

CAPACITY OF THE HEALTH SYSTEM TO GENERATE, MANAGE AND USE DATA



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INTRODUCTION

- A health system, also known as health care system or healthcare system, is the organization of people, institutions, and resources that deliver health care services to meet the health needs of target populations.
- According to the World Health Organisation a health system consists of all organisations, people and actions whose primary intent is to promote, restore or maintain health.
- Decision making is based on data generated, managed and use for the improvement of the health of the beneficiaries



HEALTH SYSTEM TECHNICAL COMPETENCY

- The Health System has trained staff to collect, collate, store, analyse and use data at ~~the facility level through to national level~~
- All staff generating data has the capacity to define all the data elements they are collecting
- The deployment of the District Health Information Management System (DHIMS2) has speed up the data collection, collation and analysis of which majority of the service providers are users

MANAGEMENT SUPPORT

- Data management in the service has strong management support by provision of all the resources needed i.e human, material, financial, psychosocial
- Management ensure frequent upgrading of the systems available for data collection and storage
- Ensuring of regular in-service training for service providers in data management is a priority
- Routine auditing of the service data by external and internal auditors to ensure service providers follows the laid down protocols

DATA MANAGEMENT GUIDES

- The Standard Operating Procedure for health information management is the pillar behind the operation of data management activities across all levels based on the same standard
- Data Use guidelines is also a document which help in the day-to-day data activities at the facility level
- Registers, reporting tools (both electronics and paper based) enable the service providers to collect all the necessary data at the service delivery points



DATA GENERATION PROCESSES

- Flow of clients at the various service delivery points follow a standard protocols, ensuring clients information is captured at each point the client assess ~~specific service i.e Records Unit, Vital table, consulting room, laboratory,~~ pharmacy, account unit, various wards, etc
- Client data is captured in an organized structure; hence no client data is lost at any point within the service delivery system.
- The data generated is collated, verified and validated before submission to the next level
- The data is then made accessible to all stakeholders who must have access to it for decision making

DEVELOPMENT & INCREASE IN DATA USE

- Management interest in data usage has led to data visibility at all levels
- Stakeholders and partners are more interested in funding and supporting interventions based on the data available
- Data is the backbone of the service delivery as it indicates whether programmatic interventions are yielding results or not

DATA DRIVEN SERVICES

- Service provision is based on data and science, decision are based on available scientific evidence
- Health care delivery therefore is currently data driven as to the type of care to provide for the client and the reason for such care is well explained by the care provider and understood by the client

CAPACITY BUILDING

- There a pre-service training for all health care professionals including health information officers before inducting into the service
- Periodic in-service training, workshops, on the job training empowers the data managers in capacity building to be updated with new developments in data generation, management and use

ACHIEVEMENTS

- The service has achieved consistent data quality due to various activities and measures put in place
- Data visibility and usage to all managers, stakeholders, institutions and other departments has improved drastically
- Robust system in place for collection, collation, storage and usage of data at all levels i.e making data accessibility very easy with a click of a button
- Program interventions now depends on data for which intervention to put in place and where the intervention should be geared



CHALLENGES

- Inadequate data management staff and Staff attrition
- Inadequate financial resources to train new staff to take over from old ones
- Inadequate data collection tools i.e registers, tally sheets at the service delivery points; especially the CHPS compounds
- Low supportive supervision to the service delivery points
- Frequent breakdown of devices i.e computers, tablets
- Internet problems in some remote areas leading to difficulties in data reporting



RECOMMENDATION

- MOH should train more data management staff for the service
- Incentives should be provided to staff to motivate their retention (e.g. bonded scholarships)
- Partners should increase their support for the printing of data collection tools
- Stakeholders should consider more resources into supportive supervision in the area of data management
- Partners should support in the area of supplying devices i.e computers, internet modems, UPS to the service delivery points
- Support for in-service training should be increase so that there can be frequent refresher trainings for the data management staff

WAY FORWARD

- Use the limited available resources to continue data collection, collation and storage

- Use virtual means to organize refresher trainings for the staff in data management
- Run at the back of other programs for supportive supervision to the lower levels and service delivery points
- Advocate for more supports and resources from partners and stakeholders
- Peer to peer learning by data managers from different hospitals, districts and regions



THANK YOU

