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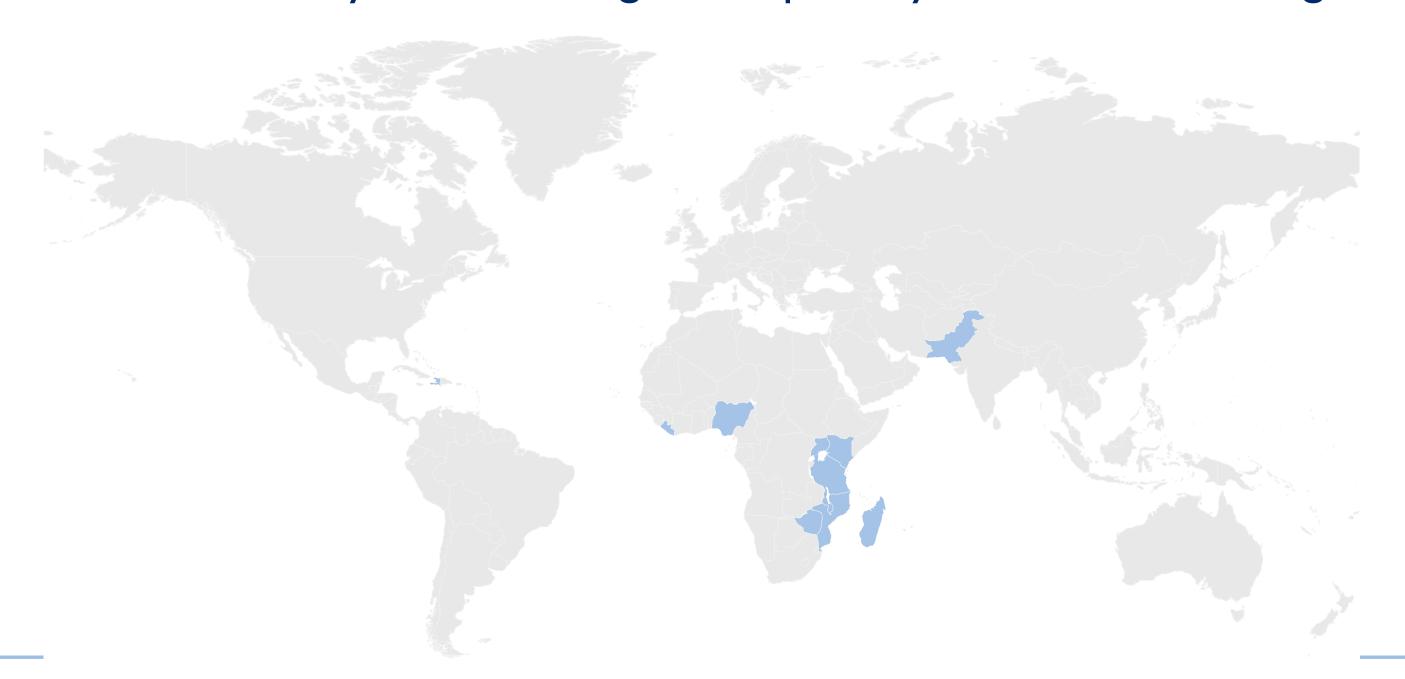
Maternal and Child Survival Program

Improving the generation, quality and use of data for routine immunization systems through the use of process indicators and other strategies: Lessons drawn from Maternal and Child Survival Program(MCSP) multicounty learning activities.

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USAID's Maternal and Child Survival Program / John Snow, Inc.

Background

Why use process indicators for routine immunization and why focus on improving routine immunization data quality?

- The immunization program mainly monitors output and outcome indicators (coverage and dropout rate). However the coverage is often mired with poor quality data and influenced by other contextual factors
- Generation and use of high quality routine data is critical to managers at all levels, donors, and other partners aiming to achieve the Global Vaccine Action Plan with the goal of preventing child and maternal deaths
- Process indicators (listed in AFRO Reach Every District guidelines) are useful to monitor the immunization system and help managers (at all levels) take timely action. However, they are not being used optimally for decision making.

Learning Questions

1. Which process indicators are appropriate for providing real-time system data to demonstrate strengthening of routine immunization (RI) on a pathway to uniformly high immunization coverage that is sustainable over time?

Settings: Malawi, Nigeria, Uganda
Methods:
- Identification of common process indicators
- Developed 2 tools: indicator testing and quality check
- Qualitative interviews with frontline health workers to check the quality of the information
- Testing for the relevance, usefulness, feasibility, acceptability, reliability, and accuracy of the indicators at 3 points in time
- Monthly reporting of process indicators from HFs to districts

2. What are the lessons learned across MCSP countries regarding approaches to improve the generation and active user of RI data?
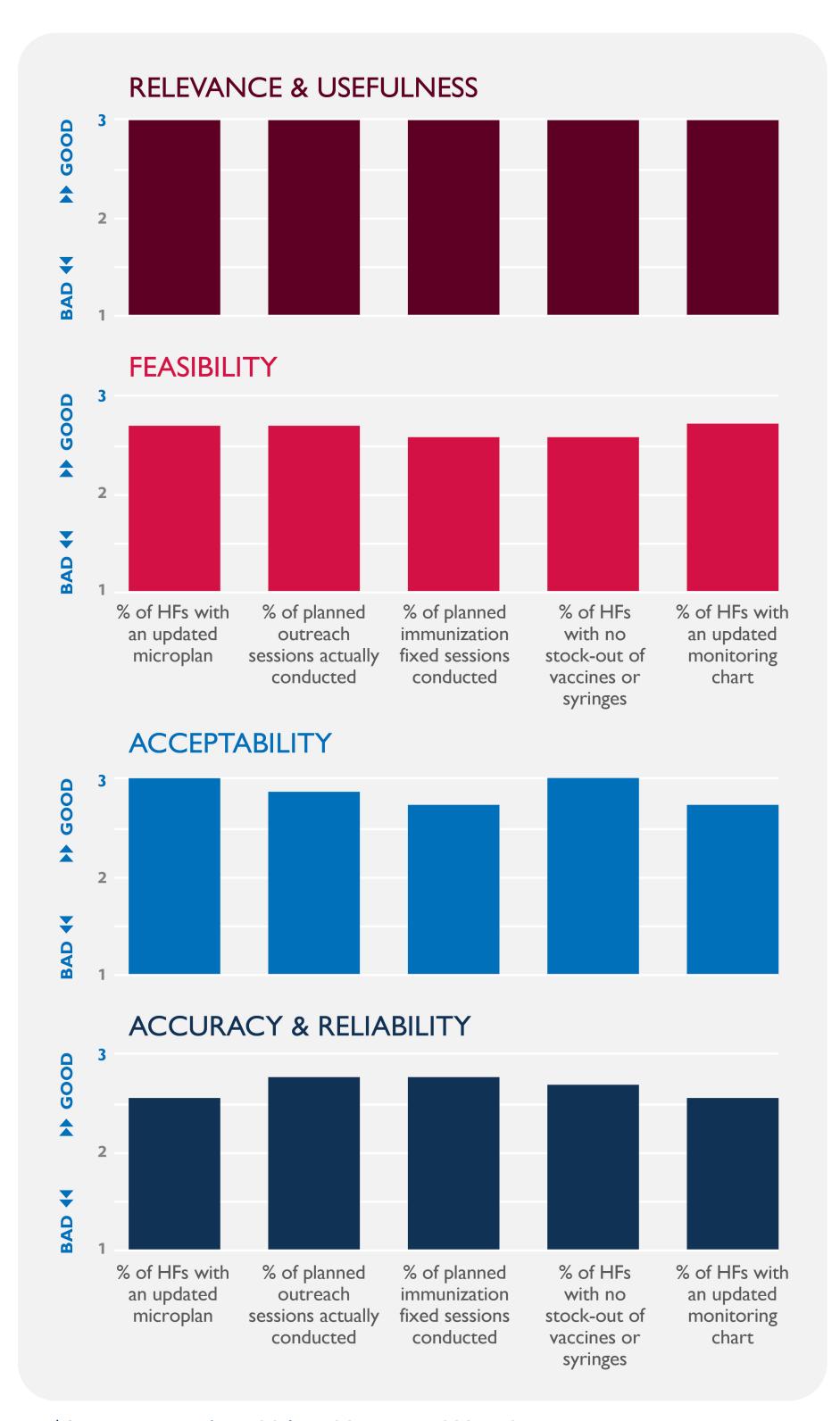
Settings: Haiti, Kenya, Liberia, Madagascar, Malawi, Mozambique, Nigeria, Pakistan, Tanzania, Uganda, Zimbabwe
Methods:
- Desk review of documents (reports, tools, presentations) submitted by country staff related to RI data
- Key informant interviews with MCSP country staff and sub-national level government partners who are familiar with MCSP's efforts in improving RI data
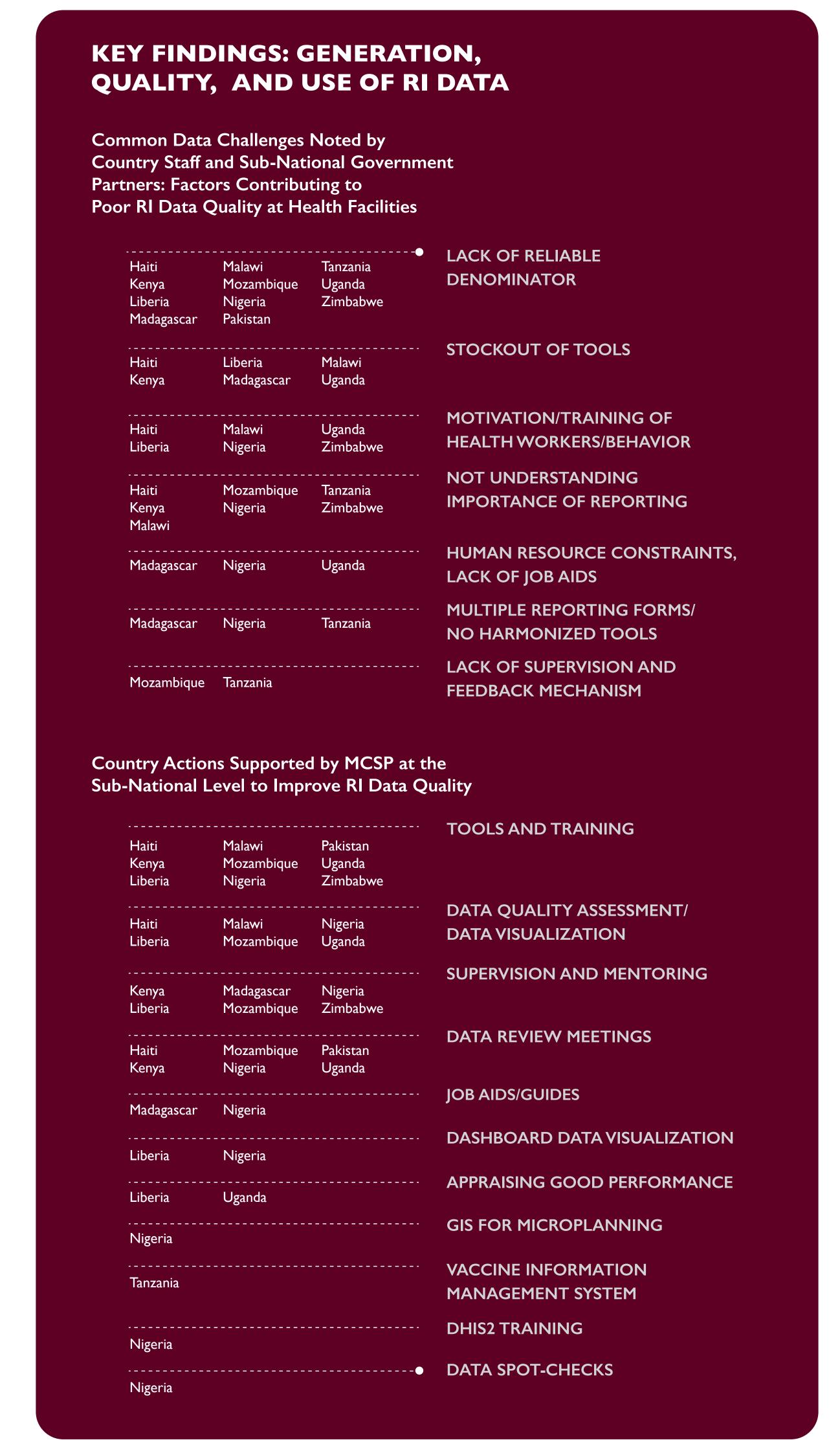
Key Findings: Process Indicators

Relevance/Usefulness, Feasibility, Acceptability, Accuracy/Reliability of Process Indicators at the Sub-National Level
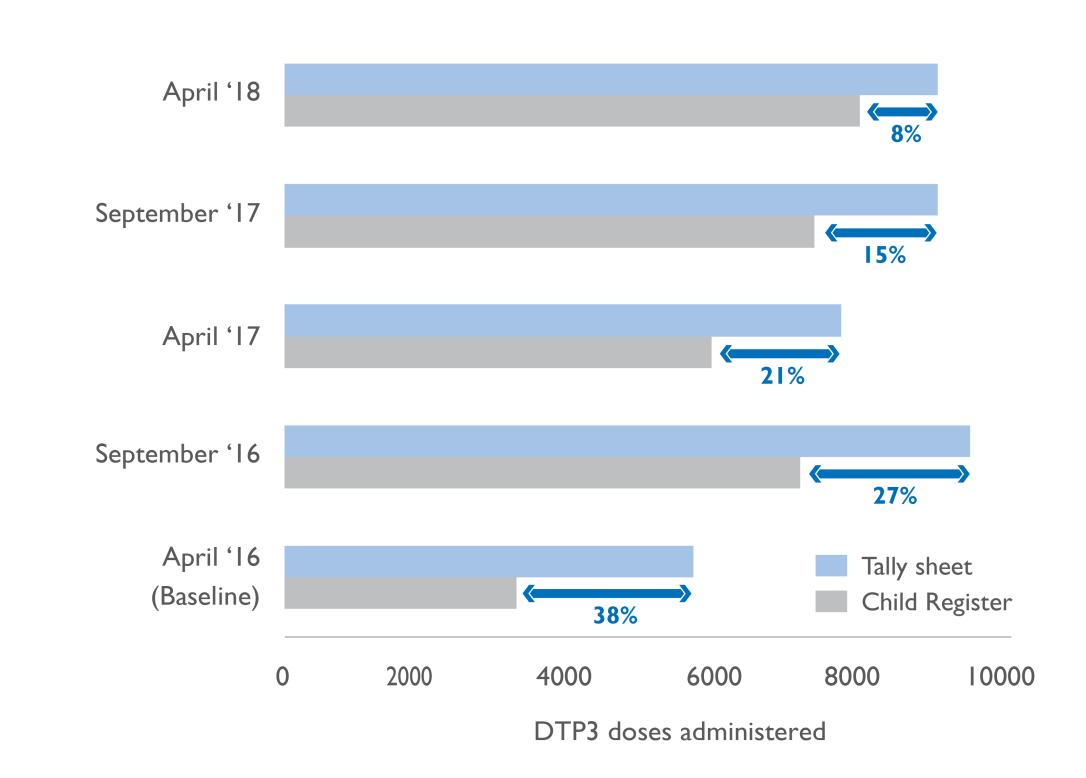

RELEVANCE & USEFULNESS
FEASIBILITY
ACCEPTABILITY
ACCURACY & RELIABILITY

(x-axis categories: % of HFs with an updated microplan; % of planned outreach sessions actually conducted; % of planned immunization fixed sessions conducted; % of HFs with no stock-out of vaccines or syringes; % of HFs with an updated monitoring chart)

*Average score from Malawi, Nigeria, and Uganda
Note: full set of indicators shown in report

> THE CAPACITY THAT MCSP SUPPORTED TO BUILD IN DATA REVIEW AND TRIANGULATION HAS HELPED TO REDUCE DATA DISCREPANCY.
> Tanzania Regional Immunization Officer

KEY FINDINGS: GENERATION, QUALITY, AND USE OF RI DATA

Common Data Challenges Noted by Country Staff and Sub-National Government Partners: Factors Contributing to Poor RI Data Quality at Health Facilities

Haiti	Malawi	Tanzania	LACK OF RELIABLE DENOMINATOR
Kenya	Mozambique	Uganda	
Liberia	Nigeria	Zimbabwe	
Madagascar	Pakistan		
Haiti	Liberia	Malawi	STOCKOUT OF TOOLS
Kenya	Madagascar	Uganda	
Haiti	Malawi	Uganda	MOTIVATION/TRAINING OF HEALTH WORKERS/BEHAVIOR
Liberia	Nigeria	Zimbabwe	
Haiti	Mozambique	Tanzania	NOT UNDERSTANDING IMPORTANCE OF REPORTING
Kenya	Nigeria	Zimbabwe	
Malawi			
Madagascar	Nigeria	Uganda	HUMAN RESOURCE CONSTRAINTS, LACK OF JOB AIDS
Madagascar	Nigeria	Tanzania	MULTIPLE REPORTING FORMS/ NO HARMONIZED TOOLS
Mozambique	Tanzania		LACK OF SUPERVISION AND FEEDBACK MECHANISM

Country Actions Supported by MCSP at the Sub-National Level to Improve RI Data Quality

Haiti	Malawi	Pakistan	TOOLS AND TRAINING
Kenya	Mozambique	Uganda	
Liberia	Nigeria	Zimbabwe	
Haiti	Malawi	Nigeria	DATA QUALITY ASSESSMENT/ DATA VISUALIZATION
Liberia	Mozambique	Uganda	
Kenya	Madagascar	Nigeria	SUPERVISION AND MENTORING
Liberia	Mozambique	Zimbabwe	
Haiti	Mozambique	Pakistan	DATA REVIEW MEETINGS
Kenya	Nigeria	Uganda	
Madagascar	Nigeria		JOB AIDS/GUIDES
Liberia	Nigeria		DASHBOARD DATA VISUALIZATION
Liberia	Uganda		APPRAISING GOOD PERFORMANCE
Nigeria			GIS FOR MICROPLANNING
Tanzania			VACCINE INFORMATION MANAGEMENT SYSTEM
Nigeria			DHIS2 TRAINING
Nigeria			DATA SPOT-CHECKS

Data Quality Self-Assessment and Training: Improved recording of immunization in MCSP districts in Uganda

(Horizontal bar chart, DTP3 doses administered, categories: April '18 — 8%; September '17 — 15%; April '17 — 21%; September '16 — 27%; April '16 (Baseline) — 38%. Legend: Tally sheet, Child Register)

> TECHNICAL ASSISTANCE GIVEN BY MCSP IMPROVED DATA QUALITY, REDUCED FALSIFICATION, AND STRENGTHENED DEFAULTER TRACING AND REFERRAL SERVICES.
> Nigeria Local Government Immunization Officer

Key Takeaway Message

- Process indicators are critical for decision making and regularly monitoring the progress of RI activities at the sub-national level as demonstrated in the MCSP supported countries
- Process indicators do not necessarily predict the coverage
- There are also other process indicators which are country-context specific and should be explored and encouraged
- Generating meaningful data and utilizing data for decision making to strengthen RI system, especially at the sub-national level have gained major focus among program managers with impetus from MCSP
- Technical support from MCSP has encouraged government partners to focus more deeply on improving data quality.