STRATEGIC INFORMATION PROJECT IN MOZAMBIQUE (M-SIP)

SUCCESS STORY I From Disarray to Quality Data

Data Quality Assessments key to improving data quality in Mozambique's Cabo Delgado province.

Credit: John Snow, Inc. (JSI)

The baobab tree at Natite Health facility, one of the sites where JSI conducts DQAs.

An old baobab tree has sheltered decades of change at the Natite health facility in the city of Pemba, Mozambique, part of Cabo Delgado province. Just one year ago, the facility was chaotic, inside and out. Each day was filled with constant motion: under the baobab's shady branches women held screaming infants; entire families sat waiting their turn in an ever-growing line; nurses rushed about, their white uniforms billowing in the wind; and passing cars and motorbikes kicked up dust and displaced swarms of lazy flies.

Inside the clinic, the chaos and hubbub around the baobab tree mirrored the disarray of papers, medicines, and nurses within.

Patients waited entire afternoons to get their files, often to be reentered into the system as first time patients; nurses and doctors' referral systems left patients in a cycle of confusion and lost data; and datasets containing precious information on patients receiving life-saving treatments lay scattered, disjointed, and sometimes missing.

In the daily hustle to treat a burdensome load of patients, clinical staff did not have the time to prioritize data quality. Minimal awareness of the benefits of quality, reliable data meant that updating registers and filing documents was a lower priority than saving patient's lives. Far too often, the staff's hard work disappeared between patient visits, only to be replicated a few months later and then lost again.

But that was a year ago.

Today, Meldina Valente, Data Quality Assessment (DQA) advisor for the Strategic Information Project in Mozambique (M-SIP), notices a change. There is a palpable calm when she enters the office. Where papers lay in disarray the year before, clean counters and a filing cabinet are now present. Inside the cabinet, patients' medical histories are neatly stacked between clearly labeled manila folders. As Meldina watches, a nurse walks in to post an updated chart on a dashboard squarely centered on the wall. A few moments later, a patient limps into the office and is given her file to take the pharmacy.

After examining it, the pharmacist quickly updates the file and returns it, sending the patient home with the correct prescription.

Two doctors tell Meldina that while their patient load is the same, the clinic has begun functioning in a way that better streamlines everyone's needs—from the Ministry of Health right down to the patient. Doctors are able to quickly and effectively note their patients' progress and follow-up on issues they would previously need to re-diagnose because the original files were missing.
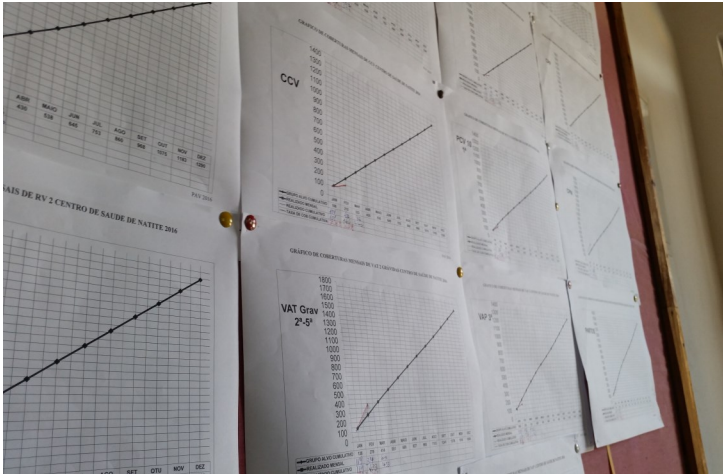
Credit: John Snow, Inc. (JSI)

Newly organized charts and patient files have been a key element in streamlining activities at the clinic, making patient data accessible and useful during each patients' visit.

What changed over the course of 12 short months?

Data: both quality and culture.

M-SIP, funded by USAID and implemented by JSI Research & Training Institute, Inc., currently works across Mozambique to improve data quality among clinic HIV indicators and to decrease data deviations (the percentage at which recorded data reflects reality). Improving data quality will ensure high quality information is accessible, reduce administrative burden within the facility, and increase availability of quality health services for those receiving care.

As part of this process, the M-SIP team conducts yearly DQAs in collaboration with stakeholders from the central Ministry of Health in Maputo, sub-national ministries, clinics, and communities.

During a DQA, Meldina, other M-SIP team members, and stakeholders evaluate the HIV data clinics have reported to the MOH and then compare these numbers to the physical registers in the clinics where this information was originally derived. The team calculates deviations and then they compare this data to data from other clinics and Mozambique as a whole.

Overall, the consistency of the DQA process has helped to create a culture of improved data quality. After undergoing a DQA, clinics have a better idea of patient load to manage drugs and other resources on a regular basis, information that has contributed to clinics making high quality data a priority. As a result, DQAs have decreased data deviations and have enable clinics and facilities like the Natite health facility to increase the effectiveness of their system and encourage consistent data entry and monitoring.

Credit: John Snow, Inc. (JSI)

Meldina (right) and other M-SIP staff from JSI Research & Training sit with Cabo Delgado's Provincince Clinical head to discuss information gathered as part of the recent DQA.

Working closely with the Ministry of Health, M-SIP has been able to promote MOH leadership's engagement in developing data culture, ultimately ensuring that DQAs will be conducted long after the end of the project. Cabo Delgado's Provincial Health Directorate is a prime example of how strong, devoted leadership can instigate change region wide. Dr. Langa (Cabo Delgado Province Clinical head) now encourages successful clinics to learn from each other by sending teams from each clinic in the region to learn from the successes and challenges of their colleagues. The visits have instigated positive, friendly competition that encourages teams to work hard to ensure their data is accurate and their clinics run efficiently.

Based on Cabo Delgado's success, the M-SIP team is confident that a similar approach can be taken in other provinces across Mozambique.

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