



Data Driven Decision-making Tools

DHIS2



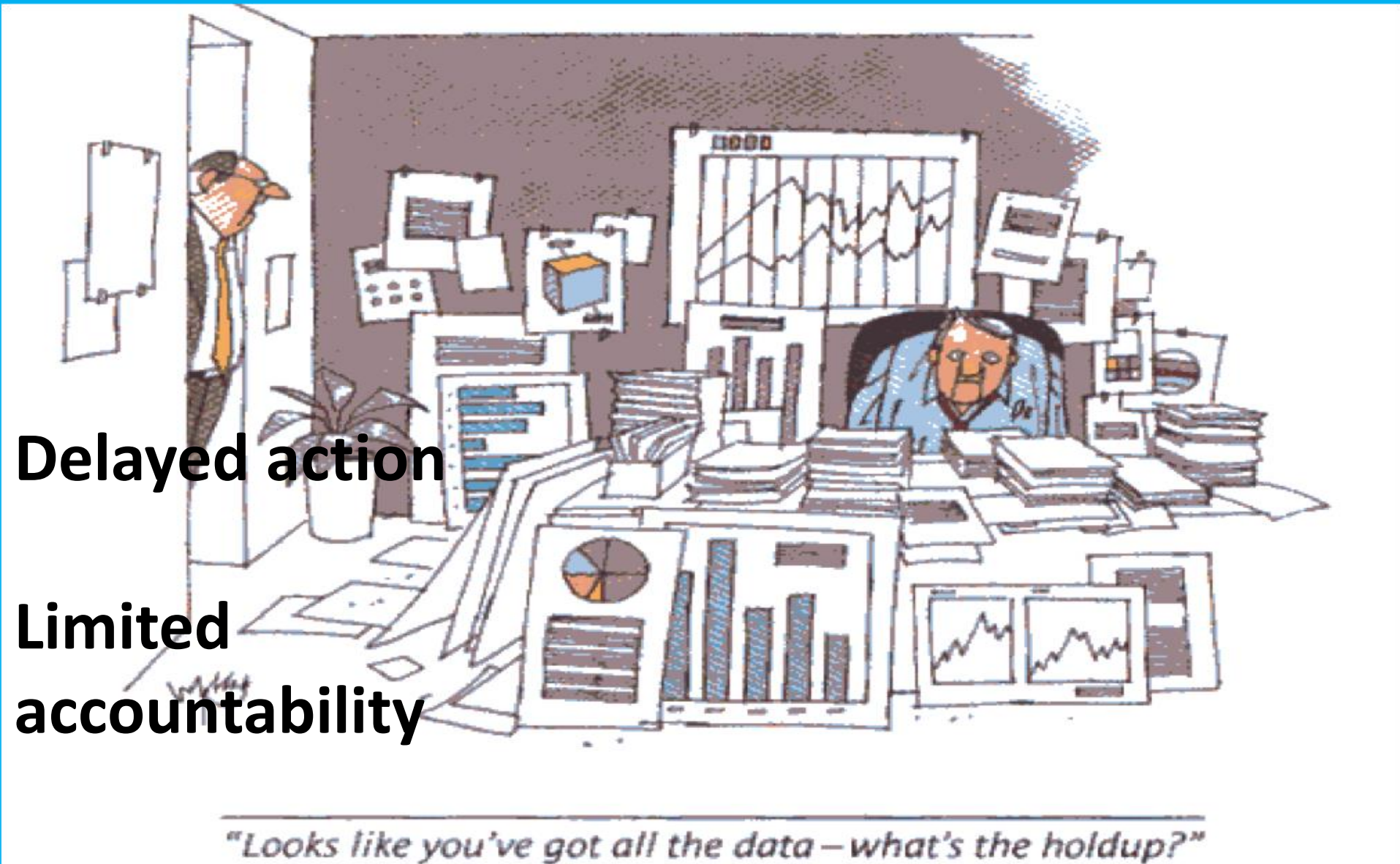
1. What is DHIS2?
2. What are the main experiences?
3. How it can be useful for monitoring vitamin A supplementation programmes?

What is DHIS2

- It is a tool for collection, validation, analysis, and presentation of aggregate statistical data
- Free, open software platform – University Oslo
- Shared and integrated data warehouse for essential data: **information for action**
- LTA UNICEF-University Oslo just signed!



Why do we need another software platform?



Benefits of DHIS2

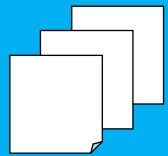
- **Comprehensive:** can capture community & health facility data and allow analysis at that level promoting data use at the lowest level for decision making
- **Flexible:** Scalable and User friendly
- Provide different kinds of tools for data validation and improvement of **data quality**
- **Interoperable** health information architecture



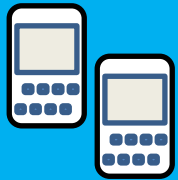
Dashboard



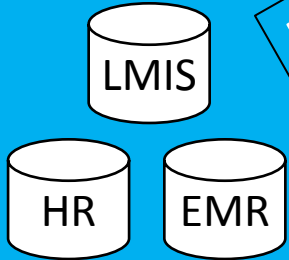
Web Portal



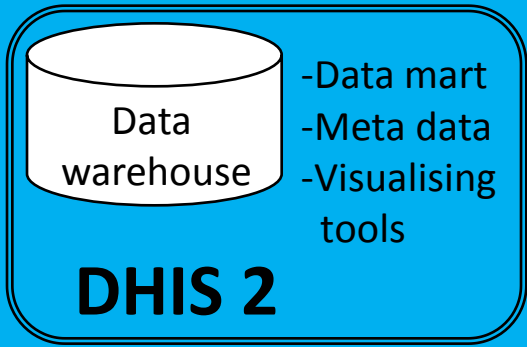
Data capture from paper forms



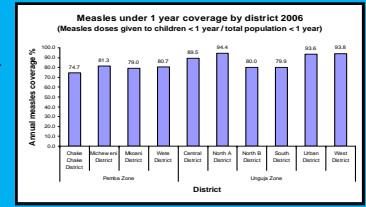
Data from Mobile devices



Extract Transform Load



Graphs



Mobile



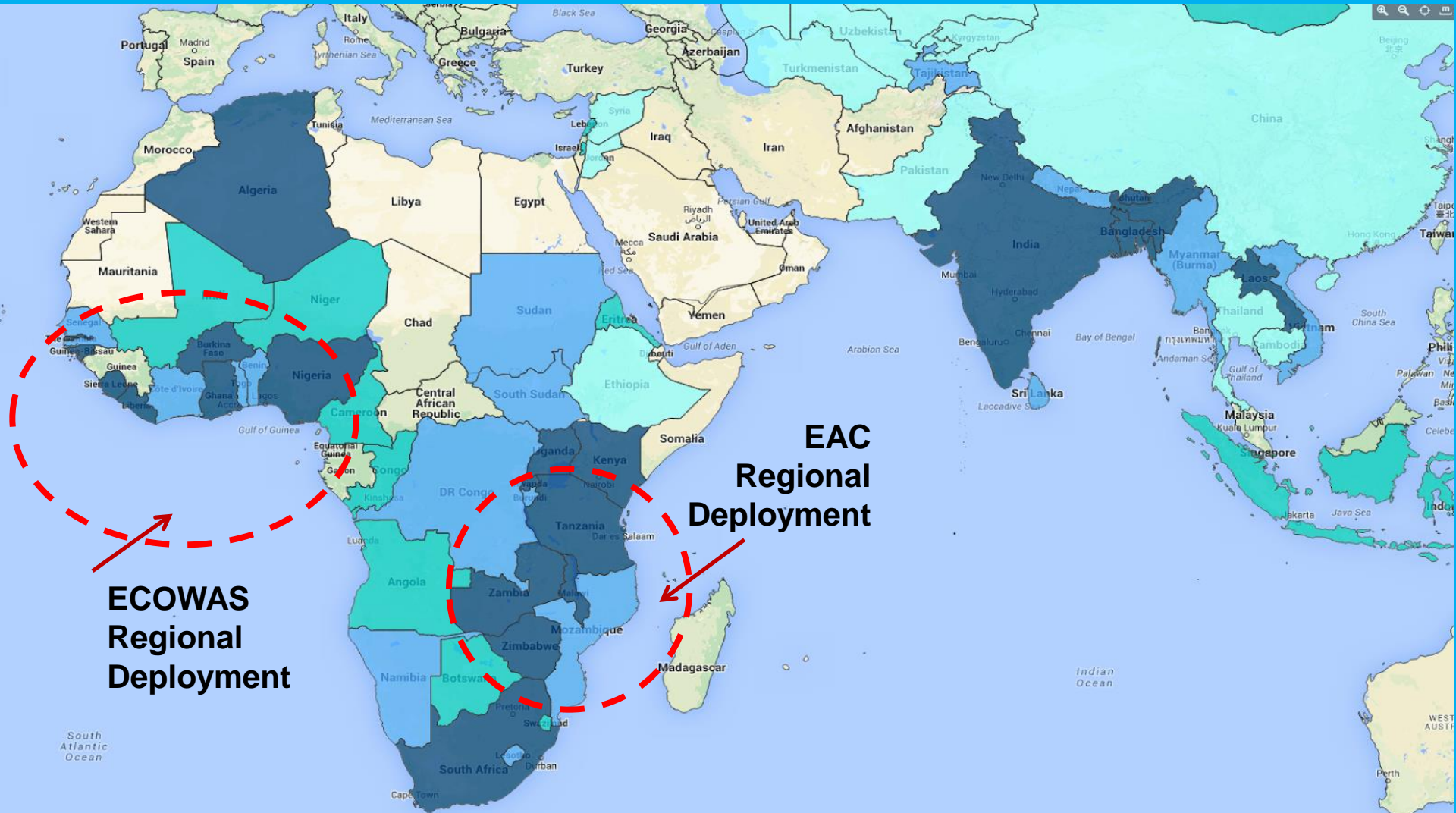
Maps



Getting data in - Data warehousing

Getting data out - Decision support systems

DHIS2 Adoption



Partners Pilot/early phase Scaling up Nation-wide rollout

MAIN EXPERIENCES

- Routine monitoring
- Individual tracking overtime
- Dashboards

■ DHIS 2 as an online national HIS

- integrated repository for all health statistics

dhis2
Kenya Health Information System
Maintenance Services Help Profile

👤 Ola Hodne Titlestad • Write feedback • 49 unread messages • 1 new interpretation

Profile Messages Interpretations

Insert Close Clear

Reports

DVI: DPT1-3, Measles and FIC

FP: Family Planning Attendance

FP: Family Planning Methods

Insert Close Clear

Maps

DRH: Live births 2012

DVI: Coverages yearly

HIV: HIV care visits (total) by County

OPD: Utilisation rate yearly

Insert Close Clear

Resources

DHIS 2 Home page

Frequently Asked Questions and Self learning materials for DHIS2

Millennium Development Goals

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Reporting Rate: MOH Forms Trend
Kenya

Legend: MOH 705 A OPD <5 years (green), MOH 705 B OPD >5 years (blue), MOH 710 Immunisation (red), MOH 711 Integrated (orange)

Insert Close Clear View full size Share

Reporting Rate: MOH Forms Comparison Last Year
2012

Legend: MOH 705 A OPD <5 years (green), MOH 705 B OPD >5 years (blue), MOH 710 Immunisation (red), MOH 711 Integrated (orange)

Insert Close Clear View full size Share

FP: Attendance This Year
2013

Legend: FP Revisits (green), FP New Cases (blue)

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ANC: Coverages (1st and 4th visit) by quarter
Kenya

Legend: ANC 1 Coverage (green), ANC 4 Coverage (blue)

Insert Close Clear View full size Share

Delivery: By type
Kenya

Legend: Normal Deliveries (green), Breach Delivery (blue), Assisted VD (red), Caesarian Sections (orange)

Insert Close Clear View full size Share

Maternal Deaths by province
Maternal Deaths

Legend: Jan to Jun 2012 (green), Jul to Dec 2012 (blue)

Insert Close Clear View full size Share

PMTCT Maternity C&T&HIV0+ quarterly
Kenya

Legend: Total Women Counseled (green), Mat Women Tested HIV (blue), PMTCT-Maternity HIV+ve (red)

Insert Close Clear View full size Share

OPD utilisation (MOH-705) by province last year
2012

Legend: OPD util. rate (705) (green), OPD util. rate <5y (705) (blue)

Expanding DHIS 2 reach through Mobile technology



<https://www.dhis2.org/>



<http://unicef.rapidpro.io/>

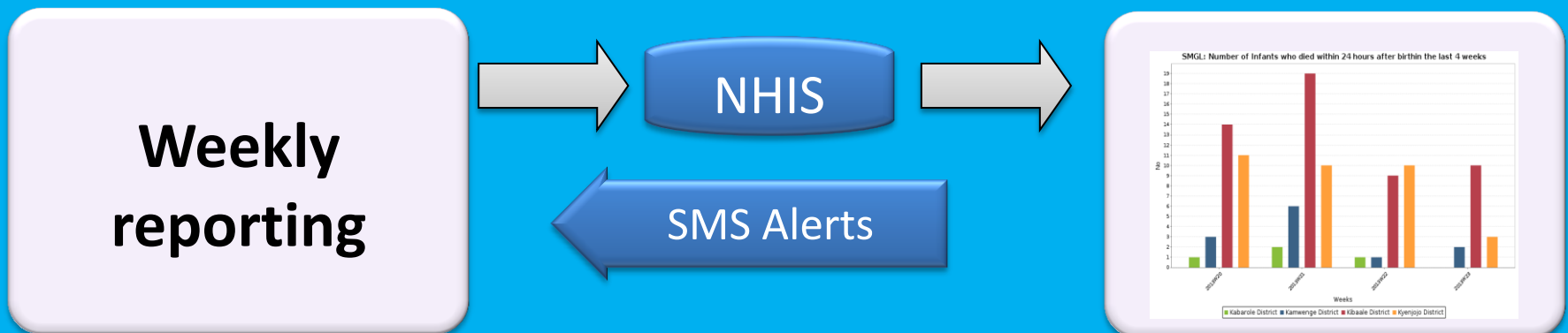


▪ Improve routine monitoring

- **Health facility:** most routine data from clinics ; stocks
- **Community:** Web/SMS reporting by Village Health Teams (CHWs)

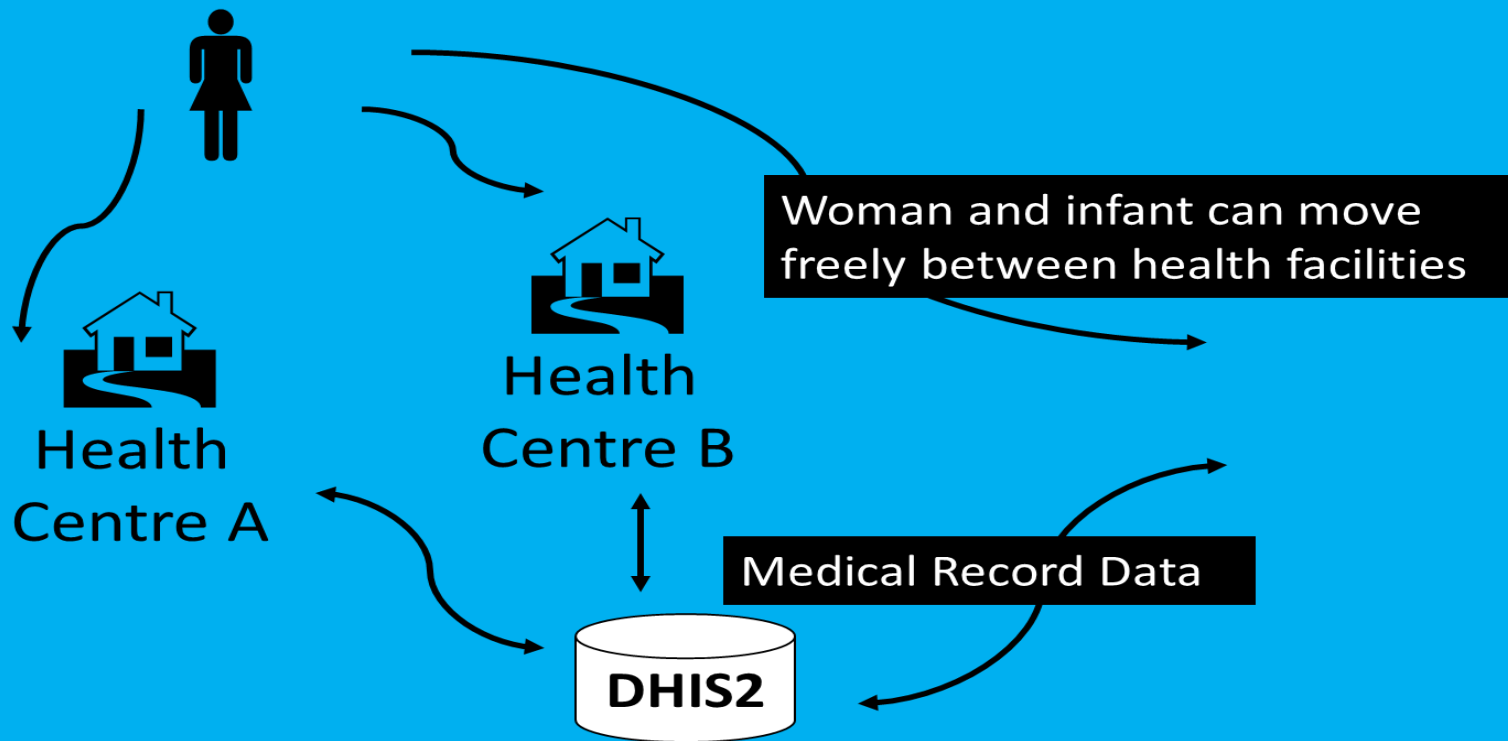
Ex. Nigeria –MNCH program

- ↑ **Completeness** (80% in Jigawa , Katsina 92% in Zamfara)
- ↑ **Timeliness** (above 80% in all states except for Yobe)
- ↑ **Correctness**



DHIS2 Tracker allows for tracking individuals or things over time

- **UGANDA: Track Pregnant Women and Infants across facilities**

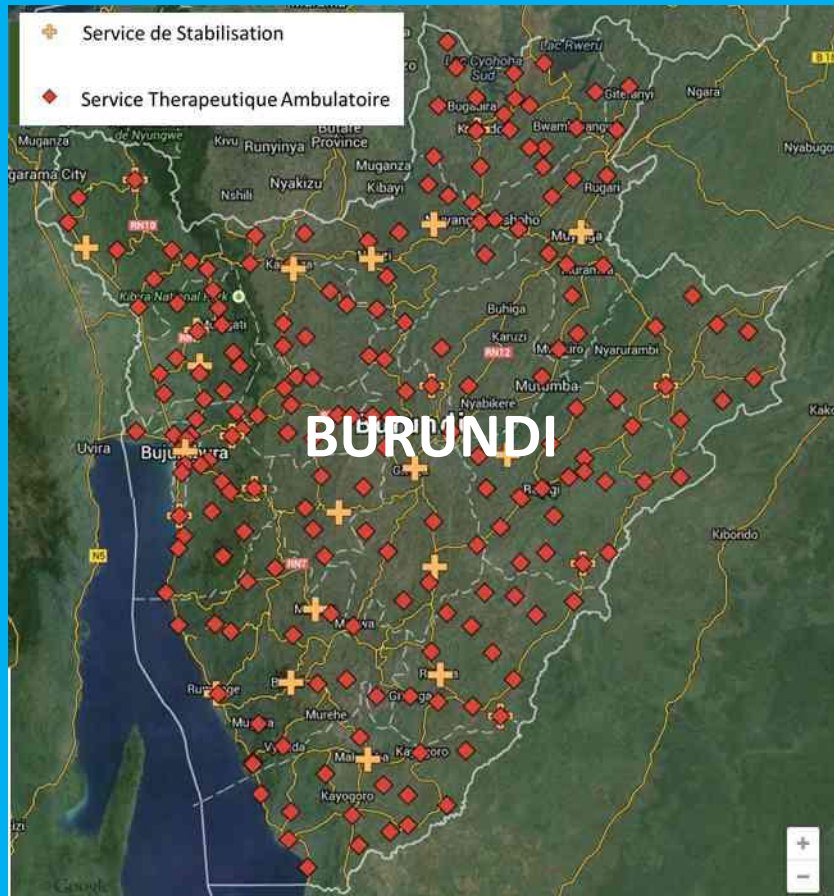


How it can be useful for monitoring vitamin A supplementation?

Interoperability

CHDs Management dashboards

CHDs management dashboards

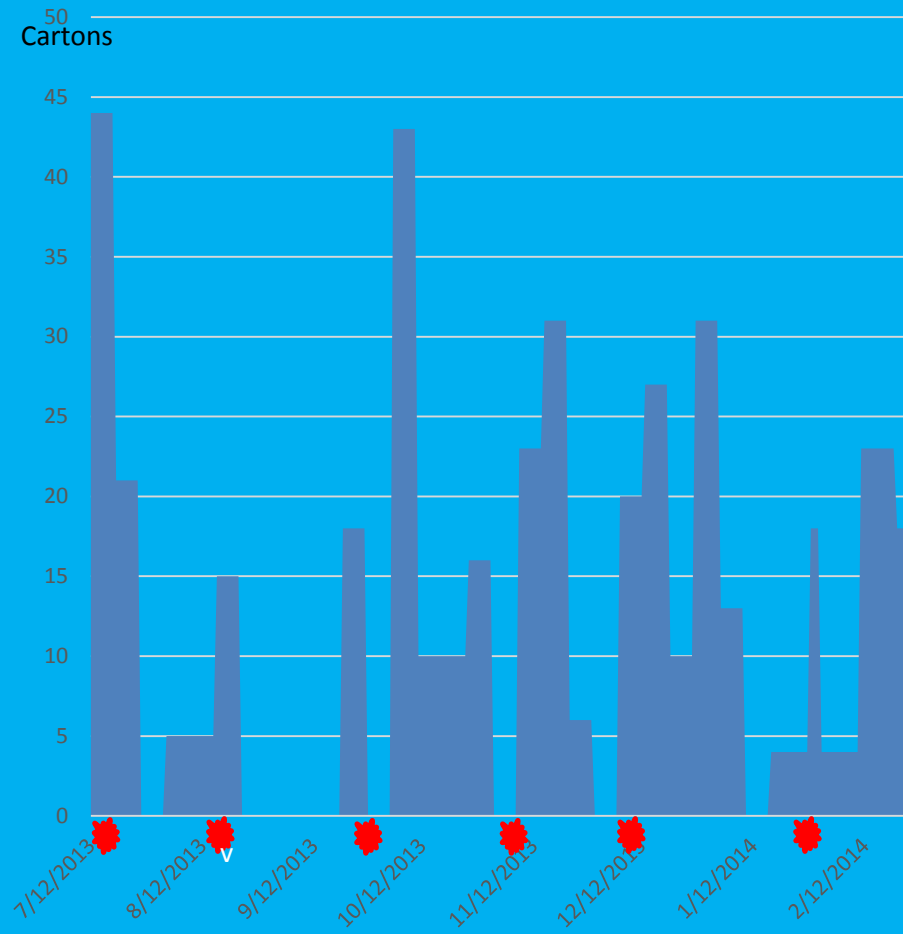


1. Microplanning

Enter population data directly from coverage area and validate with district and regional leaders

Last update - 12-05-15 18:30

Child health Days management Dashboard



2. Pre-positioning of Stocks

Tracking vit A stocks from Port, warehouses to implementation sites

Child health Days management Dashboard



3. Improve program Reporting

(Real time monitoring)

Daily updates on vit A delivery
and stock to ensure high
coverage

4. Bottleneck Analysis Dashboards

- Focused on action and accountability
 - Focused on identification of supply-side and demand-side bottlenecks, root causes, and management response
- Reflect the information needs of end-users at different levels to make decisions
- Reflect tracer interventions for service delivery platforms (facility, outreach, community) and programs
- Can be built using data from different sources

User Name

Write feedback

Malawi - Mangochi - Supervision Areas 2014-Q1/2

Profile

Messages

Interpretations

Groups

Filter

Select intervention

Focused Antenatal Care

Level of analysis data source

Entire

Select intervention,
organizational unit &
time period

Add

Manage

Share

<

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Antenatal Care

Delivery

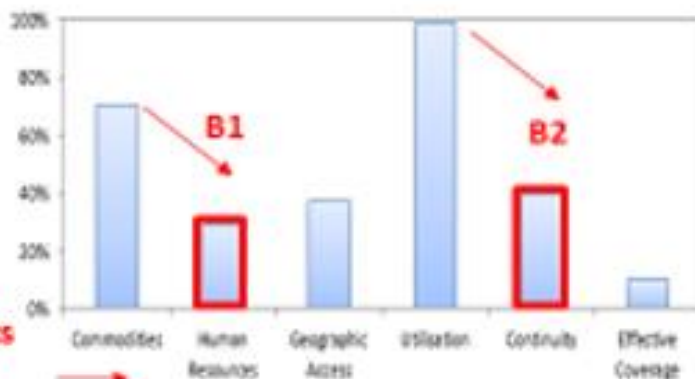
Immunization

Nutrition

Reporting Rates

Reproductive Health

Focused Antenatal Care



Additional Indicators



Major
Bottlenecks
highlighted

6 Determinants
displayed in
Bottleneck
Analysis

Indicators	Districts Average	Bottlenecks Prioritized	Chitipa	Mankanjira	Malombwe	Mumbumba	Namwoma	Sofo	Mkumbira	St. Martins
Commodities	70%									
Human Resources	33%									
Geographic Access	37%									
Utilization	99%									
Continuity	40%									
Effective Coverage	10%									
Additional Indicator 01	10%									
Additional Indicator 02	0%									

Matrix displays (in
red) sub-
organizational units
where there are
bottlenecks

Bottlenecks, root
causes and
solutions
documented

Bottleneck 1: Human Resources

Bottleneck 2: Continuity

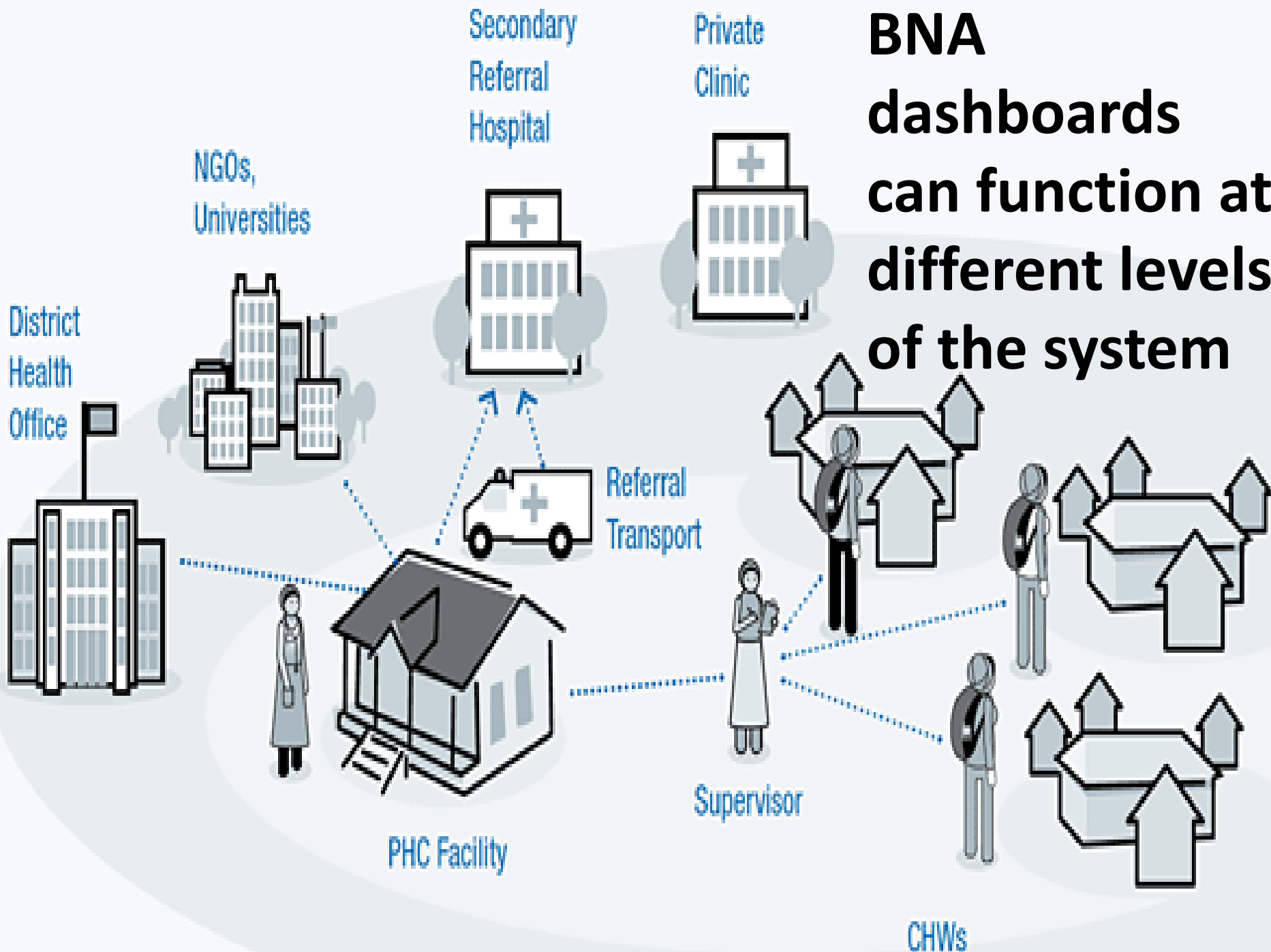
Root cause B1: Training on FANC overdue

Root cause B2: ANC4 coverage low due to late ANC1

Solution B1: Train staff on FANC

Solution B2: C&D on timeliness of ANC1

BNA dashboards can function at different levels of the system



Management Response Tracker								
District	Not due	Due soon	Overdue	Open	Closed	% closed	% Overdue	Avg. Response Time
Buikwe	153	106	15	121	2	2%	12%	62 days
Bukomans.	20	33	4	37	1	2%	12%	34 days
Butambala	21	22	6	28	5	18%	21%	20 days
Buvuma	146	111	17	128	10	13%	13%	7 days
Gomba	104	92	13	105	5	5%	12%	5 days
Kalangala	19	25	1	26	5	19%	4%	5 days

Management Response Tracker

Facility	Not due	Due soon	Overdue	Open	Closed	% closed	% Overdue	Avg. Response Time
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SUMMARY

- Improve **data quality**: direct linkage with service providers/ clients and logistics availability
- Improve data analysis, interpretation, reporting and **use at all levels**
- **Improve coverage** of data collection: remote areas
- Better **integration of vitamine A (CHDs)** data into national databases for planning and evaluation
- Enhanced **interoperability across programmes** e.g. Nutrition, Health, CRVS, etc.

Merci!

Thank you!