## GlobalHealth Lab class 2 Technology and strategy; Lina Sayed

Spring 2013

Anjali Sastry and colleagues

# **Plan for today**

- Quick notes
  - Meet Alison
  - Thumbs up on WedUps!
  - Adding Tricia Morente to all-star lineup, Feb 28<sup>th</sup>
- Introduction to today
  - Point of care picture
  - Perspectives of technology and strategy in global health
- Lina Sayed
- Coming up:
  - Mentor check ins (meeting 1)
  - Tuesday lunch session
  - Organizational profile
  - Professional development plan
  - Next class: Global health overview

### What is needed at the point of care?

## What is needed IN THE DOCTOR-PATIENT INTERACTION?

• list everything!

 then discuss: how does technology impact these inputs

## TECHNOLOGY

Diagram of Embrace infant warmer removed due to copyright restrictions.

# Kevin Starr, Mulago Foundation, asks the following

• Is the product needed?

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- Does it work like it's supposed to?
- Will it get to those who need it?
- Will they use it right when they get it?

Watch his poptech talk: http://poptech.org/popcasts/kevin\_starr\_lasting\_impact

#### A Tale of Two Supply Chains

| FACTOR                   | MEDICINE SUPPLY CHAIN   | COCA-COLA SUPPLY CHAIN   |
|--------------------------|---|--|
| Production               | <ul> <li>Production occurs mostly internationally.</li> <li>Capital intensive and highly skilled production process.</li> <li>Production is strictly regulated by national and international agencies.</li> <li>Large economies of scale.</li> </ul>  | <ul> <li>Production of Coca-Cola concentrate occurs internationally.</li> <li>Bottling is less capital and skill intensive.</li> <li>Bottling carried out locally in each market.</li> </ul>   |
| Information<br>Gathering | <ul> <li>Lack of systematic information collection<br/>tools.</li> <li>Expensive one-off monitoring and data<br/>collection.</li> <li>Central, assumption-based supply chain<br/>planning.</li> </ul>   | <ul> <li>Systematic information collection tools.</li> <li>Innovative methods of data collection using third parties and own sales force.</li> <li>Data-driven supply chain planning.</li> </ul>   |
| Distribution             | <ul> <li>Product-specific distribution asset investments (both human and capital assets).</li> <li>Higher need for traceability and security.</li> <li>Limited competition in the distribution segment.</li> <li>Poor contract compliance on attributes such as service level, and delivery lead time.</li> </ul> | <ul> <li>Generic distribution asset investments.</li> <li>Competition used to achieve higher contract compliance.</li> <li>Horizontal collaboration.</li> <li>Higher frequency of delivery to retail points of sale.</li> </ul>              |
| Retail Point<br>of Sale  | <ul> <li>Limited to regulated pharmacies or government-run clinics.</li> <li>Limited innovation on new points of sales due to regulation.</li> </ul>  | <ul> <li>Variety of retail sales points such as restaurants, bars, or supermarkets, in cities, towns, and smaller retail kiosks in rural areas.</li> <li>Constantly innovating to create new points of sale.</li> </ul>                      |
| Incentive<br>Structures  | <ul> <li>Limited ability to create incentives for actors<br/>in publicly run distribution systems.</li> <li>Simple single-party contracts.</li> </ul>   | <ul> <li>Incentive alignment through contracting<br/>given due importance.</li> <li>Sales incentives, service-level incentives<br/>commonly used in both pricing and employ-<br/>ment contracts.</li> </ul>                                  |
| Consumption<br>Benefits  | <ul> <li>The consumption of some medicines, vaccines, and other health products results in higher benefits to society as a whole and not necessarily to individuals.</li> <li>Medicines are what people "need."</li> </ul>  | <ul> <li>The benefits from consumption of consumer products and soft drinks accrue primarily to the end consumer. In fact, society may sometimes bear a cost from their consumption.</li> <li>Soft drinks are what people "want."</li> </ul> |

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From "Learning from Coca-Cola" by Prashant Yadav, Orla Stapleton, and Luk Van Wassenhove www.ssireview.org. Used with permission.

## STRATEGY

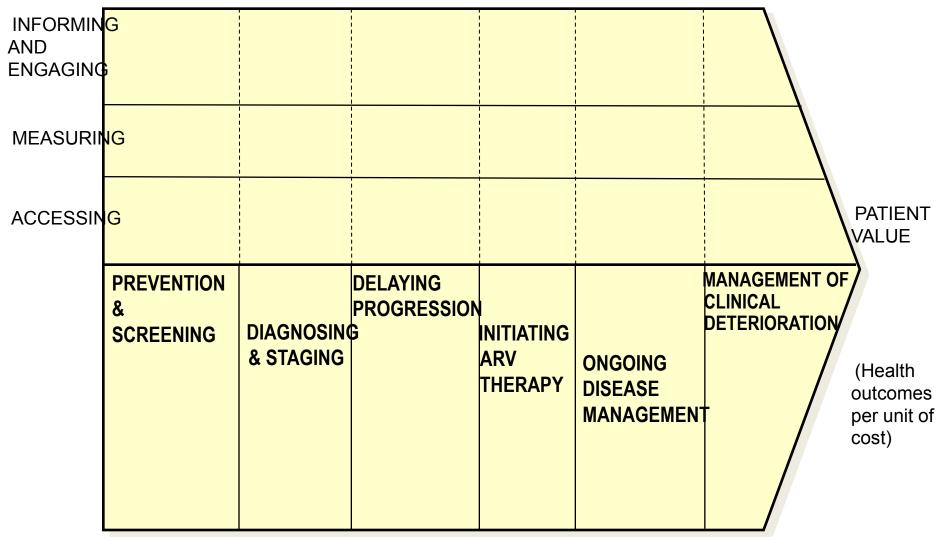
## Value in healthcare

What Is Value in Health Care Supplementary Framework Papers: Value in Health Care Measuring Health Outcomes Reponses: Correspondence *The New England Journal of Medicine* Michael E. Porter December 8, 2010

Diagram of outcome measures hierarchy (Fig. 1) removed due to copyright restrictions.

## HIV/AIDS Care Delivery Value Chain

#### **Resource-Poor Settings**



# **Coming up**

- Review this week's readings, including optional, for applicability to your project
- Mentor check ins (meeting 1)
- Tuesday lunch session
- Organizational profile
- Professional development plan
- Next class: Global health overview

Yadav, Prashant, Orla Stapleton, and Luk Van Wassenhove. 2013. "Learning from Coca-Cola." *Stanford Social Innovation Review*, Winter: 51-55.

Sinha, Sidhartha R, and Michele Barry. 2011. "Health Technologies and Innovation in the Global Health Arena." *The New England Journal of Medicine*, September 1: 779-781.

Rhatigan, Joseph, Sachin Jain, Joia S. Mukherjee and Michael E Porter. 2009. *Applying the Care Delivery Value Chain: HIV/AIDS Care in Resource Poor Settings*. HBS/GHD.

Porter, Michael E. 2008. "Value-Based Health Care Delivery." *Annals of Surgery*, 248(4), October: 503-509.

Malkin, Robert A. 2007. "Design of Health Care Technologies for the Developing World." *The Annual Review of Biomedical Engineering*, April 12: 567-587.

Blaya, Joaquin A, Hamish S.F. Fraser, and Brian Holt. 2010. "E-Health Technologies Show Promise in Developing Countries." *Health Affairs*, June 6: 244-251.

Peterson, Kyle, Samuel Kim, Matthew Rehrig, and Mike Stamp. Circa 2012. "Competing by Saving Lives: How Pharmaceutical and Medical Device Companies Create Shared Value in Global Health." *FSG report*. MIT OpenCourseWare http://ocw.mit.edu

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