

# A

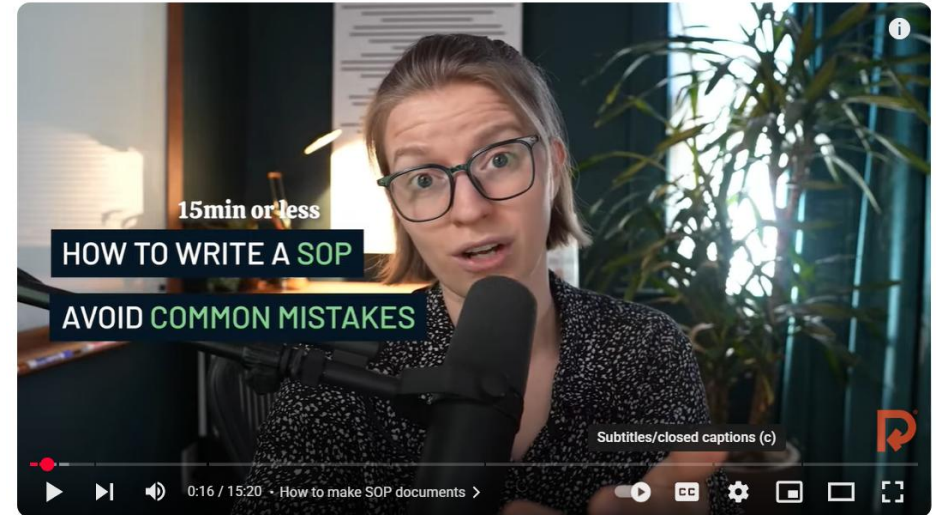
## Pre-Read: What are Standard Operating Procedures?



- **Context:**  
Having an SOP is essential when carrying out operations with two parties, as it ensures clear roles, consistent processes, and alignment to avoid misunderstandings and operational gaps.



- **Your Task:**
  - Watch the videos [How to Write an SOP](#), and [How To Write Standard Operating Procedures](#)
  - Read the Supportive Supervision SOPs in [Bayelsa](#) and [Cross River](#)



# B

## Theory: How Zipline enables person-centred care



**Meet people where they are**

Anywhere can be a point of care regardless of infrastructure constraint.

**Reach sub-populations with the greatest access barriers**

The highest risk populations are often underserved by existing systems, but targeted interventions can be burdensome and costly.

**Improve commodity access and equity**

On-demand stockout response and targeted deliveries ensure clients can always access commodities at the right place and time, no matter what.

**Ensure accurate data collection and improved forecasting**

Without new hardware, software, or staff time spent on data entry, Zipline captures complete digital records of stock utilization.



# B

## Theory: How the SOP Enables Real-Time Decision-Making (1)

### Microplanning Drives Weekly Field Actions

- All State actors are involved in developing a microplan. Teams must submit monthly plans by the **1st of each month for review and sign off by the State Leadership.**
- These plans guide **commodity forecasting, Zipline vaccine requisitions, and target-setting.**
- **Local Government Areas (LGA)** Supervisors validate execution weekly.

### Vaccine & Supply Requests via Zipline

- Teams request vaccines and supplies from Zipline **as aligned with the monthly microplan and outreach sessions.**
- LGA Supervisors are responsible for ensuring that:
  - Outreach sessions align with microplans
  - Requisitions match field needs
  - There is no disruption to service due to delay in supply chain decisions

# B

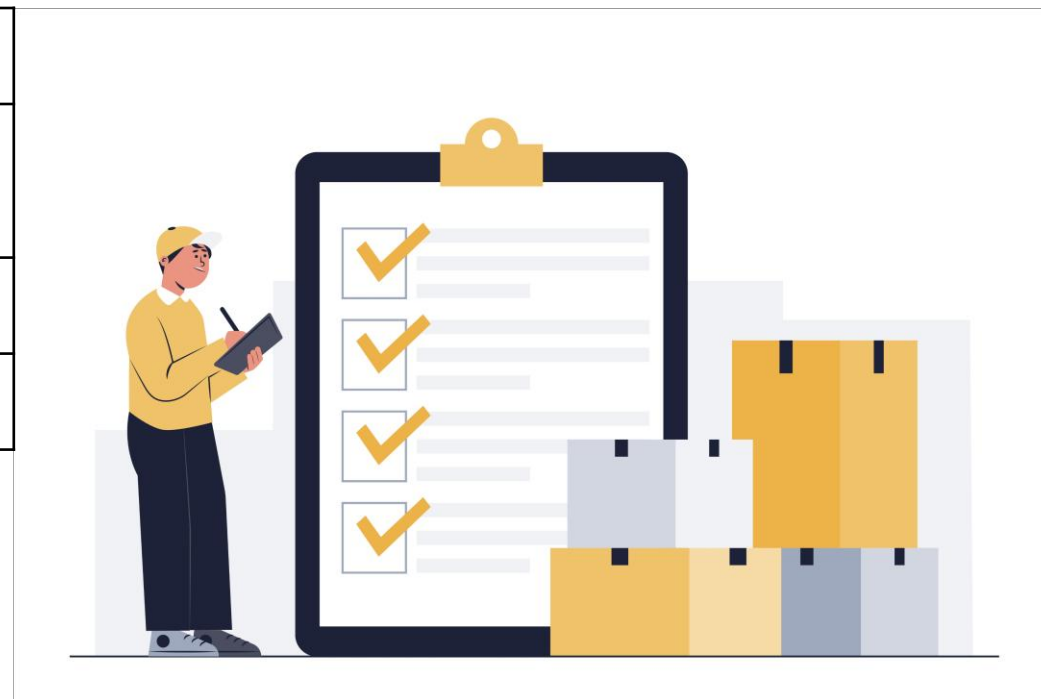
## Theory: How the SOP Enables Real-Time Decision-Making (2)

### Structured Data Flows + Rapid Escalation

- Teams report on the **Qualtrics Offline Survey tool (Zipline data tool )** within **24 hours** of implementation.
- Data must be recorded first in **state-issued paper registers**, then aggregated digitally on Qualtrics.
- **Local Immunization Officers (LIOs)** are responsible in ensuring harmonization of immunization data across all LGAs
- **Supervisors are responsible** for validating harmonized reports are in possession of the **LGA M&E officer** in view of compliance to entering data into the **DHIS2 data reporting platform for State and National visibility** , **this specific component of the data flow is essential to avoid STOCK OUT in the State**
- The **‘No Report, No Pay’ policy** ensures data integrity and timely submission.

**B****Theory: How the SOP Enables Real-Time Decision-Making (3)****Supervision Scheduling Ensures Timely Field Feedback**

<b>Supervisory Level</b>	<b>Minimum Field Engagement</b>
State Supervisors (State Team Leads)	1 visit per team/month
LGA Supervisors	2 visits per team/month
Ward Focal Persons	1 visit per team/week



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## Theory: How the SOP Enables Real-Time Decision-Making (4)

Role/s	Functions
Health Facility Team Leads	Request vaccines, implement activities, submit session data
Ward Focal Persons	Weekly field supervision, ensure reporting to LGA M&E
LGA Supervisors	Guide microplans, conduct bi-monthly visits, validate reports, supervise requisitions
State Supervisors	Conduct monthly QA checks, support escalation of systemic issues
LGA M&E Officers	Consolidate , track and harmonize team-level data across wards
Zipline Operations Lead	Coordinates delivery schedules, manages order exceptions, supports cold chain fulfillment
Director General, Cross River State Primary Health Care Development Agency	Final escalation point for data compliance, supervision performance, and policy deviation

# B

## Theory: How the SOP Minimizes Delays & Miscommunication

Challenge	SOP Mechanism
Delayed Team Performance	Supervisor visit mandates + performance tracking
Data Inconsistencies	State-issued hard copy registers + Qualtrics double verification
Unfulfilled Vaccine Requests	Microplan-tied requisitions + Zipline coordination twice/month
Supervision Gaps	Mandated visit frequency with report deadlines (25th of each month)
Non-Compliant Teams	Stipend eligibility requires minimum 4 team sessions/month; supervisors must replace non-performers; Escalation to the DG Cross River State Primary Health Care Development Agency

# B

## Theory: Standard Operating Procedures (SOP) Decision Tree



Refer to page 14 in your Team Member Workbook

# B

## Theory: Summary: Broad Vision of the SOP

- A real-time coordination loop between Zipline and public health actors/ State decision program policy decision makers
- Clear standards for field execution and reporting, and
- A culture of performance-based accountability at every level.



# C

# Application: Deep diving into MMSC SOPs

## Group Exercise

**Scenario:** Read the GAVI/Zipline Bayelsa or Cross-River Zero Dose Expanded Supportive Supervision Guide for LGA Supervisors assigned to your team.

**Group Activity:** Each case below is assigned to 1 team. Using the SOPs, discuss and answer, as a group, the questions assigned to your case.

Case 1: Emergency Request Without Microplan	Case 2: No Reporting, But Delivery Confirmed	Case 3: Vaccine Request Delays Due to Manual Communication	Case 4: Supervisor Workload Overload
<p>A team in Obanliku Local Government Area (LGA) encounters a maternal emergency and urgently needs Oxytocin. They failed to include this activity in their microplan and the LIO is unavailable.</p>	<p>Zipline confirms successful deliveries to 3 facilities in Bekwarra Local Government Area (LGA). However, none of the assigned teams submitted their reports on Qualtrics or shared their hard copy registers.</p>	<p>A team in Etung Local Government Area (LGA) reports that they can't reach the Cold Chain Officer (CCO) to confirm a cold chain-sensitive vaccine request. This delays submission to Zipline and causes missed sessions.</p>	<p>An LGA Supervisor is assigned to 14 teams. Due to transport constraints and competing tasks, only 3 visits were completed this month. Payment and performance reviews are delayed.</p>
<ul style="list-style-type: none"> <li>• What should happen according to the SOP?</li> <li>• What barriers might block this response in real life?</li> <li>• What systems or SOP changes are needed to institutionalize this kind of flexibility?</li> </ul>	<ul style="list-style-type: none"> <li>• What accountability steps are triggered by the SOP?</li> <li>• How should the LGA Supervisor and State Program Lead respond?</li> <li>• What institutional changes (policy, tech, roles) would prevent this gap?</li> </ul>	<ul style="list-style-type: none"> <li>• What does the SOP say about cold chain product requisition?</li> <li>• What bottlenecks exist in the current approval structure?</li> <li>• What changes could institutionalize faster, decentralized decision-making?</li> </ul>	<ul style="list-style-type: none"> <li>• What expectations does the SOP place on LGA Supervisors?</li> <li>• What risks arise when supervision schedules aren't met?</li> <li>• How can the state institutionalize supervisory support and task-sharing to improve coverage?</li> </ul>

**Plenary Discussion:** Nominate a group member to summarize and share out your discussion.

Refer to pages 15 - 20 in your Team Member Workbook