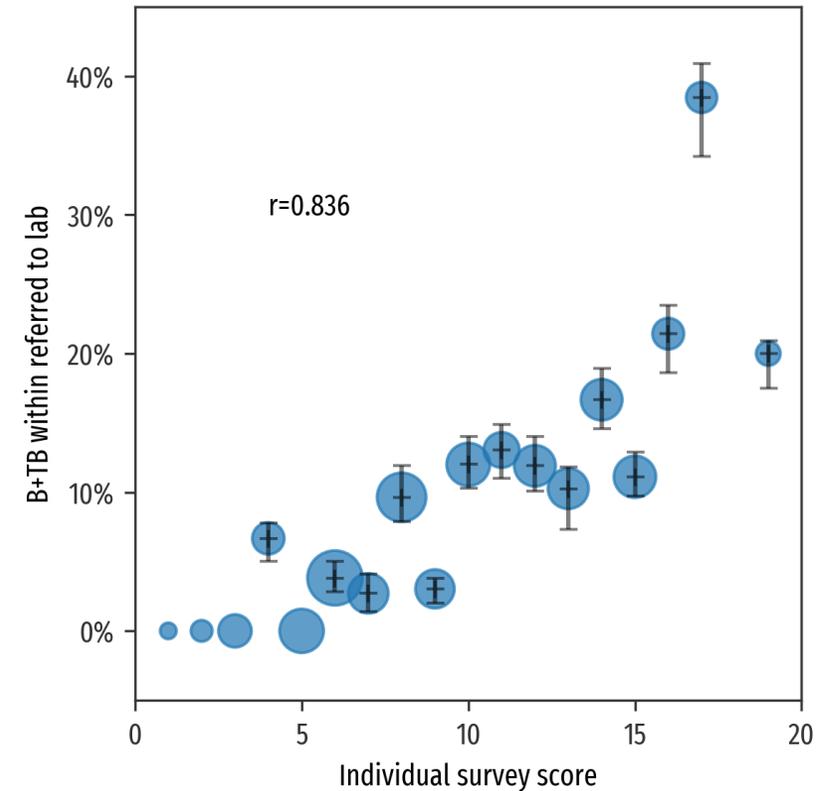○ The confirmed TB patients found in areas predicted as "high-risk" **was 3X higher**

MOBILE APP PREDICTION

The questionnaire acts as an automatic triage tool:

- Confirmed TB cases were found
  only amongst individuals with highest score
  in the questionnaire

- More than **11% B+TB positivity within lab tests** found in high-risk locations.

Pilot test in South Kivu – Results III

EFFICIENCY

The approach is **resource efficient** allowing for focused efforts on high-risk areas with a mobile-based triage. Mobile technology assures fast surveys, automatic individualized TB risk scoring, and data safety.
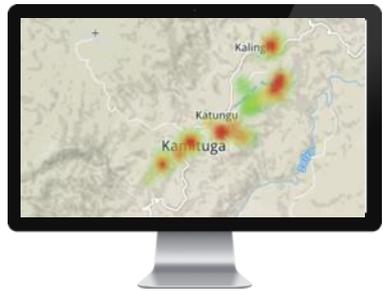
In high-risk locations:

o Less than **50 screenings** to find 1 case

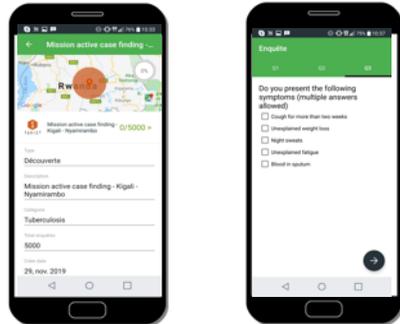o Less than **9 lab tests** to find 1 case
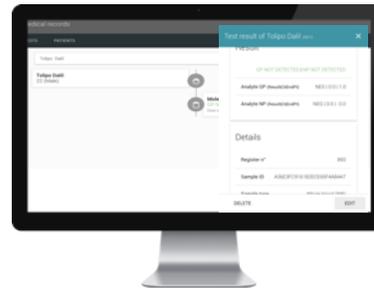
Integration screenings & lab tests

At the MOH	On the field	At the lab/clinics	Back at the MOH

- The MoH uses the predictive maps to determine high-risk areas.
- Mediscout© web app monitors active case finding actions.

- CHWs screen and refer high-risk patients with the Mediscout© mobile app.
- CHWs patient samples and send to labs

- Lab staff retrieves records of high-risk patients referred by CHWs
- Lab staff update diagnostic tests and report via SMS/Internet.
- Patient records sent to doctors for treatment.

- National TB/HIV/Malaria Programs review results to change program strategy
- Surveillance managers review data and design patient follow-up missions
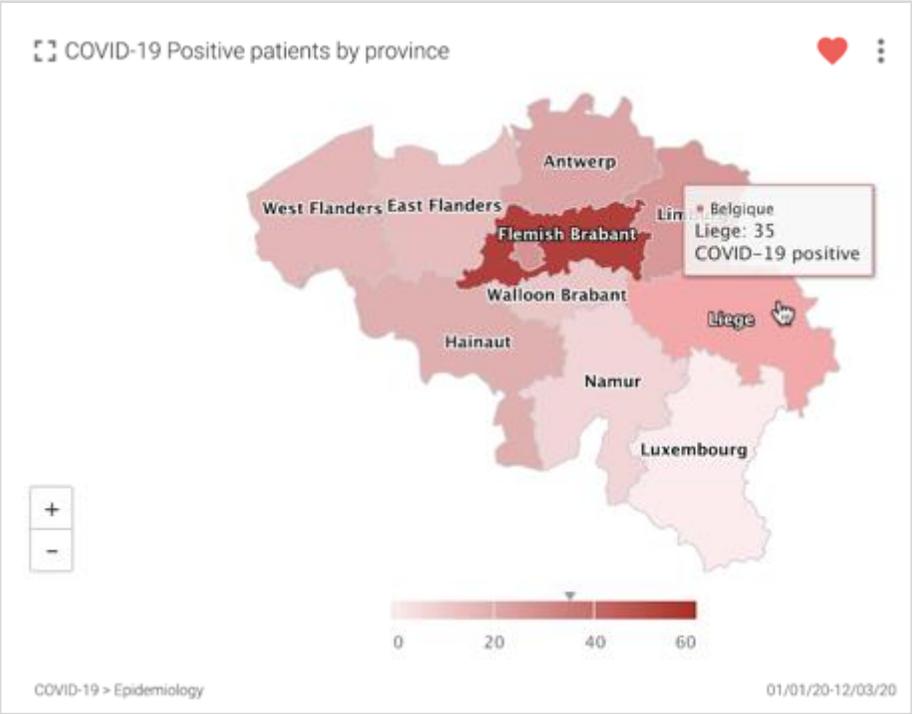
COVID-19: MediScout & DataToCare use case

Triage tool to evaluate the individual risk level of covid-19

- Self- reporting & tracing of COVID-19 Cases

- Systematic screening of at-risk groups

- Design of symptomatic and demographic questionnaires to facilitate triage

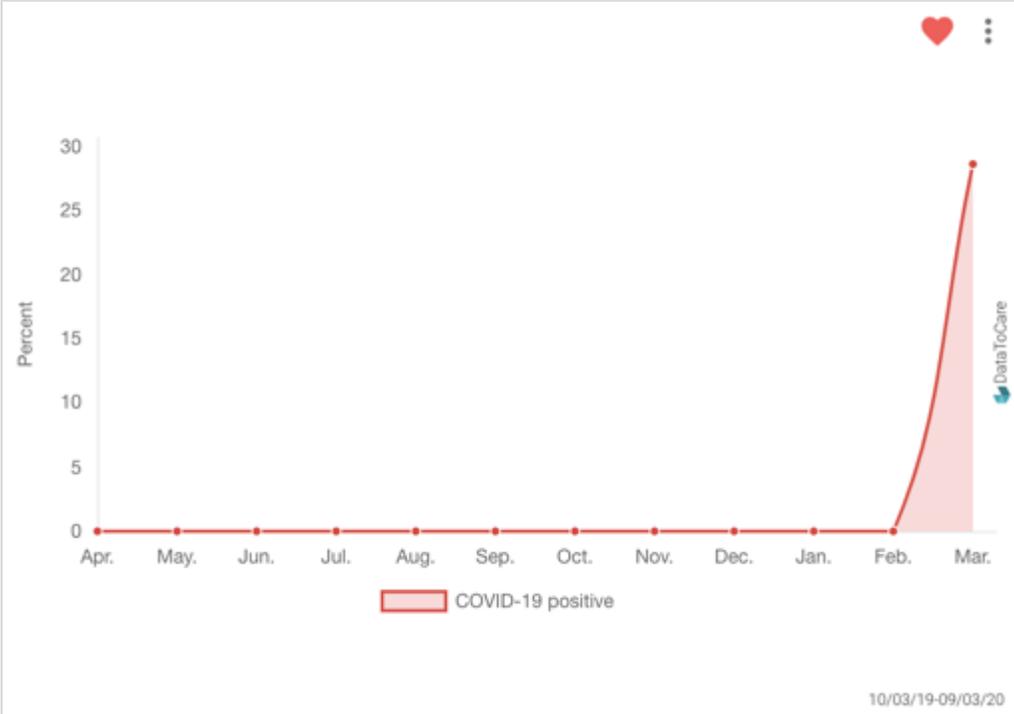- Configure instructional messages to guide health workers' actions.
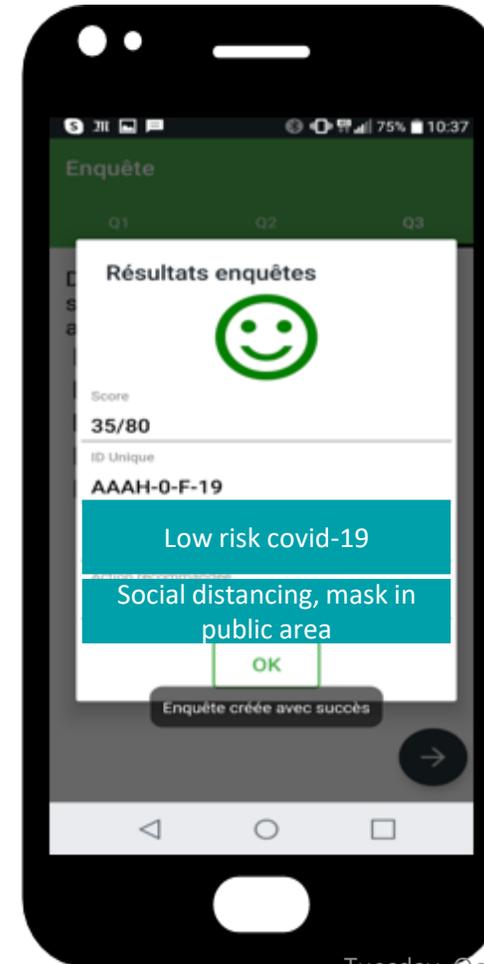
COVID-19: COVID-19: MediScout & DataToCare use case
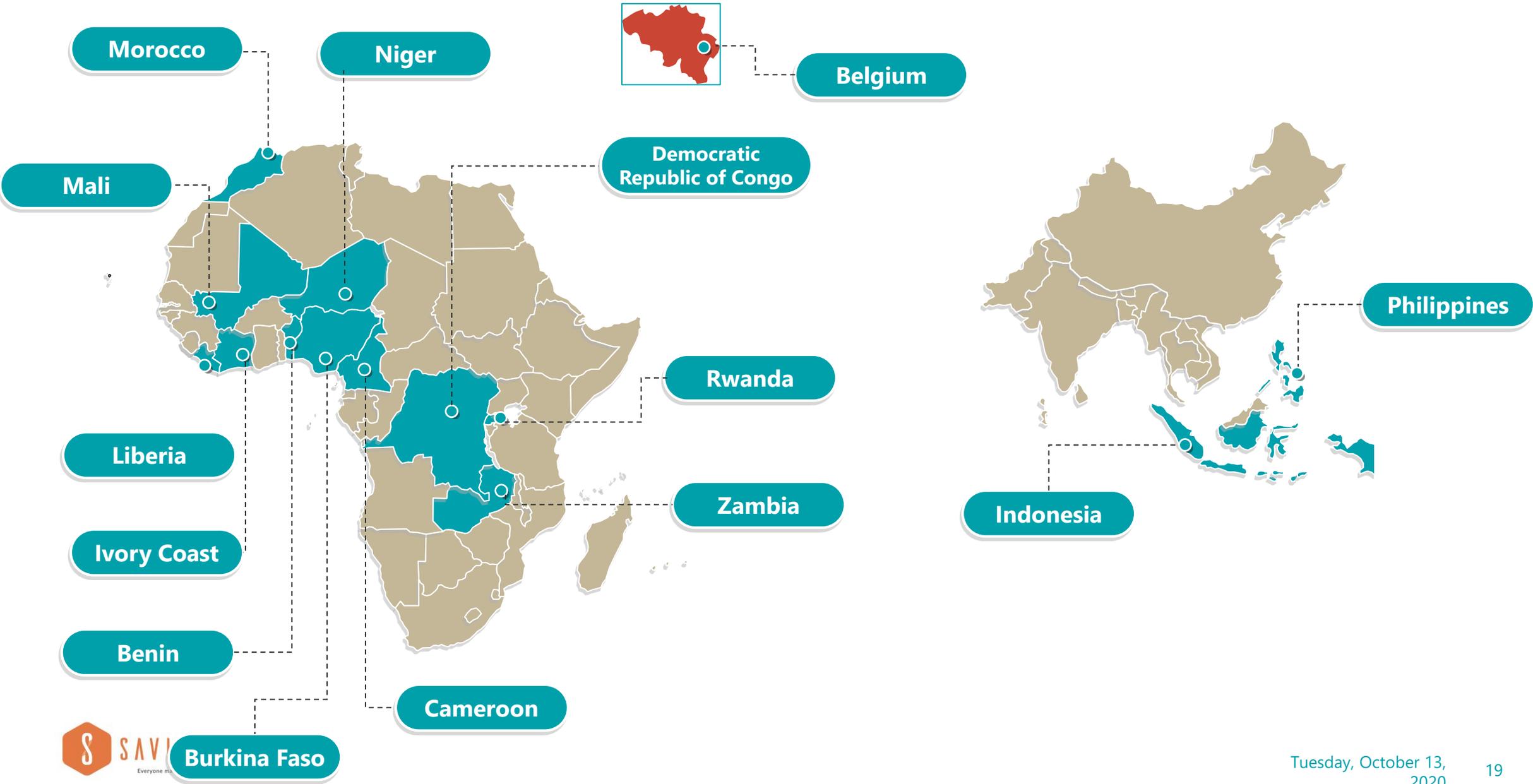
Laboratory results tracking in Belgium

Number of cases by region

Number of cases over time by region

Our solutions in Countries

Morocco

Niger

Belgium

Mali

Democratic Republic of Congo

Liberia

Rwanda

Philippines

Ivory Coast

Zambia

Indonesia

Benin

Cameroon

Burkina Faso

Our Partners – together for a better world

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