

Data (UPHMIS/HMIS) Quality Audit Report (3rd Round)
4th – 6th July 2018

With reference to the Principal Secretary H & FW letter dated 31st May 2017 (संख्या- 35/2017/303/पांच-9-2017-9(127)/12) and MD NHM letter dated 26th June 2018 for the improvement of data quality of HMIS/UPHMIS, data quality audit team were constituted comprising of members from DGMH, DGFW, NHM and UPTSU to conduct 3rd round of data audit.

All the members of the team were oriented on data element definitions and methodology to conduct a data quality audit on 3rd July 2018, and feedback of last audit visits (19th to 21st April 2018) were shared. In this third round all eight aspirational districts in Uttar Pradesh were identified for data audit where 8 different teams have visited during 4th to 6th July 2018.

Table 1: Data Quality Audit Team

Team	Members Name	Department	Visiting District
Team 1	Dr. Rajesh Kumar, JD	DGFW	Siddharth Nagar
	Dr. Rais Ahmed, Consultant	DGMH	
	Mr. Arvind Pandey, Div PM, Gorakhpur	NHM	
	Dr. Shiva Nand Chauhan, M&E Specialist	UPTSU	
Team 2	Dr. Ashwini Garg, ADRO, D&E Cell)	DGFW	Balrampur
	Mr. Kaushal Singh Bisht- Div PM- M&E	NHM	
	Mr. D Debnath, Div PM, Devipatan	NHM	
	Mr. Ishan Tripathi, M&E Specialist	UPTSU	
Team 3	Mr. Azam Khan, Doc. Off., CP	NHM	Bahraich
	Mr. M.I. Hussain, Div Acct Manager, Basti	NHM	
	Ms. Charu Yadav, M&E Specialist	UPTSU	
Team 4	Mr. Satya Prakash, PC-RI	NHM	Sharawasti
	Mr. Pawan Kumar Verma, Div Acct Manager	NHM	
	Mr. Nazir Haider, M&E Specialist	UPTSU	
Team 5	Mr. Rajan Prasad, Div PM	NHM	Chtrakoot
	Mr. Firoz Alam, PC-RBSK	NHM	
	Mr. M.K. Tiwari, Div AM, Chitrakoot	NHM	
	Dr. Pradip Gupta, M&E Specialist	UPTSU	
Team 6	Mr Saran Srivastava (ARO)	DGMH	Fatehpur
	Mr Harit Saxena, Div PM Allahabad	NHM	
	Mr Manish Kumar Soni, Consultant FP	NHM	
	Mr Shariq Ul Islam M&E Specialist	UPTSU	
Team 7	Mr. DK Srivastava, (ARO, D&E cell)	DGFW	Chandauli
	Ms. Neelima Pathak (Const-Blood, NCD)	NHM	
	Dr Prahlad Kumar, M&E Specialist	UPTSU	
Team 8	Mr. SVP Pankaj DGM-M&E	DGFW	Sonbhadra
	Mr. Virendra Pratap(ARO, D&E cell)	DGFW	
	Mr. Brijesh Mishra, Div PM- Mirzapur	NHM	
	Mr. Shadab Aslam, M&E Specialist	UPTSU	

- Each team visited 2 block facilities and 1 district hospital. In total, 24 facilities were visited (16 block facilities, 8 district hospitals)
- The table 2 below is summarizing the initial analysis based on the checklist filled during data quality audit

Table 2: Summary of 3rd round Data Quality Audit

Data Element	% of Blank	% of Matched	% of Over Reported	% of Under Reported	% of Source document not available
HR	26	62	3	6	3
Training	10	54	5	6	25
Drugs and Supply	24	52	6	11	7
Maternal Health/FP	41	41	5	9	4
Child Health	22	38	3	5	32
JSSK program	20	29	8	7	36

Table 3- District wise summary of data quality status

S.No.	District	% of Blank	% of Matched	% of Over Reported	% of Under Reported	% of Source document not available
1	Siddharth Nagar	23	49	7	9	12
2	Balrampur	8	67	8	11	5
3	Bahraich	15	52	8	21	3
4	Shrawasti	26	51	3	9	11
5	Chitrakoot	30	44	2	2	23
6	Fatehpur	21	56	4	2	17
7	Chandauli	42	21	4	2	31
8	Sonbhadra	3	67	6	6	18

- **% of blank-** Data elements with no reported numerical value in portal. (Left blank)
- **% of matched-** Data elements whose reported value is matched with the value recorded in source document.
- **% of over reported-** Reported value of the data element is greater than the value recorded in source document.
- **% of under reported-** Reported value of the data element is less than the value recorded in source document.
- **% of source document not available-** Data elements whose source documents are not available at facility.

Suggestive action plan for district for overall data quality improvement

1. **Ensure availability of source document and monthly summary report for each of the data element-**
There should be a source document for each of the data elements available in format. All the required source documents (labour room, ANC register, OPD register, referral register, stock, training, FP services etc) must be available at facility and monthly summary report must be prepared in register before reporting format.
2. **Fix and nominate the staff responsible for data compilation and reporting on monthly basis at each facility-** Data element wise accountability of staff need to be fixed and verified by MOIC and at to prepare summary of aggregated data on monthly basis by 21st of each month according to HMIS/UPHMIS formats. At District Hospital the Quality/Hospital Manager should take responsibility for timely and quality reporting.
3. **Capacity building of staff on data element definition, recording, compilation and reporting-**
Training of facility staff (staff nurse, ANM, BPM, pharmacist etc) on definition of data elements need to be conducted by districts team.
4. **Conduct data audit in facilities with poor data quality** – This includes visit to low performing facilities, matching of reported data with source document, identify the gap and take corrective actions. The audit need to be conducted by DPM, DARO, DDM, and District HMIS operator.
5. **Fix accountability of validation committee-** District and block validation committee must be able to analyze and review the data quality status on monthly basis and take corrective actions.

Facility level action plan is also developed for each of the visited facility and shared with facility in charge during data audit with timeline for completion of each of the identified gap.

District - Siddharth Nagar

Major challenges of data quality identified during data quality audit visit and possible suggestions

Two blocks namely Itwa and Barhni and district combined hospital were visited by the team for data quality audit. There are some major challenges of data quality found during the visit. Major data quality challenges, possible solution and responsible designation are given below in the table.

SN	Issue	Possible solution	Responsible person
1	No training record of facility staff available.	To prepare training record of facility staff (MO MBBS, MO AYUSH, Staff Nurse & ANMS) once and to update it monthly so that correct information on training may be filled in monthly UPHMIS facility format.	MOIC/ARO/BPM
2	No hard copy of HMIS/UPHMIS filled format for BCHC/BPHC available at the facility	To ensure to prepare a compiled HMIS/UPHMIS monthly hard copy after collecting required information from different sections	ARO/BPM
3	Summary on each record in the facility is missing.	Need to prepare a summary of required information at the end of reporting duration.	Each concerned person
4	MCTS number is missing in ANC & delivery registers.	It needs to update MCTS number on ANC & delivery registers daily/weekly.	MCTS operator
5	Role distribution of data elements is missing at the facility.	Need to separate data elements of HMIS/UPHMIS person wise, orient once and ensure reporting on time	MOIC at block and CMS at DH.
6	Validation committee not functional at all	Need to fix a certain date (between 26 & 28 of every month) for validation committee meeting – Step 1- Checking use of correct format Step 2- Matching of manual format with portal format Step 3- Audit data elements with record Step 4- Auditing some SC records with format data Step 5- Ensure correction on portal by importing off line excel data	Validation committee (MOIC/ARO/HEO/BPM /MCTS operator) at block facility (CMO/ACMO RCH/DARO/DPM/HMIS operator) at district level - Need to share meeting minutes to CMO office/DPMU
7	HMIS data is not being uploaded on UPHMIS portal such Barhni BPHC HMIS data and DCH HMIS data for May month	Need to ensure uploading of HMIS and UPHMIS offline excel data on UPHMIS portal by 30 th of the month.	BPM/DEO

1. Block: Block CHC Itwa, **(Date of visit:** 04/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training register is not available.	It was prepared.	Dr. Sandeep, MO	Done
2	No manual HMIS/UPHMIS filled formats for May and onwards months	Need to prepare hard copy first before entry	Dr. B. K Vaidya, MOIC & Anil Kumar, BPM	From next time
3	Summary of each record in the facility is missing.	Need to prepare summary of each record as per reporting requirement at the end of reporting period	Concerned person under the supervision of MOIC	From next reporting onwards
4	MCTS number is missing in delivery and ANC registers.	Need to update MCTS weekly	Staff nurse and MCTS operator under the supervision of MOIC	From next week
5	Data elements of Child health section not available as required summary is not prepared by doctors.	To ensure daily summary of required elements related to HMIS/UPHMIS in OPD register	Dr. B. K Vaidya, MOIC & MO	From next week
6	Role distribution of data elements for data collection is missing	To ensure distribution of data elements of HMIS/UPHMIS formats to concerned persons	MOIC & BPM with concerned in-charge	By 15 th July 2018
7	Validation committee not functional at all.	Twenty sixth of the month was fixed for the validation committee meeting. Need to share meeting minutes to CMO office/DPMU	MOIC/ARO/HEO/BPM/MCTS operator at block facility	July 2018

2. Block: Block PHC Barhni, (**Date of visit:** 05/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	No training record of MO MBBS, MO AYUSH, SN and ANM available which requires to update each month in UPHMIS monthly format.	Training register was prepared.	Dr. Major R K Prasad, MO & Mr. S C Chaudhary, ARO	Done
2	No separate structure of PPC at Barhni but delivery from same labour room in BPHC is divided for BPHC and PPC for reporting.	Delivery from the same labor room in BPHC must not be divided. Need to remove PPC from portal and ensure correct reporting in BPHC.	Dr. Sheshbhan G., MOIC & Piyush, BPM	By 15 th July 2018
3	HMIS data for May month was not imported on UPHMIS portal, and May month filled format of UPHMIS was not available at the facility.	To ensure importing of May month HMIS data on UPHMIS portal.	Dr. Sheshbhan G., MOIC & Piyush, BPM	July 2018
4	Summary of each record in the facility is missing.	Need to prepare summary of each record as per reporting requirement at the end of reporting period	Concerned person under the supervision of MOIC	From next reporting onwards
5	Data elements of Child health section not available as required summary is not prepared by doctors.	To ensure daily summary of required elements related to HMIS in OPD register	Dr. Sheshbhan G., MOIC	July 2018
6	Role distribution of data elements for data collection is missing.	To ensure distribution of data elements of HMIS/UPHMIS formats to concerned persons	MOIC & BPM with concerned in-charge	By 15 th July 2018
7	Validation committee is not functional.	Twenty sixth of the month was fixed for the validation committee meeting. Need to share meeting minutes to CMO office/DPMU	MOIC/ARO/HE O/BPM/MCTS operator at block facility	July 2018

3. DHQ: District Combined Hospital, Siddharth Nagar (**Date of visit:** 06/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	No training record of facility staff available.	To prepare training record of facility staff (MO MBBS, MO AYUSH, Staff Nurse & ANMs) to report and update monthly	Dr. Rochismati Pandey, CMS	15 th July 2018
2	HMIS data uploading on UPHMIS portal missing for May month	Need to upload offline data on time	Vinay, HMIS operator	By 25 th of each month
3	MCTS number is missing in delivery and ANC registers.	Need to update MCTS number regularly	Dr. Rochismati Pandey, CMS & Vinay, DEO	Daily
4	Summary of each record in the facility is missing.	Need to prepare summary of each record as per reporting requirement at the end of reporting period	Each concerned person	From next reporting onwards
5	No separate record for PW HB test with LT	To ensure separate register for pregnant women diagnostics	Dr. Rochismati Pandey, CMS & LT/LA	July 2018
6	Role distribution of data elements for data collection is missing	To ensure distribution of data elements of HMIS/UPHMIS formats to concerned persons	Dr. Rochismati Pandey, CMS	By 15 th July 2018
7	Validation committee is not functional.	Need to make it functional (26 th of each month)	CMS, hospital manager and concern record in-charge	July 2018

District- Balrampur

Major challenges of data quality identified during data quality audit visit and possible suggestions

Two blocks namely Sheopura and Rehrabazar and District Women Hospital (DWH) were visited by the team for data quality audit. Major data quality challenges, possible solution and responsible designation are given below in the table.

SN	Issue	Possible solution	Responsible person
1	Summary for Delivery and other registers is not maintained.	Summary should be maintained by the Staff nurse as the reporting month ends and summary should be maintained in other registers i.e. OPD register, Diet register and ambulance register by the concern person	MOIC/MO/SN/BPM
2	The Data element of JSSK not been found correctly for Drugs and consumable and Drop back registers are not properly maintained.	The Drugs and consumables which are given to the PW should be maintained in a register, The ambulance registers should be properly maintained for Drop back and Home to hospital for both 102 and 108	SN/ BPM
3	Record for 4 ANC and Full immunization not available at the facility.	ANM should maintain the list of PW and Children 9-11 month in her area for ANC and Full immunization	ANM/LMO
4	Data Validation meeting are not held regularly at Block and DWH	Data validation meeting should be held every month for validation of the data filled at the portal	MOIC/CMS/BPM
5	The 102 and 108 registers are maintained in different registers rather than the printed register and no person is responsible for the maintenance of register.	A unique printed register should be given at all the facilities of 102 and 108 ambulance data maintenance and a responsible person should be assigned to maintain it	SN/BPM

1. Block: Block CHC Sheopura (Date of visit: 04/07/2018)

S.no	Identified issues	Action Planned	Person responsible	Timeline
1	Summary not maintained in the delivery register	Summary should be maintained by Staff Nurse at the end of the month.	Staff Nurse/ MOIC/ BPM	21 July 2018
2.	ANC register not available the report of 4 ANC cannot be verified	ANC register should be available and regularly maintained by ANM for 4 ANC.	ANM/ BPM/ MOIC	21 July 2018
3.	Drop back register only maintained but not contain the summary and segregation of PW and New born	Printed registers to be used for drop back at facility and should be maintained by a person assigned and summary should be maintained at the end of month	Staff Nurse/ BPM	21 July 2018
4.	Data source are not available for JSSK	Records should be maintained for all the elements of JSSK required for UPHMIS	Staff Nurse/ BPM	21 July 2018
5.	Report for SNCU not applicable for block facilities.	The data elements for SNCU should be left blank for block facilities.	BPM/ Operator	Done

2. DHQ:- District Women Hospital, Balrampur:

S.no	Identified issues	Action Planned	Person responsible	Timeline
1	Drop back register not maintained in proper printed register and no summary has been maintained.	There should be printed registers for ambulance i.e. drop back, IFT and Home to hospital. Proper summary should be maintained for drop in and drop back cases.	CMS /RSK operator	21 July 2018
2.	Data for 4 ANC not available at facility	Doctor or the ANM providing the services of ANC should have a due list with them of PW registered in the facility with their mobile number and Address so they can be tracked up to 4 th ANC.	CMS / MO / ANM	21 July 2018
3.	Full immunization data is not available at facility	ANM providing immunization services at the facility should have the due list of children with mobile number and address who are to be immunized fully so that they can be tracked for immunization.	CMS / MO / ANM	21 July 2018
4.	Female sterilization data is not maintained in the printed register and kept in different registers which are highly at the risk to be misplaced.	Data for female sterilization should be maintained in the printed register so that all the information can be tracked at one place at the time of reporting	CMS / SN	21 July 2018
5.	Data validation meeting are not conducted at the facility	Data validation committee should be formed in chairmanship of CMS at the facility and the validation meeting should be regularly held at facility	CMS / ARO/ Operator	21 July 2018

3. Block: Block PHC Rehrabazar (Date of visit: 06/07/2018)

S.no	Identified issues	Action Planned	Person responsible	Timeline
1	Data for drugs and consumable not available.	Source register to be maintained for drugs and consumables distributed at Facility	MIOC / BPM/ SN	21 July 2018
2	Child OPD data not entered correctly in UPHMIS	Summary should be maintained in OPD register for child OPD so that data can be correctly entered in UPHMIS.	BPM/ MO	21 July 2018
3	Full immunization data not available	ANM providing immunization services at the facility should have the due list of children with mobile number and address who are to be immunized fully so that they can be tracked for immunization	ANM/ SN / Operator	21 July 2018
4.	Data for Stock availability was not correctly filled by operator even after providing correct data by pharmacist	Person responsible for reporting of stocks availability section should seat with operator and verify the report which is entered in portal by matching it from data given.	Pharmacist	21 July 2018
5.	Validation committee meetings are not held at facility.	Validation committee should verify the data uploaded in the portal and correct the data as per the source document to remove errors every month regularly at a fixed date.	MOIC	21 July 2018

District - Bahraich

Major challenges of data quality identified during data quality audit visit and possible suggestions

Two blocks namely Jarwal & Mahsi and District Women Hospital (DWH) were visited by the team for data quality audit. Major data quality challenges, possible solution and responsible designation are given below in the table.

SN	Issue	Possible solution	Responsible person
1	Training record of facility staff.	Training record is to be maintained in a register and updated on monthly basis so that correct information on training may be filled in monthly UPHMIS facility format.	MOIC/BPM/HM
2	OPD(U-5) data including treatment for Diarrhea and Pneumonia are not available	MO should make daily summary of U-5, So that it will be easy to summarize at the end of month	Pharmacist
3	Summary on each record in the facility is missing.	Need to prepare a summary of required information at the end of reporting duration.	Each concerned person
4	Only 1 st ANC is mentioned in ANC register so, 4 ANC data are not available	LMO or SN/ANM should maintain 4 ANC data and fill ANC register properly	LMO
5	Role distribution of data elements is missing at the facility.	Need to separate data elements of HMIS/UPHMIS person wise, orient once and ensure reporting on time	MOIC at block and CMS at DH.
6	48 Hours Stay is wrongly captured at DWH by Duty SNs.	Patients not staying 48 Hours should be counted in this section and also briefed for collection and compilation	Duty SNs
7	Validation committee is not functional.	Need to make it functional and fix a date for the month	MOIC/CMS

1. Block: Block CHC Jarwal (Date of visit: 04/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsible person	Timeline
1	Record of training not available for facility and filed staffs (ASHAs)	Prepared onsite register for facility staffs and also facilitated for ASHA training register with BCPM	BCPM	Done
3	It was found that few ASHA area were still vacant. Asha Approved is 230 but functional is 215 only	New ASHA selection has to be done	BCPM	45 days
4	ASHA HR data mismatched and BCPM was not sure of exact data.	Data was confirmed with DCPM and corrected	BCPM	Done
5	KMC space is not available. Also facility staff not aware about the KMC corner	Place identified and advised to make it functional	BPM	1 week

6	Only 1 st ANC is mentioned in ANC register so, 4 ANC data are not available	Mentored LMO(Ayush) to Maintain 4 ANC data and fill ANC registration properly	LMO	20 days
7	OPD(U-5) data for Diarrhea and Pneumonia are not available	MO should make daily summary of U-5, So that it will be easy to summarize at the end of month	Pharmacist	1 week
8.	Treatment data of U-5 children are not available	MO were instructed to maintain daily summary of treatment of U-5 children	Pharmacist	1 week
9.	Validation committee meeting not held since last 4 months	Instructed to conduct the meeting as per guideline	BPM	1 week

2. District Women Hospital- Bahraich (Date of visit: 05/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsible person	Timeline
1	Only one person is responsible for whole reporting UPHMIS/ HMIS	As per availability assigned role to 1 RSK Staffs , 1 Operator & pharmacist	RSK Operator, RSK Manager and Pharmacist	Done
2	Data elements of Child health section is not recorded.	Pediatrician Briefed for summarization on daily basis	RSK Manager	30 th July
3	Record of training not available for facility Staffs	Prepared training record and deputed for regular updation	RSK manager	1 week
4	JSSK Data not captured properly mainly Diet and Ambulance data	Assigned and briefed the role for Data collection for Diet, 102, 108	Duty SNs on roaster wise and monitored by RSK Manager	30 th July
5	48 Hours Stay is wrongly captured by Duty SNs.	Briefed about the Patients not staying 48 Hours should be counted in this section and also briefed for collection and compilation	Duty SNs and Sumit	30 th July
6	Validation meetings not happening	Assigned role for Conducting validation meeting before data Updation	RSK Manager	20 days
7	Standard ANC register not available	Instructed to do follow up and arrange ANC register from CMSD	DPM, RSK Manager	20 days

3. Block: Block PHC Mahsi, **(Date of visit:** 06/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsible person	Timeline
1	Record of training not available for facility and filed staffs (ASHAs)	Prepared onsite register for facility staffs and also facilitated for ASHA training register with BCPM	BCPM	7 Days
2	Data elements of Child health section is not segregated by doctors IPD registers	Briefed for summarization on daily basis related to HMIS/UPHMIS in IPD register	BPM &MO	30 th July
3	Diet register was not available at facility	Instructed to keep diet register in facility and make someone in charge of it	Staff Nurse	1 week
4	Hemoglobin data did not match with source document. Data uploaded by operator in wrong format	Mentored operator for same and corrected data on spot	DEO	Done

District- Sharawasthi

Major challenges of data quality identified during data quality audit visit and possible suggestions

Two blocks namely Ikauna, Bhangaha CHC (Hariharpur Rani Block) and District Combined Hospital (DCH) were visited by the team for data quality audit. Major data quality challenges, possible solution and responsible designation are given below in the table.

SN	Issue	Possible solution	Responsible person
1	Training record of facility staff.	-Training record at DCH was available but not maintained, need to be updated in coordination with Nurse Mentor, Hospital Manager and SNs. -In blocks these registers are not maintained in a register. To prepare training record of facility staff (MO MBBS, MO AYUSH, Staff Nurse & ANMs/LHV) once and to update it monthly so that correct information on training may be filled in monthly UPHMIS facility format.	MOIC//BPM/BCPM/H EO/HM/NM
2	Responsibility of data collection, compilation, validation, and uploading on time	In the district no ARO is in place, hence BPM in the blocks and Hospital Manager at DCH has to own responsibility for data quality including timely collection, compilation, validation etc.	HM/BPM
3	Summary on each record in the facility is missing.	Need to prepare a summary of required information at the end of reporting duration.	Each concerned person
4	MCTS number is missing in ANC & delivery registers.	It needs to update MCTS number on ANC & delivery registers daily/weekly.	SN/ANM/MCTS operator
5	Role distribution of data elements is missing at the facility.	Need to separate data elements of HMIS/UPHMIS person wise, orient once and ensure reporting on time	MOIC at block and CMS at DH.
6	Validation committee not functional at all	Need to fix a certain date (between 26 & 28 of every month) for validation committee meeting – Step 1- Checking use of correct format Step 2- Matching of manual format with portal format Step 3- Audit data elements with record Step 4- Auditing some SC records with format data Step 5- Ensure correction on portal by importing off line excel data	Validation committee (MOIC/ARO/HEO/BPM/MCTS operator) at block facility (CMO/ACMO RCH/DARO/DPM/HMIS operator) at district level - Need to share meeting minutes to CMO office/DPMU
7	HMIS data is not being uploaded on UPHMIS portal in Bhangaha CHC on time	Need to ensure uploading of HMIS and UPHMIS offline excel data on UPHMIS portal after validating by 30 th of every month.	BPM/DEO

1. Block: Block CHC Ikauna, **(Date of visit:** 04/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Availability and updating of Training register.	The data was in soft copy, but needed to update in a register which was there.	Mr. Mohammad Azam, BPM	15 th July 2018
2	Improper maintenance of ANC-4 and children full immunization records	Correct report need to be recoded for ANC-4 and full immunization.	BPM/ANM	July 2018
3	Summary of each record in the facility is not properly maintained.	Need to prepare summary of each record as per reporting requirement at the end of reporting period in proper way and reported accordingly.	Concerned person under the supervision of MOIC	From next reporting onwards
4	MCTS number is missing in delivery and ANC registers.	Need to update MCTS weekly	Staff nurse/ANM and MCTS operator under the supervision of MOIC	From next week onwards
5	Data elements of Child health section was available but improper, as required summary is not prepared by doctors.	To ensure daily summary of required elements related to HMIS/UPHMIS in OPD register	Mr. K. K. Singh, Chief Pharm	From next month
6	Role distribution of data elements for data collection is missing	To ensure distribution of data elements of HMIS/UPHMIS formats to concerned persons	MOIC & BPM with concerned in-charge	By 15 th July 2018
7	Validation committee not functional at all.	26 th /27 th of the month was proposed for the validation committee meeting. Need to share meeting minutes to CMO office/DPMU	MOIC/BPM/MC TS operator at block facility	July 2018
8.	Improper JSSK Reporting-most of the data elements were left blank	Need to maintain the record of JSSK related data in a register in coordination with SNs, Ambulance in-charge, Pharm, LT etc.	Pharm/SN/BPM	July 2018

2. Block: Block CHC Bhangaha (Hariharpur Rani Block), (**Date of visit:** 05/07/2018). In this facility the UPHMIS data for the month of May 2018 was not uploaded in the portal before the team's visit, now uploaded all the computed data.

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Non-availability of Training register.	The MOI/c instructed BCPM for making training register.	Mr. Akhilesh Verma, BCPM	15 th July 2018
2	No immunization or ANC services provided at the facility, but given at SC facility in campus	It was suggested that these services should be initiated at the facility itself	MOIC/BPM (Mr. Ashish Pandey)/ANM	July 2018
3	Summary of each record in the facility is not properly maintained.	Need to prepare summary of each record as per reporting requirement at the end of reporting period in proper way and reported accordingly.	Concerned person under the supervision of MOIC	From next reporting onwards
4	MCTS number is missing in delivery and ANC registers.	Need to update MCTS weekly	SN(Sangeeta) /ANM and MCTS operator	From next week
5	Data elements of Child health section not available as required summary is not prepared by doctors.	To ensure daily summary of required elements related to HMIS/UPHMIS in OPD register	BPM/Pharm	From next week
6	Role distribution of data elements for data collection is missing	To ensure distribution of data elements of HMIS/UPHMIS formats to concerned persons	MOIC & BPM with concerned in-charge	By 15 th July 2018
7	Validation committee not functional at all.	26 th /27 th of the month was proposed for the validation committee meeting. Need to share meeting minutes to CMO office/DPMU	MOIC/HEO/BPM /MCTS operator at block facility	July 2018
8.	Improper JSSK Reporting-most of the data elements were left blank	Need to maintain the record of JSSK related data in a register in coordination with SNs, Ambulance in-charge, Pharm, LT etc.	Pharm/SN/BPM	July 2018

3. DHQ: District combined hospital, Sharawasthi (**Date of visit:** 06/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training record of facility staff was available, but not updated.	To prepare training record of facility staff (MO MBBS, MO AYUSH, Staff Nurse & ANMs) to report and update monthly	Dr. Subhash Kateria (HM) & Ms. Seema, Nurse Mentor	From July 18 onwards
2	Record of Hb testing, treatment of severe anemic PW and fully immunization were improper	There should be proper recording of these data and while taking the summary HM and SNs should check the data before finalization.	Hosp Manager /SN/LT	From July 18 onwards
3	No proper record was found for discharge after delivery. All Deliveries were recorded discharged within 48 hrs.	Proper time for discharge after delivery should be recoded and accordingly report should be made	Mr. Usmani and SN	From July 18 onwards
4	Records of drugs and supplies	There should be validation before entering in the portal	Pharm/SN	From July 18 onwards
5	Summary of each record in the facility is missing.	Need to prepare summary of each record as per reporting requirement at the end of reporting period	Each concerned person	From next reporting onwards
6	Arrival of PW and maternal & NB complication data was not computed properly	In Admission/Delivery register summary of each complication either of PW or NB should be recorded properly and fill in the format.	HM/SN/NM	From July 18 onwards
7	Improper JSSK Reporting-most of the data elements were left blank or wrongly reported	Need to maintain the record of JSSK related data in a register in coordination with SNs, Ambulance in-charge, Pharm, LT etc.	Pharm/SN/Mr. Usmani	July 2018
8	Role distribution of data elements for data collection is missing	To ensure distribution of data elements of HMIS/UPHMIS formats to concerned persons	Dr. Subhash Kateria (HM) and Mr. Usmani	By 15 th July 2018
9	Validation committee is not functional.	Need to make it functional (26 th /27 th of each month)	CMS, Hospital Manager and concern record in-charge	July 2018

District- Chitrakoot

Major challenges of data quality identified during data quality audit visit and possible suggestions

Two blocks namely Mau and Pahari and District Combined hospital were visited by the team for data quality audit. There are some major challenges of data quality found during the visit. Major data quality challenges, possible solution and responsible designation are given below in the table.

SN	Issue	Possible solution	Responsible person
1	Training record of facility staff.	Training record is to be maintained in a register and updated on monthly basis so that correct information on training may be filled in monthly UPHMIS facility format.	MOIC/BPM/HM
2	Responsibility of data collection, compilation, validation, and uploading on time	BPM in the blocks and Hospital Manager at DCH has to own responsibility for data quality including timely collection, compilation, validation etc.	HM/BPM
3	Summary on each record in the facility is missing.	Need to prepare a summary of required information at the end of reporting duration.	Each concerned person
4	MCTS number is missing in ANC & delivery registers.	It needs to update MCTS number on ANC & delivery registers daily/weekly.	SN/ANM/MCTS operator
5	Not matching Data of SNCU with portal	All the data including SNCU should be taken from summary as per reporting period (21 st to 20 th)	HM & SNCU staff
6	Role distribution of data elements is missing at the facility.	Need to separate data elements of HMIS/UPHMIS person wise, orient once and ensure reporting on time	MOIC at block and CMS at DH.
7	HMIS data is not being uploaded on UPHMIS portal on time	Need to ensure uploading of HMIS and UPHMIS offline excel data on UPHMIS portal after validating by 30 th of every month.	BPM/DEO
8	Validation committee is not functional.	Need to make it functional and fix a date for the month	MOIC/CMS

1. DHQ: District Combined Hospital (Date of visit: 04/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	No training record of facility staff available.	To prepare training record of facility staff (MO MBBS, MO AYUSH, Staff Nurse & ANMs) to report and update monthly	Dr. Khare, CMS and Ravi, WB	5 Days
2	Stock register not updated	Stock register needs to be update and orient to chief pharmacist.	Mr. Ashok, Chief Pharmacist	15 Days
3	Maternal and child complication data not matched with labor room register i.e. LBW and referral	Need to prepare summary of each record as per reporting requirement at the end of reporting period	Namrata, SN	From next reporting onwards
3	Data elements of Child health section not available as required. Segregation of data (Age and Decease wise) is not prepared by doctors.	To ensure daily summary of required elements related to HMIS/UPHMIS in OPD register.	Dr. Khare, CMS and concerned MO	7 Days
4	SNCU report not matched with uploaded data	Need to prepare summary of each record as per reporting and share with HMIS Operator	SNCU, DEO	From next reporting onwards
5	JSSK record not available	To ensure separate register for pregnant women and new born diagnosis. Diet register should be maintained and update on regular basis.	Namrata, SN	Daily
7	Validation committee is not functional.	Need to make it functional (26 th of each month)	CMS, hospital manager and concern record in-charge	July 2018

2. Block: Block CHC Mau (**Date of visit:** 05/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training register is not available.	A proper register will be maintained and update	Dharmveer-BPM	7 Days
2	No manual UPHMIS filled formats for May and onwards months. Data entry not done.	Need to prepare hard copy first before entry	Dharmveer-BPM	From next time
3	Human resources register not maintain	Attendance register will also update on daily basis with Bio-Matric attendance	Dr. Shekhar MOIC	7 Days
4	JSSK – Transport data (102 or 108) not available	A proper register will be maintained and update	Staff nurse and Sheelnidhi-BCPM	10 Days
5	Data elements of Child health section not available as required. Segregation of data (Age and Decease wise) is not prepared by doctors.	To ensure daily summary of required elements related to HMIS/UPHMIS in OPD register	Concern MO in OPD time	From next week
6	Reporting Format not providing to responsible person and report collection system not in place.	To ensure distribution of HMIS/UPHMIS formats to concerned persons and assigned responsibility.	MOIC & BPM with concerned in-charge	By 15 th July 2018
7	MCTS Operator is not feeding data in portal on regular basis.	Orient the importance of web portal reporting and data. MOiC instructed for data entry	MOIC and MCTS operator	7 Days

3. Block: Block CHC Pahari (**Date of visit:** 05/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Staff training record is being maintained but in paper.	Keep it update in Training register.	MOiC and BPM	Done
2	Data collection system seems good.	MCTS operator gets the report in prescribed format on monthly basis.	BPM and DEO	Doing
3	Data elements of Child health section not available as required. Segregation of data (Age and Decease wise) is not prepared by doctors.	To ensure daily summary of required elements related to HMIS/UPHMIS in OPD register.	Concern MO in OPD time	From next reporting onwards
4	Maternal and Child complication data not matched with sources register	To ensure daily summary of required elements related to HMIS/ UPHMIS in Labor room register.	SN	Immediately
5	Validation committee meeting minutes prepared.	Keep it on regular basis	MOIC/ARO/HEO/BPM/MCTS operator	Doing
6	HRP line listing is not conducting	A proper HRP register should be maintained and follow up	BPM	7 Days

District Fatehpur

Major challenges of data quality identified during data quality audit visit and possible suggestions

Two blocks namely Bithora, Dhata and District Women Hospital were visited by the team for data quality audit. There are some major challenges of data quality found during the visit. Major data quality challenges, possible solution and responsible designation are given below in the table.

SN	Issue	Possible solution	Responsible person
1	Training record and HR record of facility staff.	Training and HR registers are to be prepared and updated regularly so that correct information on training may be filled in monthly UPHMIS facility format.	MOIC//BPM/HM
2	Responsibility of data collection, compilation, validation, and uploading on time	BPM in the blocks and Hospital Manager at DCH has to own responsibility for data quality including timely collection, compilation, validation etc.	HM/BPM
3	Summary on each record in the facility is missing.	Need to prepare a summary of required information including Labor Room, stock, OPD, MCH, FP etc. at the end of reporting duration.	Each concerned person
4	JSSK record not available	To ensure separate register for pregnant women and new born diagnosis. Diet register should be maintained and update on regular basis.	SN/BPM/HM
5	Ambulance services was not present	Guidelines is required to be shared to start ambulance services	DPM
6	Reporting period (21 st to 20 th) not clear	Reporting period (21 st to 20 th) as per GO should be followed to maintain the uniformity and quality	BPM/HM
7	Role distribution of data elements is missing at the facility.	Need to separate data elements of HMIS/UPHMIS person wise, orient once and ensure reporting on time	MOIC at block and CMS at DH.
8	HMIS data is not being uploaded on UPHMIS portal on time	Need to ensure uploading of HMIS and UPHMIS offline excel data on UPHMIS portal after validating by 30 th of every month.	BPM/DEO
9	Validation committee is not functional.	Need to make it functional and fix a date for the month and minutes should be prepared and shared to CMO and DPMU to take some corrective measures	MOIC/CMS

1. Block: Block PHC Bithora (**Date of visit:** 04/07/2018))

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	JSSK, training and compiled format of HMIS/UPHMIS (month of May 2018) is not available	Guide to maintain it properly	ARO	11 th Jul 18
2	Summary of OPD and ANC is not available	Resolved	MOIC	11 th Jul 18
3	Confusion regarding HMIS/UPHMIS reporting like reporting cycle and data element definition	Capacity building and SOP shared.	ARO/BPM/H EO	7 th Aug 18

2. DHQ: District Women Hospital, Fatehpur (**Date of visit:** 05/07/2018))

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	Data element concept is not clear	DHIS SOP shared. In addition, an orientation by DPM for SNs, Phar, LT, ANM atc. should be organized.	DPM/Pharmacist	31 st Jul 18
2	Training register is not available	Prescribed the format of register	HMIS operator	15 th Jul 18
3	Validation committee is not functional.	Need to make it functional and fix a date either 26 th or 27 th of each month and minutes should be prepared and shared to all concerned.	CMS	July month onwards
4	Role distribution of data elements is missing at the facility.	Need to separate data elements of HMIS/UPHMIS person wise, orient once and ensure reporting on time	CMS.	15 th July

3. Block: Block PHC Dhata (**Date of visit:** 06/07/2018))

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	Training and ASHA register is not available	Guide to maintain it properly	BPM	15 th Jul 18
2	Reporting cycle is not clear	Clear the doubt	ARO	15 th Jul 18
3	Data element definition is not clear	SOP (DHIS) is shared	ARO	15 th Jul 18

District- Chandauli

Major challenges of data quality identified during data quality audit visit and possible suggestions

Two blocks namely Sakaldeeha, Barhani and District Combined Hospital were visited by the team for data quality audit. There are some major challenges of data quality found during the visit. Major data quality challenges, possible solution and responsible designation are given below in the table.

SN	Issue	Possible solution	Responsible person
1	Training record and HR record of facility staff.	Training and HR registers are to be prepared updated on regular basis so that correct information on training may be filled in monthly UPHMIS facility format.	MOIC//BPM/HM
2	Responsibility of data collection, compilation, validation, and uploading on time	BPM in the blocks and Hospital Manager at DCH has to own responsibility for data quality including timely collection, compilation, validation etc.	HM/BPM
3	Summary on each record in the facility is missing.	Need to prepare a summary of required information including Labor Room, stock, OPD, MCH, FP etc. at the end of reporting duration.	SN/Pharm/BPM/HM
4	Source register for JSSK records was not found	Source register for JSSK for each elements has to be updated and concern register has to be prepared at the earliest	BPM/MOIC
5	Data elements of Child health (OPD and IPD cases) on portal has updated but not available as a source register of Child health.	Source register to be designed to record the child health information or to Maintain a summary of OPD and IPD on daily and Monthly basis. Summary on daily and monthly basis has to be prepared.	MOIC
6	Role distribution of data elements at the facility.	Need to separate data elements of HMIS/UPHMIS person wise, orient and ensure reporting on time.	MOIC at block and CMS at DH.
7	Excel Import of HMIS data on UPHMIS portal has not been done in many facilities as a result data audit of HMIS data elements on portal with source documents has not been done.	BPM and DEO should own the responsibility to import the HMIS data on UPHMIS portal of every month. The MOIC should monitor the same.	MOIC/BMP and DEO
8	Validation committee is not functional.	Need to make it functional and fix a date in the month and minutes should be prepared and shared to all concerned to take some corrective measures.	MOIC/CMS/DPM

1. Block: Block CHC Sakaldeeha (**Date of visit:** 05/07/2018)

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	Attendance Register was not updated	It has suggested to update HR attendance on daily basis	MoIC	Every day
2	Training record for all block officials was not found	A format has given from UPTSU for preparing training register and suggested it to update on regular basis	BCEP/BCEP	31 st July 18
3	Mismatch was found in ASHA approved as per PIP and source documents and ASHA training record for induction module and Module 6 & 7 round 4 was not available	Training register has to be prepared and regular update has to be done.	BCEP/MOIC	31 st July 18
4	Stock Register was not available with MOIC and it was kept locked in pharmacist personal Amirah, as a result data audit was not done	It has suggested keep the record updated all the time.	Pharmacist and MOIC	31 st July 18
5	Excel Import of HMIS data has not done of May Month on UPHMIS portal, as a result data audit of HMIS data elements on portal with source documents has not done.	It has instructed to BCEP and DEO to import the HMIS data of all months timely including May 2018 immediately on UPHMIS portal.	MOIC/BCEP and DEO	31 st July 18
6	Data elements of Child health (OPD and IPD cases) on portal has updated but not available as a source register of Child health. Summary on daily and monthly basis was also not found.	Source register to be designed to record the child health information or to Maintain a summary of OPD and IPD on daily and Monthly basis.	MoIC	31 st July 18
7	Source register for JSSK records like diagnosis services and IFT services for pregnant women and for newborn health was not found	Source register for JSSK for each elements has to be updated and concern register has to be prepared as earliest	BCEP/MOIC	31 st July 18
8	Review mechanism is not proper by MOIC and Block staff	MOIC to ensure to conduct monthly review meeting and validation committee meeting based on critical data elements	MO I/c	31 st July 18
9	Summary of Services not recorded in any register including, ANC Delivery, OPD registers	Every staff including Staff nurse have oriented to maintain summary every day	SN/BCEP/MOIC	31 st July 18

2. Block: Block PHC Barhani (**Date of visit:** 05/07/2018)

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	Attendance Register was not updated	It has Suggested to update HR attendance on daily basis	MOIC	Every day
2	Training record for all block officials was not found	A format has given from UPTSU for preparing Training register and suggested it to update on regular basis	BCPM/BPM	31 st July 18
3	Mismatch was found in ASHA Sangini approved in block, ASHA filled against approved and Source documents for Asha training for induction module and Module 6 & 7 round 1-2 was not available	ASHA related information has to be updated and Training register has to be prepared and regular updation has to be done.	BCPM/MOIC	31 st July 18
4	Stock Register was not updated by Pharmacist	It has suggested keep the record updated all the time.	Pharmacist and MOIC	31 st July 18
5	Excel Import of HMIS data has not done of last 5 Months on UPHMIS portal, as a result data audit of HMIS data elements on portal with source documents has not done.	It has instructed to BPM and DEO to import the HMIS data of last 5 months immediately on UPHMIS portal.	MOIC/BMP and DEO	31 st July 18
6	Data of Child health was not maintained properly as a source register of Child health	In source registers of OPD and IPD, child health data has to be mentioned along with summary on daily basis and monthly basis	MOIC	31 st July 18
7	No source register for JSSK Records found like Diagnosis services, IFT and drop back for Pregnant women and for newborn health	Source register for JSSK for each elements has to be updated	BPM/MOIC	31 st July 18
8	No review mechanism followed by MOIC and Block staff	MOIC to ensure to conduct monthly review meeting and validation committee meeting based on critical data elements	MOIC	31 st July 18
9	Summary of Services not recorded in any register including, ANC Delivery, OPD registers	Every staff including Staff nurse have oriented to maintain summary every day	SN/BPM/MOIC	31 st July 18

3. DHQ PT KPT District Combine Hospital – Chandauli (Date of visit: 06/07/2018)

S. No.	Identified Issue	Action Plan	Responsibility	Timeline
1	Training register not maintained	Training register to be made during the visit in given format through DPMU	CMS	31 July 2018
2	In JSSK, drugs and consumables for newborn, IFT for newborns, and Drop back for newborn register was not available.	Proper counting of beneficiaries from source register and data to be filled in portal after crosschecking. Register for each elements has to be prepared and updated on daily and monthly basis by preparing a summary.	CMS Operator/SN/CLERK	Every month
3	Validation committee meetings is not functional and its monthly meetings to validate the data is not happening at DCH	CMS was not informed regarding this. CMS has suggested to conduct Validation committee meeting every month and HMIS operator to visit DH frequently	CMS/HMIS Operator/DPM	Every month

District- Sonbhadra

Major challenges of data quality identified during data quality audit visit and possible suggestions

Two blocks namely Ghorawal, Nagwa and District Combined Hospital were visited by the team for data quality audit. There are some major challenges of data quality found during the visit. Major data quality challenges, possible solution and responsible designation are given below in the table.

SN	Issue	Possible solution	Responsible person
1	Record of training not available for facility and field staffs (ASHAs)	A register for training of facility and field staff has to be prepared at all block facilities and DH.	CMS/BPM/BCPM
2	Referral out register is not maintaining properly	Oriented on status of reporting of referred patients on critical columns of register. Regular monitoring is required to be done by MOIC	SNs/BPM
3	Summary on each record in the facility is missing.	Need to prepare a summary of required information including Labor Room, stock, OPD, MCH, FP etc. at the end of reporting duration.	SN/Pharm/BPM/HM
4	JSSK Data is not being capturing properly at DWH and also not updation by concerned SNs	Need to assign the role for data collection for Diet, 102, 108 services, diagnostic etc.	Duty SNs on roaster wise and monitored by RSK Manager
5	Data elements of Child health (OPD and IPD cases) on portal has updated but not available as a source register of Child health.	Source register to be designed to record the child health information or to Maintain a summary of OPD and IPD on daily and Monthly basis. Summary on daily and monthly basis has to be prepared.	MOIC
6	Role distribution of data elements at the facility.	Need to separate data elements of HMIS/UPHMIS person wise, orient and ensure reporting on time.	MOIC/CMS at DH.
7	Validation committee is not functional.	Need to make it functional and fix a date in the month and minutes should be prepared and shared to all concerned to take some corrective measures.	MOIC/CMS/DPM

1. Block : Block CHC Ghorawal (**Date of visit:** 04/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsible person	Timeline
1	Record of training not available for facility and filed staffs (ASHAs)	Prepared onsite register for facility staffs and also facilitated for ASHA training register with BCPM	BCPM and BPM	Done
2	Referral out register is not maintaining properly	Briefed and oriented on status reporting of referred patients on critical columns of register	Duty SNs with Support of Nurse Mentor	Ongoing and regular
3	Manual Summary of Maternal and child complications in delivery register	Oriented and briefed about pasting of reporting format at last day(20 th) of reporting month	Duty SNs with Support of Nurse Mentor in regular supervision of MOIC	Ongoing and regular
4	Data elements of Child health section is not segregated by doctors OPD registers	Briefed for summarization on daily basis related to HMIS/UPHMIS in OPD register	BPM & BCPM and Concerned MO of OPD	Ongoing and regular
5	No any assignment of role and responsibility for collection of UPHMIS/HMIS Reports except Drugs and Availability	Assigned section wise role for Better data Collection and Validation and counter sign on particular section	Duty SNs, Pharmacist, IO, BPM, BCPM, MOIC and 2 nd MOs Deputed for OPD Only	Ongoing and regular
6	Role distribution of data elements for data collection is missing	To ensure distribution of data elements of HMIS/UPHMIS formats to concerned persons	MOIC & BPM with concerned in-charge	Ongoing and regular
7	Validation committee not functional.	Fixed date for Validation Meeting and the compliance(Minutes & Photograph) should be submitted to CMO & DPMU	MOIC, 2 nd MO, BPM & BCPM	July 2018

2. Block : Block CHC Nagwa (**Date of visit:** 05/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsible person	Timeline
1	Record of training not available for facility and filed staffs (ASHAs)	Prepared onsite register for facility staffs and also facilitated for ASHA training register with BCPM	Om Prakash (BPM) & Hans raj (BCPM)	7 Days
2	Data elements of Child health section is not segregated by doctors OPD registers	Briefed for summarization on daily basis related to HMIS/UPHMIS in OPD register	BPM & BCPM and Concerned MO of OPD	Ongoing and regular
3	No any assignment of role and responsibility for collection of UPHMIS/HMIS Reports except Drugs and Availability	Assigned section wise role for Better data Collection and Validation and counter sign on particular section	Duty SNs, Pharmacist, IO, BPM, BCPM, MOIC and 2 nd MOs Deputed for OPD Only	Ongoing and regular
4	Summary of Maternal and child complications in delivery register is maintaining properly	Oriented and briefed about pasting of reporting format at last day(20 th) of reporting month	Duty SNs with Support of Nurse Mentor in regular supervision of MOIC	Ongoing and regular
5	Validation committee not Active and Functional.	Fixed date for Validation Meeting and the compliance(Minutes & Photograph) should be submitted to CMO & DPMU	MOIC, 2 nd MOs, BPM & BCPM	July 2018
6	Referral out register is not maintaining properly	Briefed and oriented on status reporting of referred patients on critical columns of register	Duty SNs with Support of Nurse Mentor	Ongoing and regular

3. DHQ : District Combined Hospital-Robertsganj (Date of visit: 06/07/2018)

S. No	Identified Issue	Action Plan/Taken	Responsible person	Timeline
1	Only one person is responsible for whole reporting UPHMIS/HMIS	As per availability assigned role to 2 RSK Staffs (1 Operator & 1 Manager) and Pharmacist	RSK Operator, RSK Manager and Pharmacist	Regular
2	Data elements of Child health section is segregated by doctors in OPD but not collecting by any deputed staffs	Briefed for summarization and follows up on 15 Days and collected data should be punched in HMIS & UPHMIS reporting	RSK Operator, RSK Manager	Ongoing and regular
3	Record of training not available for facility Staffs	Briefed for preparation of training record and deputed for regular update	RSK Operator, RSK Manager	3 Days and on Regular Basis
4	No any assignment of role and responsibility for collection of UPHMIS/ HMIS Reports except Drugs and Availability	Assigned section wise role for Better data Collection and Validation and counter sign on particular section	CMS, RSK Operator, RSK Manager,	Ongoing and Regular
5	JSSK Data not capturing properly and also not update by concerned SNs	Assigned and briefed the role for Data collection for Diet, 102, 108	Duty SNs on roaster wise and monitored by RSK Manager	Ongoing and regular
6	Vaccine and some logistics information were not capturing by DCH due to unavailability of COLD chain and desired unit of Drugs	Channelized the person for reporting and recording for said missing records	Sumit, RSK Operator and RSK Manager	Ongoing and regular
7	48 Hours Stay is wrongly captured by Duty SNs they were only collecting LAMA Patients	Briefed about the Patients not staying 48 Hours should be counted in this section and also briefed for collection and compilation	Duty SNs and Sumit	Ongoing and Regular
8	Validation meetings not happening	Assigned role for Conducting validation meeting before data Update	Dharmesh, PB Gautam (CMS), RSK Manager, Sumit & RSK Operator	Ongoing and Regular