

Building a Local System Approach for Improved Facility Accountability in Data Management in Mwanza, Tanzania

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Background

- Reliable health data is important in planning and development of health system facility, district and national levels.
- Availability of accurate data enhances informed decision-making and contributes to health system accountability and equity.
- The Tanzanian government emphasizes data completeness and timelines, but poor data quality is an enduring challenge, exacerbated by low levels of facility accountability and weak linkages with district structures such as:
 - District-level supporting system and structure do not support quality primary data
 - In most facilities, service providers complete documentation by hand during service delivery
 - Health system institutional and hierarchical culture acts as a barrier to identifying real problems and taking action to improve the data management system
 - Health supervisor are not flexible, which limits learning and innovation in solving problems

Implementation Approach

- The project provided training and ongoing mentoring on data processing, data quality, visualization, and HMIS leadership by working closely with district managers to understand and address problems.
- The approach revealed unrecognized issues with data quality and identified root causes:

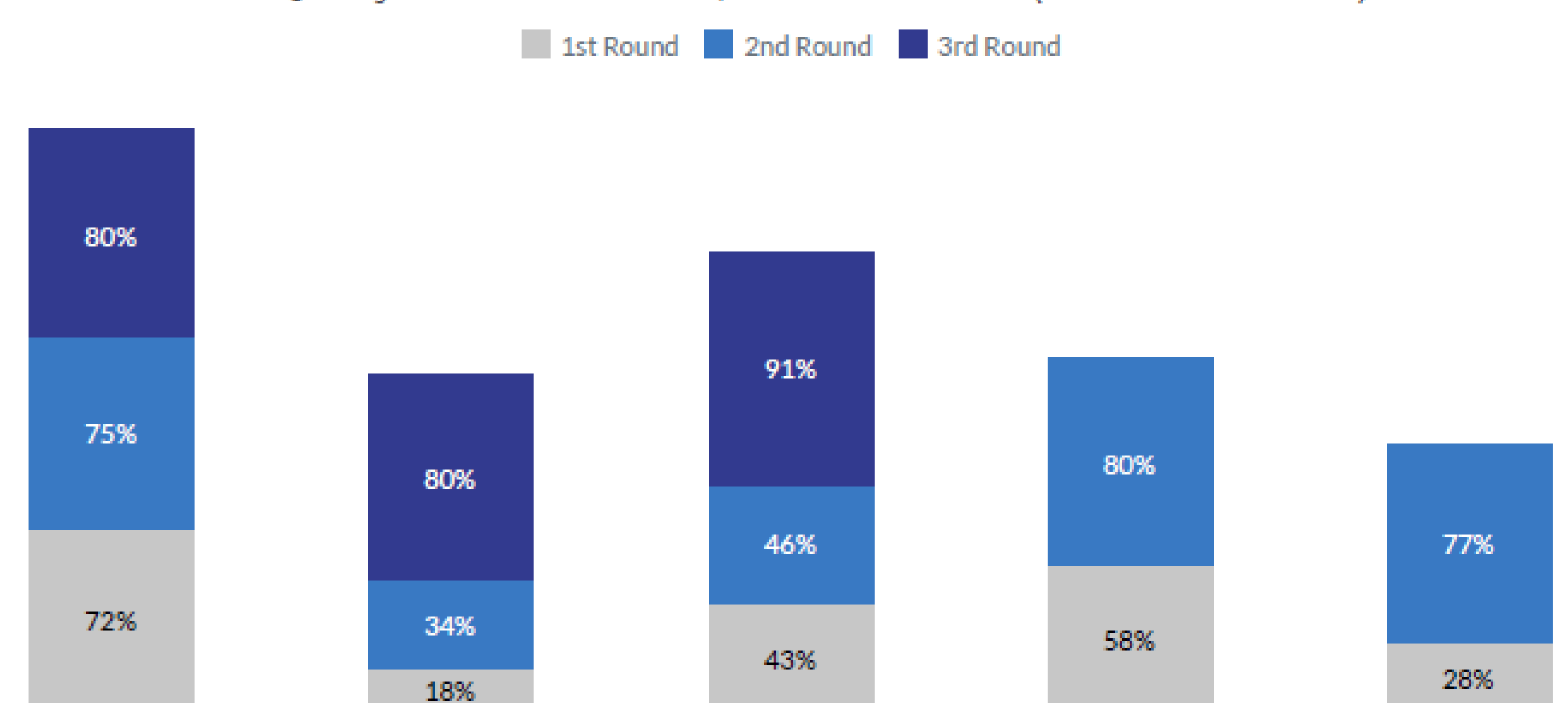
- Governance and accountability weaknesses at all system levels contribute to incomplete and inconsistent data
- Little space is given to reflect on challenges
- Supervisors make recommendations and determine action plans, often with punitive approach
- Process is affected by simultaneous pressure to fill data and provide service at the same time
- Supervisors have high expectations for both collection, recording and patient care. Staff often have to choose between the two, resulting in sporadic data completion or data forgery.

- A qualitative study was conducted to explore the effectiveness of this approach, drawing on purposive sampling to select facilities. Methodologies included Key Informant Interviews (KII), Focus Group Discussions (FGDs) and review of existing assessments.

Results

- Overall, facility staff and district managers report that the system-based approach and hands-on mentoring resulted in the following:
 - The conventional, hierarchical supervisor-subordinate relationship became more supportive
 - Improved skills and practice among district supervisors and health facility staff in understanding facility challenges and use available opportunities to improve data at both district and facility levels.
- The platform increased confidence among facility staff by using peer learning and established constructive discussion among staff, facilities and district management.

Data Quality Assessment Scores, Kwimba Facilities (Jan 2018-June 2019)



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Discussion

- Creating space for open dialogue and problem-solving increased accountability from the facility towards the district, in implementing new skills and sustaining changed practices in managing health information.
- One-off training does not work by itself. It increases staff skills, but they still lack capacity to document well. Training has no observable impact on important factors such as leadership, relationships and communication.
- Building accountability while addressing capacity gaps at facility and district levels can improve quality more effectively than focusing only on skill training

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