THE GAMBIA

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BLN/GAVI DQU Learning Session II
3- 5 March 2020
Lusaka, Zambia
Presentation Outline

• Commitments made in the last meeting
• Key Strategies to improve data quality and use
• Accomplishments
• Implementation Challenges
• Lessons Learned
• Interventions to address challenges
Commitments made in the last meeting

• Improve timeliness of reports submitted by regions into the DHIS2 from 68% in 2018 to 80% by the end of 2019

• Addressing denominator issues in the country

• Capacity building of health workers on data management
Key Strategies to improve data quality and use

• Data review meetings and in-service meetings at regional level
• Regular supportive supervision
• Training on data quality and DHIS2
• Involvement of key stakeholders in solving the denominator issue
• Provision of monitoring charts and included in the supervisory checklist
## Feedback on the commitments

<table>
<thead>
<tr>
<th>Activity</th>
<th>Responsible person</th>
<th>When</th>
<th>FEEDBACK</th>
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<tbody>
<tr>
<td>Finalising denominator through stakeholders meeting</td>
<td>Data Quality Team (DQT)</td>
<td>Aug-19</td>
<td>The Data Quality Team conducted a workshop on denominator and mapped out all age groups and their targets. The denominator for each age group has been validated and these targets will be used from 2020 onwards.</td>
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<tr>
<td>Engage regional data managers on timely entry of data</td>
<td>DQT/EPI</td>
<td>July-October 2019</td>
<td>Timeliness of report in the DHIS2 is currently at 91% at national level. This is calculated manually as there are other health facilities that are not conducting immunisation but added in the denominator in the DHIS2. This has been flagged with the HMIS Unit and the ICT staff are currently working on the grouping of health facilities providing immunisation services. Earlier in November 2019, all regional Data Managers and Programme data Managers were trained on DHIS2 with particular focus on the WHO App in DHIS2.</td>
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<td>Follow up with health facilities to submit data on time</td>
<td>Regional Health Directorates</td>
<td>July-October 2019</td>
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<tr>
<td>Identify and Support technically to facilities/regions with poor track record</td>
<td>EPI and HMIS</td>
<td>July-October 2019</td>
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<tr>
<td>Train 50 health workers on data management</td>
<td>EPI and HMIS</td>
<td>Oct-19</td>
<td>A total of 100 health workers and data managers have been trained in 5 of the 7 Health Regions.</td>
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Accomplishments 1/2

• Alignment of reporting deadlines from health facilities to regions
  • HF to Region change from the 3\textsuperscript{rd} to the 5\textsuperscript{th} of every month
  • Regional to National change from the 7\textsuperscript{th} to the 10\textsuperscript{th} of every month

• The Data Quality Team at national level harmonised common denominators for all age cohorts for different programmes

• The harmonised denominators have been incorporated into the DHIS

• Training of 100 health workers including regional data managers on data quality
Accomplishments 2/2

- MyChild Solution rolled out in 2 regions including private health facilities and integrated into DHIS2
- Monitoring of immunisation performance at regional and facility levels
- Vaccine Visibility System (VVS) has been scaled up to cover 23 Vaccine stores (Central store, 4 regional stores and 18 health centers)
Timeliness by region in The Gambia 2019

- Timeliness
- Target
Data completeness by region in 2019 (all health facilities in DHIS2)
Improvements in data quality

Antigens given at the same time- OPV1, Penta1 and PCV1 in 2019

Coverage

Regions

- WESTERN 1
- WESTERN 2
- LOWER RIVER
- NORTH BANK EAST
- NORTH BANK WEST
- CENTRAL RIVER
- UPPER RIVER
- NATIONAL

Coverage:

- PENTA1 COV
- POLIO1 COV
- PCV1 COV
Implementation Challenges

• Uncoordinated and frequent staff turnover

• Delays/unavailability of funds to implement planned activities

• Inadequate technical capacities on DHIS2 and data analysis

• Other competing priorities affect timeliness of data submission and entry

• Inadequate computers at Health facilities for data analysis

• Integration of MyChild data into the DHIS2
Lessons Learned in relation to data quality and use improvement 1/2

• Good collaboration with stakeholders has help to initiate activities to address data quality issues

• The formation of the DQT has helped the country to start addressing data quality issues

• Use of Smart Paper Technology has reduced the workload of health workers in compiling and sending data at the end of each month. (only send papers for scanning and reports generated)

• Health workers need to be continuously engaged to properly address data quality issues
Lessons Learned in relation to data quality and use improvement 2/2

• The use of digital health solutions have been observed to motivate health workers but expensive or difficult to scale up without dedicated funding

• Lack of technical skills on the MyChild solution by the ICT/HMIS Units

• Internet connection forms the basis for electronic data management especially the use of DHIS2 dashboards
## Interventions to address DQU challenges in 2020

<table>
<thead>
<tr>
<th>Activity</th>
<th>Objective</th>
<th>When</th>
<th>Indicators</th>
<th>Who is responsible</th>
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<tbody>
<tr>
<td>Categorise health facilities in the DHIS2 according to services provided</td>
<td>To improve quality of data analysis in the DHIS2</td>
<td>June 2020</td>
<td>Health facilities categorised according to services</td>
<td>HMIS</td>
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<td>Conduct Data quality Audit</td>
<td>To review and assess the accuracy and consistency of data reported to national level</td>
<td>June 2020</td>
<td>DQA conducted</td>
<td>EPI</td>
</tr>
<tr>
<td>Train health workers on data quality and DHIS2</td>
<td>To build the capacities of health workers on data quality, analysis and use</td>
<td>June 2020</td>
<td>Training of health workers conducted</td>
<td>EPI/HMIS/ICT</td>
</tr>
<tr>
<td>Improve timeliness of reporting to 95% at all levels</td>
<td>To timely review data for decision making</td>
<td>June 2020</td>
<td>Timeliness of reports increased to 95%</td>
<td>EPI/HMIS</td>
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<tr>
<td>Separate the HMIS EPI reporting form from the birth registration in the DHIS2</td>
<td>To improve data analysis in the DHIS2</td>
<td>June 2020</td>
<td>EPI form seperated from the Birth Registration form</td>
<td>HMIS/ICT</td>
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<tr>
<td>Use DHIS2 to report immunisation data from Regions</td>
<td>To use one data reporting system</td>
<td>June 2020</td>
<td>All regions reporting immunisation data using DHIS2</td>
<td>EPI/RHD</td>
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Summary of interventions

• Continuous training of health workers

• Advocacy for funding of planned activities from both government and partners

• Continuous mentorship and supportive supervision of health workers on data management

• Upgrading and harmonisation of data collection tools in both paper and the DHIS2
Data quality and use should be integrated into our national plans!

Thank you for your attention