

Mozambique

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BLN/GAVI DQU Learning Session

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Lusaka, Zambia

DQI Plan :Complete/being implemented

Ojectives:

- a) It serves as a guiding document for monitoring the implementation of activities, as well as the definition of strategic activities to strengthen Data Quality;
- b) Reduce Data discrepancy between various health facility recording tools 46% to 5% and Monthly Summary for DHIS2-SISMA to 0%.

Root cause

- Data inconsistency in various PAV recording tools in health facility

Key strategies to improve data quality and use

- a) Train EPI staff at provincial and district level in data management (VAN, DQS and DQR);
- b) Provide technical data supervision and support to EPI staff in the province, district and health facility ;

Key strategies to improve data quality and use

- a) Hold monthly meetings and quarterly balance sheets to discuss data and evaluate performance at all levels (VAN);
- b) Perform DHS2-SISMA annual data quality assessment at central level.

Resource availability

- ✓ We have GAVI funds available through HSS

Other issues of importance

- ✓ Proposal to have electronic registration in health facility

Accomplishments (in relation to data quality and use improvement)

- ✓ Creation of a data quality improvement plan
- ✓ Training in Matters of VAN and DQS at the provincial and central level;
- ✓ Creation of data analysis groups (VAN) at central and provincial level;
- ✓ Creation of WhatsApp groups for provinces and central level with a view to improving communication;
- ✓ Supervision visits and technical support to provinces / districts / health units were carried out in order to improve data quality.

Implementation Challenges improving data quality

Governance/policy

The Department of Health Information and Systems and Statistics Institute has no 2017 Census projections and DHS2-SISMA works without population data of 2019.

Administrative/logistical

Late payment for activities and lack of transportation.

Technical

Lack of Data-Specific Technicians.

Implementation Challenges improving data quality

Resource

Insufficient human resources at sector level is one of the main obstacles to improving Data Quality . It is critical and urgent to have trained staff to effectively carry out Data Quality activities with due responsibility and expertise.

Lessons Learned in relation to data quality and use improvement

- ✓ The implementation of DQS is fundamental for the improvement of data quality especially at districts and health facility;
- ✓ With the introduction of DHIS2-SISMA in 2015/2016, the biggest focus for improving data quality has become basic at the level of the health facility that generates the information and district that aggregates the information;
- ✓ feedback at all levels is vital for enhancing data quality;
- ✓ The country has adopted some experiences to improve the access and visibility of the program data such as the EPI Dashboard, which will soon be made available to the EPI staff ;

Lessons Learned in relation to data quality and use improvement

- ✓ The introduction of the Visibility and Analytics Network (VAN) has driven the use of data for central and provincial decision-making.

Next Steps

- **Priority data quality and use objectives (desired performances) for July-October 2019**

Reduce Data discrepancy between various health facility recording tools 46% to 5% and Monthly Summary book for DHIS2-SISMA to 0%.

Time bound performance indicators (Before 31st October)

- ✓ The EPI have as target Before 31st October 31, 85% of provinces documents and shares with the central level the DQS reports.

Next Steps

- ✓ The EPI have as target Before 31st October 31, 95% of provinces documents and shares with the central level the VAN meetings minute notes.
- ✓ Train EPI staff and district level in data management (VAN and DQS and)
Total:**216=158/73,1%** EPI staff:province(Nampula, Zambezia, Tete, Manica, Gaza, Maputo Provincia e Maputo Cidade);
- ✓ Training on mobile data collection (ODK) use and harmonization of supervisory instruments. Total 213 =**41/19,2%** EPI staff/ Surveillance at province and Central level

Summary of intervention package

- ✓ Hold monthly meetings to discuss data and evaluate performance at all levels (VAN); Perform data quality supervision and technical support (DQS)
- ✓ Train EPI staff at provincial and district level in data management (VAN, DQS);

Action Plan (Before 31st October 2019)

Current Performance	Objectives	Strategies	Key Activities	Milestones	Responsible
<p>Data discrepancy between different registration tools at the Health Facility</p>	<p>Train EPI staff at all levels to know how to reduce Data discrepancy between various record tools in health facility (recording tools from 46% to 5% and Monthly Summary for SISMA to 0%)</p>	<ul style="list-style-type: none"> ✓ Training of PAV technical staff in data management and analysis for decision making. ✓ Periodic evaluation of program data quality at all levels (Central, Provincial, District) 	<ul style="list-style-type: none"> ✓ Train Provincial and district EPI staff in data management (VAN and DQS) ✓ Training on mobile data collection (ODK) use and harmonization of supervisory instruments. ✓ Provinces documents and shares with the central level the VAN meetings minute notes. 	<p>Total staff :216 For training =158/73,1% EPI staff. Province and district level (Nampula, Zambezia, Tete, Manica, Gaza, Maputo Provincia e Maputo Cidade);</p> <p>Total staff: 213 For training =41/19,2% EPI staff/ Surveillance at province and Central level</p> <p>95% meetings minute notes Received</p>	<p>MOH/WHO/ VillageReach</p> <p>MOH/WHO</p> <p>MOH</p>

THANK YOU