

Data (UPHMIS/HMIS) Quality Audit Report (4th Round),
30th Oct to 1st Nov 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 No. SPMU/NHM/M&E/25, dated 27th Oct 2018 for the improvement of data quality of HMIS/UPHMIS, data quality audit team were constituted comprising of members from DGMH, DGFW, NHM and TSU.

All the members of the team were oriented on data element definitions and methodology to conduct a data quality audit on 29th Oct 2018, and feedback of last audit visits were shared. In this 4th round 7 districts in Uttar Pradesh were identified for data audit. Further, one poor and one good performing blocks along with district combined hospital or District Women Hospital were selected for the visit. The team visited from 30th to 1st Nov 2018 to conduct the data quality audit in the district (details in Table 1).

The report provides brief findings of the visit and facility level action plan developed for each of the visited facilities for further improvement of data quality.

Table 1: Data Quality Audit Team

Team	Members Name	Department	Visiting District
Team 1	Dr. Rajesh Kumar, JD	DGMH	Gautam Buddha Nagar
	Dr. Rais Ahmed, Consultant-Maternal Health	NHM	
	Mr. DK Srivastava, (ARO, D&E cell)	DGFW	
	Mr. Nazir Haider, M&E Specialist	UPTSU	
Team 2	Dr. Ashwini Garg, (ADRO, D&E cell)	DGFW	Kanpur Nagar
	Mr. Kaushal Singh Bisht	NHM	
	Mr. Rajan Prasad, Div. Program Manager	NHM	
	Dr. Benson Thomas, M&E Specialist	UPTSU	
Team 3	Dr. Manju Rani, JD RCH	DGFW	Allahabad
	Mr. Azam Khan, M&E Officer - CP	NHM	
	Mr. Harit Saxena, Div. Program Manager	NHM	
	Akshay Gupta, M&E Specialist	UPTSU	
Team 4	Mr. Yogesh Kumar	DGFW	Faizabad
	Mr. D. Deonath, Div. Program Manager	NHM	
	Ms. Neelima Pathak, (Const-Blood-NCD)	NHM	
	Ms. Manu Sharma	UPTSU	
Team 5	Mr. Jamal Ahmad, PC-Training	NHM	Kannauj
	Mr. Dinesh Pal, PC-EMTS	NHM	
	Mr. Tukshar Bhawe, M&E Specialist	UPTSU	
Team 6	Mr. Saran Srivastava, ARO	DGFW	Ghazipur
	Mr. Arvind Srivastava, Div. PM- Varanasi	NHM	
	Mr. Manish Kumar Soni, Consultant, FP	NHM	
	Dr Prahlad Kumar	UPTSU	
Team 7	Dr. SVP Pankaz, DGM-M&E	NHM	Mahrajani
	Mr. Virendra Pratap (ARO, D&E cell)	DGFW	
	Mr. Arvind Pandey, Div PM, Gorakhpur	NHM	
	Dr. Shiva Nand Chauhan, M&E Specialist	UPTSU	

- Each team visited 2 block facilities and 1 district hospital. In total, 21 facilities were visited (14 block facilities, 7 district hospitals)
- The table 2 below is summarizing the initial analysis based on the checklist filled during data quality audit

Table 2: Summary of 4th round Data Quality Audit

Data Element	% of Blank	% of Matched	% of Over Reported	% of Under Reported	% of Source document not available
HR	11	73	6	9	0
Training	13	44	3	6	35
Drugs and Supply	16	56	11	15	2
Maternal Health/FP	21	54	7	10	7
Child Health	24	29	1	6	39
JSSK program	24	19	5	11	41
Highlighted if	> 20 %	< 50 %	> 10 %	> 10 %	> 20 %

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	Allahabad	39	49	2	6	4
2	Faizabad	1	45	10	11	34
3	Gautam Buddha Nagar	14	65	6	7	9
4	Ghazipur	15	40	3	13	29
5	Kannauj	3	78	5	12	2
6	Kanpur Nagar	35	29	10	10	16
7	Maharajganj	17	44	8	13	19
Highlighted if		> 20 %	< 50 %	> 10 %	> 10 %	> 20 %

- **% 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.

1- District- Gautam Budhha Nagar

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

Two blocks namely Bishrakh BPCH, Dadha CHC (Dankaur block) and District Combined Hospital (DCH) 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 not available in any of the visited facilities.	-Training record has to be maintained and updated in coordination with Hospital Manager, Computer operator and SNs in DCH Noida. -In blocks these records are to be maintained in a register with the help of HEO/BPM/SNs and ARO. -To prepare training record of facility staff (MO MBBS, MO AYUSH, Staff Nurse & ANMs/LHV) a separate register has to be made updated it monthly so that correct information on training may be filled in monthly UPHMIS facility format.	MOIC//BPM/BCP M/HEO/HM/NM
2	Responsibility of data collection, compilation, validation, and uploading on time	In the district no AROs & BPM and Hospital Manager at DCH has to own responsibility for data quality including timely collection, compilation, validation etc.	HM/BPM/ARO
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	Old type Delivery Register is being used at DCH	-It was talked with DPM and CMO in the meeting that the new version of delivery register should be introduced in DCH so that data on complications of mother & NB are taken and also other data can be captured.	DPM/HM/SN
5	Clarification of data elements is missing at the facility.	-Need an orientation of all concerned staff at blocks/facility and DCH.	MOIC at block and HM at DCH.
6	Not capturing JSSK data	-A register is required to be made and data elements required as per format must be recorded in coordination with pharmacist, LT, SNs/ANMs. HM in DCH and BPM in block has to be given responsibility.	HM/BPM
7	Online data uploading	-In most of the facilities HMIS/UPHMIS data is uploading online resulting discrepancies in data of previous months. In this regard it was suggested to prepare offline data of each facility and then can excel imported.	DPM/BPM/DEO
8	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	Validation committee (MOIC/ARO/HEO/BPM/MCTS operator) at block facility (CMO/ACMO RCH/DARO/DPM

SN	Issue	Possible solution	Responsible person
		Step 5- Ensure correction on portal by importing off line excel data	/HMIS operator) at district level - Need to share meeting minutes to CMO office/DPMU

1. Block PHC Bishrakh, GB Nagar (Date of visit: 30/10/2018):- In this block lack of coordination among staff like, BPM, ARO, Pharm, HEO was found. The whole burden was with DEO but he has his limited understanding, hence BPM/ARO has to take lead role under the supervision of MOI/c for proper timely data collection, compilation and uploading.

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Maintaining and updating of Training register.	The data of ASHA training was in soft copy but not of other staff, needed to update in a register for all.	ARO/HEO	1 st Nov 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	20 th Nov 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	Data elements filled in format was left blank and also uploaded blank	It was suggested to give orientation to all staff concerned for reporting to fill all the formats properly and should be checked by ARO/BMO under the supervision of MOI/c	MOI/c & BPM	30 th Nov 2018
5	Data elements of Child health section was not available at all.	To ensure daily summary of required elements related to HMIS/UPHMIS in OPD total and also for children up to 5 yrs by doctors on daily basis and then compiled by the pharmacist. BPM must ensure the same. Details of medicine given to children for diarrhea and pneumonia should be mentioned and entered in portal.	MOI/c, BPM & 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 & ARO/BPM with concerned in-charge	By 15 th Nov 2018

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Maintaining and updating of Training register.	The data of ASHA training was in soft copy but not of other staff, needed to update in a register for all.	ARO/HEO	1 st Nov 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	20 th Nov 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/MCTS operator at block facility	30 th Nov 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	20 th Nov 2018

2. CHC Dadha (Block-Dankaur), GB Nagar (Date of visit: 31/10/2018). This facility falls under Dankaur block but data entry of this facility is done at that very place. The Dental Hygienist has been given the responsibility for data management, but he has very limited knowledge about the HMIS/UPHMIS data elements and he has not received any training so far. The BPM and ARO of the block are not providing required attention and support.

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Maintaining and updating of Training register.	A separate register of training was made on the day of visit and suggested them to update.	Dental Hyg/SN	7 th Nov 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/Dental Hyg	20 th Nov 2018
3	Summary of each record in the facility is not properly maintained.	Summary in Delivery register was made but not of all data elements as required in HMIS/ UPHMIS. But summary need to be prepared for all including ANC, Lab test, immunization etc.	Dental Hyg/SN/ANM /ARO	From next reporting onwards
4	Data elements not filled blank in format but incorrect	It was suggested to give orientation to all staff concerned for reporting to fill all the formats properly and should be checked by ARO/BMO under the supervision of MOI/c	MOI/c & BPM	30 th Nov 2018
5	Data elements of Child health section was incomplete.	To ensure daily summary of required elements related to HMIS/UPHMIS in OPD total and also for children up to 5 yrs by doctors on daily basis and then compiled by the pharmacist. BPM must ensure the same. Details of	MOI/c, BPM & Pharm	From next month

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Maintaining and updating of Training register.	A separate register of training was made on the day of visit and suggested them to update.	Dental Hyg/SN	7 th Nov 2018
2	Improper maintenance of ANC-4 and children full immunization records	Correct report need to be recoded for ANC-4 and full immunization. medicine given to children for diarrhea and pneumonia should be mentioned and entered in portal.	BPM/ANM/ Dental Hyg	20 th Nov 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 & ARO/BPM with concerned in-charge	By 15 th Nov 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/ MCTS operator at block facility	30 th Nov 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/BP M	20 th Nov 2018

3. District Combined Hospital, Noida (Date of visit: 01/11/2018):- This facility combined hospital for both male and female. Hospital Magar is in place but data is being managed by 2 data entry operators resulting many data elements left blank or zero in spite of services are available and provided. In the Labor Room maternity register was being used as delivery register. No new delivery register has been introduced so far due to this record of many data elements like maternal and NB complications were missing.

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training register was not available.	A separate register of training was made on the day of visit and suggested them to update.	Hospital Manager/DEO	7 th Nov 2018
2	Training on HMIS/UPHMIS of HM, SN, Pharm, DEO, LT etc.	It was suggested to organize a training of all concerned staff	DPM/DARO/ HM	30 th Nov 2018u
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	Each concerned person	From next reporting onwards
4	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	From Nov 18 onwards

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training register was not available.	A separate register of training was made on the day of visit and suggested them to update.	Hospital Manager/DEO	7 th Nov 2018
2	Training on HMIS/UPHMIS of HM, SN, Pharm, DEO, LT etc.	It was suggested to organize a training of all concerned staff	DPM/DARO/HM	30 th Nov 2018u
5	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, Nutritionist, LT etc.	Pharm/SN/Nutritionist	From Nov 18 onwards
6	Role distribution of data elements for data collection is missing	To ensure distribution of data elements of HMIS/UPHMIS formats to concerned persons	Hospital Manager/Pharmacist/DEO	From Nov 18 onwards
7	Validation committee is not functional.	Need to make it functional (26 th /27 th of each month)	Hospital Manager and concern record keeping in-charge	From Nov 18 onwards

2- Kanpur Nagar

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

Two blocks namely Bheetargaon BCHC, Kalyanpur BCHC and District Women Hospital (DWH) 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 not available in any of the visited facilities.	Training record has to be maintained and updated in coordination with Hospital Manager, Computer operator and SNs in DWH.	MOIC//BPM/BCPM/HEO/HM/NM
2	System of data collection, compilation, validation, and uploading on time	In the district no AROs & BPM and Hospital Manager at DCH h[as to own responsibility for data quality including timely collection, compilation, validation etc.	HM/BPM/ARO
3	Clarification of data elements.	-Need an orientation of all concerned staff at blocks/facility and DCH.	MOIC at block and HM at DWH.
4	Not capturing JSSK data	-A register is required to be made and data elements required as per format must be recorded in coordination with pharmacist, LT, SNs/ANMs. HM in DCH and BPM in block has to be given responsibility.	HM/BPM
5	Validation committee not functional at all	Need to fix a certain date and all the concerned must be part of the meeting to validate the data at the spot and required corrections could be made	Validation committee (MOIC/ARO/HEO/BPM/M CTS operator) at block facility (CMO/ACMO RCH/DARO/DPM/HMIS operator) at district level

1. District Women Hospital (DWH), Kanpur Nagar (Date of visit: 30/10/2018):-

S.no	Identified issues	Action Planned	Person responsible	Timeline
1	Non-availability of HMIS id and password to Superintend In-Charge (SIC) and data entry operator	Provided user id and password to SIC from district HMIS operator	NA	NA
2	Unavailability of register such as Training and JSSK etc.	Asked to develop proper register for training and JSSK	Hosp. Manager /Prg. Coord	15 th Nov 2018
3	Lack of understanding regarding data elements	Explained data elements in detail	NA	NA
4.	System for report collection is missing	Explained to develop a system by involving all departments for data collection and monthly reports	SIC/Chief Phar./DEO	30 th Nov 2018
5.	Validation committee meeting is not being held	Explained the importance of data validation and requested for regular monthly meeting	SIC/Hospital Manager	30 th Nov 2018
6.	HMIS data is not uploaded in UPHMIS portal for all months	Demonstrated how to upload the HMIS data on UPHMIS portal	NA	NA

2. Block CHC Bheetargaon, Kanpur Nagar (Date of visit: 31/10/2018):-

S.no	Identified issues	Action Planned	Person responsible	Timeline
1	MCTS operator attached with CMO office, which makes delay in data management	Asked MOIC to revert MCTS operator to CHC	CMO/MS	15 th Nov 2018
2	BPM is not regular at CHC	Suggested MOIC to analyses the performance of BPM and do the needful	MS	15 th Nov 2018
3	Data validation committee is not functional	Asked to hold regular validation committee meeting	HEO/BPM/MS	30 th Nov 2018
4.	OPD register is not being classified and analyzed (age)	Suggested to analyses OPD register on daily basis and make appropriate summary on the same	Concerned doctors	8 th Nov 2018
5.	Staff training register is not maintained	Asked to maintain staffs' training register	MS/SN	15 th Nov 2018
6.	Poor understanding about HMIS/UPHMIS formats	Oriented format to concerned	NA	NA
7	Daily consumption of drugs (JSSK) record not available	Advised to maintain proper registers for JSSK	Pharmacist	8 th Nov 2018
8	102/108 records not maintained	Asked to maintain proper registers for 102 and 108 transport services	EMT/EMO/SN	8 th Nov 2018

3. Block CHC Kalyanpur, Kanpur Nagar (Date of visit: 1/11/2018):-

S.no	Identified issues	Action Planned	Person responsible	Timeline
1	Proper source register not available for training, JSSK and child health	Asked to make proper register for training, JSSK and child health	MOIC/Pharmacist	15 th Nov 2018
2	Poor understanding about UPHMIS/HMIS format	Oriented HMIS/UPHMIS format for the concerned	BPM	15 th Nov 2018
3	BPM is not compiling/verifying UPHMIS/HMIS data/reports monthly	Asked BPM to compile/verify UPHMIS/HMIS data/reports monthly	BPM	30 th Nov 2018
4	Data validation is not happening in proper way	Suggested to hold regular meeting for data collection	MOIC/BPM	30 th Nov 2018
5	Manual reporting of data	Asked to stop manual reporting of data	ARO	15 th Nov 2018

3-District- Allahabad

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

Two blocks namely Holagarh and Jasra 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	Child Health OPD for under 5 children were not found uniformly in all three facilities	Summary has to be made by Doctor on each day regarding recording of Under 5 children which included total Patients seen in bifurcation of Male and Female similarly diarrhea and ARI cases must be reported in OPD summary	Doctors/MOIC/BPM/Hospital manager/ARO
2	JSSK Records were not recorded properly and could not be verified.	Summary register to be maintained for JSSK records. Diet register has to make in proper manner so that records are easily available. Nodal for reporting JSSK reports has to be identified and he/she will be responsible for that.	Staff Nurse/ BPM/MOIC/ARO
3	Validation committee meeting minutes were not in detail	Each and every important data element reported should be reported properly. Validation committee should ensure mistakes are cleared.	MOIC/BPM/ARO/MCTS Operator
4	ANC and 4 ANC records were not found in all the facilities.	4 ANC register to be maintained in future. Marking of 4 ANC is essential as it has to be reported in HMIS. All nodals were instructed to maintain and check the register for proper reporting.	ARO/Doctors/BPM

1. Block CHC Holagarh, Allahabad (Date of visit: 30/10/2018):-

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training register was not available	Training register was made on the spot and updated the training status of all the staff. BPM was given responsibility for regular updating of register.	Ahustosh – BPM	Done
2	PHC Holagarh data was reported in SC format.	MOIC instructed the Staff to correct the mistakes and make new formats for April – 2018 to October 2018 and report the same in PHC format.	ARO	30 th Nov 18
3	Mismatch in Format reporting and actual register reporting was found in some of the data elements in drugs and logistics	MCTS operator was instructed to carefully enter the data on portal. And before entering the data he has to ensure checking of format by ARO and MOIC	MCTS Operator /BPM	8 th Nov 18
4	JSSK register for September month was not found.	MOIC instructed to make new register and update the data for	MOIC /BPM	30 th Nov 18

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training register was not available	Training register was made on the spot and updated the training status of all the staff. BPM was given responsibility for regular updating of register.	Ahustosh – BPM	Done
2	PHC Holagarh data was reported in SC format.	MOIC instructed the Staff to correct the mistakes and make new formats for April – 2018 to October 2018 and report the same in PHC format.	ARO	30 th Nov 18
		September month and upload the same on portal after correction.		
5	Child health data for OPD not found as source document was not available.	Summary to be made at the end of the day	BPM/Ashutosh	15 th Nov 18
6	HRP register does not have paging and seal of MOIC	Paging and seal done on the spot and staff nurse was made nodal for the same.	ARO/BPM/SN	Done

2. Block: CHC Jasra , Allahabad (Date of visit: 31/10/2018:-)

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Format for UPHMIS in September was not uploaded and only 3 % of format was filled	Corrections were done and updated sheet was uploaded on portal	MCTS Operator	Done
2	Validation committee meeting not held properly	Process was discussed of validation committee and it was instructed that process should be followed every time	BPM/MOIC/ARO/MCTS Operator	30 th Nov 18
3	Child health OPD reporting is not available	Summary to be made on daily basis	MOIC/Medical Officer	15 th Nov 18
4	102-108 register and record were not made proper. Also register were kept by ambulance drive	MOIC was asked to check the register on daily basis. Staff nurse to be made nodal for receiving and taking patients to home. Signature to be ensured in the register	MOIC/Staff nurse	30 th Nov 18

3. DHQ: District Women Hospital, Allahabad (Date of visit: 1/11/2018):-

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Death in SNCU was not reported in HMIS.	Data was verified and corrections were made in register as well as portal. And reporting done on the same day. It was discussed that SNCU operator will check the data with Hospital manager before reporting	Hospital Manager and SNCU operator	30 th Nov 18
2	Maternal and child health complication were not reported in September due to lack of coordination between staff	Nurse mentor will help in counting the complications along with Staff nurse and complications has to be reported after SIC mam signature	Hospital Manager/SN/NM/SIC	30 th Nov 18
3	JSSK records were not found in proper way	Register to be made for diet and drugs and consumables and other data elements in JSSK reports.	Upadhyay (Senior Clerk)/HM/SIC	30 th Nov 18
4	Validation committee meeting not happening in district hospital	Validation committee to be formed and regular meeting to be held from next month. TSU can provide handhold support for first 3 months as technical support.	Hospital manager	30 th Nov 18
5	ANC Records Not found	4 ANC to be recorded in separate register	SN/NM/Hospital manager/SIC	30 th Nov 18

4- District - Faizabad

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

Two blocks namely Poora Bazar and Milkipur 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 of facility staff not 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	Summary sheet on each record in the facility is missing.	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
3	MCTS number is missing in ANC & delivery registers.	It needs to update MCTS number on ANC & delivery registers daily/weekly.	MCTS operator
4	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
5	Reference source for most of the data elements (ANC, Delivery and 48 hrs. stay) are not available at the facility	Records should be maintained for all the data elements of UPHMIS	Staff Nurse/BPM
6	The 102 and 108 registers are abruptly maintained at the facility registers and no one is fully 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
7	OPD (U-5) data including treatment for Diarrhea and Pneumonia are not available in segregated way.	It will be easy of a compartmented register should be maintained at the facility level for better to count of diarrhea and pneumonia cases arrived at the facility.	Pharmacist

1. Block CHC Poora Bazar, Faizabad (Date of visit: 30/10/2018):-

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training register is not available.	Need to be prepared	MOIC//BPM/BCPM /HEO	From next time
2	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
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	From next reporting onwards
4	OPD (U-5) data including treatment for Diarrhea and Pneumonia are not available in segregated way.	It will be easy if a compartmented register should be maintained at the facility level for better to count of diarrhea and pneumonia cases arrived at the facility.	Pharmacist	From next reporting onwards
5	The Data element of JSSK (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	From next reporting onwards
6	Focus on Validation committee meetings	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	From Nov,2018

2. Block CHC Milkipur, Faizabad (Date of visit: 31/10/2018):-

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training register is not available.	Need to be prepared	MOIC//BPM/BC PM/HEO	From next time
2	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
3.	48 Hours Stay is wrongly captured at CHC Milkipur by Duty SNs.	Patients not staying 48 Hours should be counted in this section and also briefed for collection and compilation.	Duty SNs	From Nov, 2018
4	OPD (U-5) data including treatment for Diarrhea and Pneumonia are not available in segregated way.	It will be easy if a compartmented register should be maintained at the facility level for better to count of diarrhea and pneumonia cases arrived at the facility.	Pharmacist	From next reporting onwards
5.	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.	MO / ANM	From next reporting onwards
6	The Data element of JSSK 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	From next reporting onwards
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/HEO/BPM/MCTS operator at block facility	From next reporting onwards

3. DHQ: District women Hospital, Faizabad (Date of visit: 01/11/2018):-

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	The Data element of JSSK for (Drugs and consumable and Drop back registers) are not properly 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.	Pharmacist	From Nov, 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.	ANM/LMO	From Nov, 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.	MO / ANM	From Nov, 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	SN/FP counsellor	From Nov, 2018
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	From Nov, 2018
6	Data Validation meeting are not held regularly at DWH	Data validation meeting should be held every month for validation of the data filled at the portal	CMS/BPM	From Nov, 2018

5- District- Kannauj

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

Two blocks namely Tirwa BChC (Umarada block), Gurgapur CHC and District Combined Hospital (DCH) 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 was Available, but not updated regularly	As new meetings and training are conducted or new staff joins and old staff gets transferred, training register should be updated based on the current month situation	BPM
2	Responsibility of data collection, compilation, validation, and uploading on time	In the district no AROs & BPM and Hospital Manager at DCH has to own responsibility for data quality including timely collection, compilation, validation etc.	HM/BPM/ARO
3	ANC record could not be audited as proper source document (ANC register) are not being filled properly. Hence No. of PW visited for 4 or more ANC could not be checked	CMS assigns an ANM to support LMO in proper filling of ANC register We provided on site capacity building of ANC/LMO on different section of the ANC register	ANM/LMO
4	LR register was not filled as per GOI guideline	Onsite capacity building of SN of different element of the filling LR register	SN/BPM
5	Clarification of some data elements is missing at the facility at staff	Need an orientation of all concerned staff at blocks/facility and DCH.	MOIC at block and HM at DCH.
6	Equipment like Bag & Mask, Sterile cord cutting equipment are not filled as it was not available in the stock	Oriented BPM/ARO to fill the data as available if it is available in the Labour Room	SN/BPM
7	All the check-up that should happened in ANC was not mentioned in the ANC register	SN with the help of LT must enter all the data i.e. Hb of all PW in the ANC register	SN/LT
5	Total death & admission of NB at SNCU was wrongly filled, due to the confusion to show death of NB in SNCU or LR	Clarified the doubt of SN and SNCU that if the NB has been admitted into the SNCU then death will be shown in death at SNCU otherwise into the LR	SN/MO

1. Block CHC Tirwa, Kannauj (Date of visit: 30/10/2018):-

S. No	Identified Issue	Action Plan/Taken	Responsible person	Timeline
1	Record of training was Available, but not updated regularly	As new meetings and training are conducted or new staff joins and old staff gets transferred, training register should be updated based on the current month situation	BPM	Done

2	It was found the few ASHA area was still vacant. Asha Approved is 299 but functional is 269 only	New ASHA selection has to be done	BCPM	31st Dec 18
3	Proper ANC register(as per GOI guideline) is not being used, instead ANC is being recorded in the OPD register	On job orientation to the LMO & SN on the importance of ANC register as it contains all the data element related to the ANC. SN should make daily entries of all the test done in the ANC of all PW	LMO/SN	8 th Nov 18
4	JSSK(NB) transported from lower to higher facility(IFT) was not filled	BPM/SN has been oriented on the source of the data element and corrected on the spot	SN	done
5	Equipment like Bag & Mask, Sterile cord cutting equipment are not filled as it was not available in the stock	Oriented BPM/ARO to fill the data as available if it is available in the Labour Room	SN/BPM	done

2. Block PHC Gurgapur, Kannauj (Date of visit: 31/10/2018):-

S. No	Identified Issue	Action Plan/Taken	Responsible person	Timeline
1	Record of training was Available, but not updated regularly	As new meetings and training are conducted or new staff joins and old staff gets transferred, training register should be updated based on the current month situation	BPM	Done
2	In referral Register – No follow-up of the patient that are referred from the facility is being taken up	Briefed the SN on the data element in UPHMIS report and advised SN to take the follow-up of the patient referred after 3 days	BPM & SN	30 th Nov 18
3	LR register was not filled as per GOI guideline	Onsite capacity building of SN of different element of the filling LR register	SN/BPM	30 th Nov 18
4	Responsibility of data collection, compilation, validation, and uploading on time	In the district no AROs & BPM and Hospital Manager at DCH has to own responsibility for data quality including timely collection, compilation, validation etc.	HM/BPM/ARO	30 th Nov 18
5	Only one person is responsible for whole reporting UPHMIS/ HMIS	As per availability assigned role to ARO, BPM, SN Operator & pharmacist	SN/BPM/ARO/pharmacist	Not done due unavailability of MOIC
6	JSSK data is not being filled	Need to maintain the record of JSSK related data in a register in coordination with SNs, Ambulance and other related personnel	Pharmacist/SN/BPM	20 days
7	All the check-up that should happened in ANC was not mentioned in the ANC register	SN with the help of LT must enter all the data i.e. Hb of all PW in the ANC register	SN/LT	20 days

3. District Combined Hospital-, Kannauj (Date of visit: 1/11/2018):-

S. No	Identified Issue	Action Plan/Taken	Responsible person	Timeline
1	Record of training was Available, but not updated regularly	As new meetings and training are conducted or new staff joins and old staff gets transferred, training register should be updated based on the current month situation	BPM	Done
2	Data elements of Child health section(OPD) section could not be audited due to non-availability of child OPD register	OPD register should be available in the DCH all the time With the help of CMS decision was taken to give charge of the OPD register as MO leaves	MO	Done
3	ANC record could not be audited as proper source document (ANC register) are not being filled properly. Hence No. of PW visited for 4 or more ANC could not be checked	CMS assigns an ANM to support LMO in proper filling of ANC register We provided on site capacity building of ANC/LMO on different section of the ANC register	ANM/LMO	20 th Nov 18
4	JSSK diet register was not available	Diet register was made available & SN was advised to filled all the column for the proper capturing of JSSK data	SN/hospital manager	20 th Nov 18
5	Total death & admission of NB at SNCU was wrongly filled, due to the confusion to show death of NB in SNCU or LR	Clarified the doubt of SN and SNCU that if the NB has been admitted into the SNCU then death will be shown in death at SNCU otherwise into the LR	SN/MO	20 th Nov 18

6-District- Ghazipur

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

Two blocks namely Badhaura BCHC, Kasimabad CHC and District Women Hospital (DWH) 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 not available in any of the visited facilities.	-Training record has to be maintained and updated in coordination with Hospital Manager, Computer operator and SNs in DCH Noida. -In blocks these records are to be maintained in a register with the help of HEO/BPM/SNs and ARO. -To prepare training record of facility staff (MO MBBS, MO AYUSH, Staff Nurse & ANMs/LHV) a separate register has to be made updated it monthly so that correct information on training may be filled in monthly UPHMIS facility format.	MOIC//BPM/BCPM/HEO/HM/NM
2	Responsibility of data collection, compilation, validation, and uploading on time	In the district no AROs & BPM and Hospital Manager at DCH has to own responsibility for data quality including timely collection, compilation, validation etc.	HM/BPM/ARO
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	ANC register not found	-Should maintain a register for ANC services provided at facility and update regularly	ANM/SN
5	Not capturing JSSK data	-A register is required to be made and data elements required as per format must be recorded in coordination with pharmacist, LT, SNs/ANMs. HM in DCH and BPM in block has to be given responsibility.	HM/BPM
6	Understanding of Data elements and Reporting time was not clear.	-Training should be provided to block official and person responsible for reporting about Data elements and also convey the correct reporting time regarding UPHMIS and HMIS reporting	DPM/BPM/DEO
7	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/M CTS operator) at block facility (CMO/ACMO RCH/DARO/DPM/HMIS operator) at district level - Need to share meeting minutes to CMO office/DPMU

Findings of Data Quality Audit

1. Block CHC-Badhaura, Ghazipur (Date of visit: 31/10/2018):- In this block responsibility was not assigned for reporting and there was lack of understanding about the data elements among the block officials.

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	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	30 th Nov 2018
2	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.	BCPM/MOIC	30 th Nov 2018
3	HMIS data for ANC and HB and discharge within 48 hours source register not available	ANC register should be maintained by ANM / SN giving the ANC services	MOIC/ BPM/ SN	30 th Nov 2018
4	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	BPM/MOIC	30 th Nov 2018
5	Responsibility was not assigned for reporting of UPHMIS and HMIS	Responsibility should be assigned for correct and timely reporting	MO I/c	30 th Nov 2018
6	Mismatch on Document, Format and Portal was found.	Validation meeting should be regularly done for removing data errors.	MOIC, BARO, BPM, SN, Operator	30 th Nov 2018
7	Labor room register, ANC register, referral out register not found	The registers has to be printed from CMO office and distributed to block Facilities.	MOIC / CMO	30 th Nov 2018
8	Understanding issues of data elements are found.	Immediate training has to be organized at District and Block level.	MOIC/ DPM	30 th Nov 2018

2. District Women Hospital – Ghazipur:- (Date of visit: 31/10/2018):- In this facility the post of Hospital manager is vacant. Responsibility was not assigned for reporting, the report for SNCU was filled as zero.

S. No.	Identified Issue	Action Plan	Responsibility	Timeline
1	Training record was not found	A format has given from UPTSU for preparing training register and suggested it to update on regular basis.	Operator	30 th Nov 2018
2	Report of SNCU filled as zero	SN posted in SNCU should give report of SNCU in HMIS format.	CMS	30 th Nov 2018

S. No.	Identified Issue	Action Plan	Responsibility	Timeline
3	Stock Register of equipment's was not available	It was suggested to Update the Stock register regularly.	Pharmacist & CMS	30 th Nov 2018
4	No source register available for JSSK except diet. Register such as Diagnostic, Drop back, IFT, home to hospital not available at Facility.	Source register such as Diagnostic, Drop back, IFT, home to hospital should be maintained at facility with regular updating and report for UPHMIS should be made from these registers.	SN / CMS	30 th Nov 2018

3. Block CHC Kasimabad, Ghazipur (Date of visit: 01/11/2018):- In this block old formats are used for reporting, reporting period was not clear among block officials. No summary was maintained in labour room register. Due to lack of coordination among staff reporting was a big challenge. Validation meeting was not conducted.

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	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	30 th Nov 2018
2	Data element found blank for ASHA Sangini approved in block, ASHA filled against approved and Asha training for induction module and Module 6 & 7 round 1-4	ASHA related information has to be given in format for timely uploading	BCPM/MOIC	30 th Nov 2018
3	Most of the data elements of HMIS such as Delivery, Live birth, PPIUCD, Immunization, death and Allopathic OPD was left blank.	BPM and BARO should check the format before entry	BPM/BARO/MOIC	30 th Nov 2018
4	Source register for ANC has not been found.	The register for ANC should be maintained and also summary should be maintained at the end of the month.	SN/ ANM	30 th Nov 2018
5	JSSK all the data elements left blank on portal	BPM and BARO should check the format before entry	BARO/BPM	30 th Nov 2018
6	Validation Committee meeting not held in block.	The meeting should be regularly held for correction of data before locking.	BPM/MOIC	30 th Nov 2018
7	Formats of UPHMIS and HMIS are old	The formats should be printed and Distributed to block for correct and timely reporting	MOIC	30 th Nov 2018
8	Reporting time not clear	Should aware all the staff about the reporting time for UPHMIS and HMIS	MOIC / BPM	30 th Nov 2018

7- District- Maharajganj

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

Two blocks namely Ghughali and Naothnawan 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	Completeness issue- many data elements are left blank in UPHMIS and HMIS formats.	To ensure review of filled formats by ARO/BPM before giving for entry to MCTS operator. One needs to leave blank if program/service not applicable at the facility.	ARO/BPM/MOIC
2	Understanding issue for some data elements like 4 ANC and stock status as adequate & inadequate not found to be clear.	To inform/explain staff nurse/ANM the correct way of reporting for the data element "Number of PW received 4 or more ANC check-ups". As per HMIS manual if a woman comes for the ANC check-up for the first time, in the late weeks of pregnancy it should NOT be counted as 4 th ANC check-up, it would be her 1 st ANC check-up. Only those pregnant women who received their 4 th or more ANC check-up during the reporting month are to be reported. In case of stock related data in HMIS, if the stock is available for further two months of reporting month will be reported as 'Adequate' else 'Inadequate'.	ARO/BPM
3	PW not carrying MCP card while ANC visit—Majority of PW are not carrying MCP card while ANC visits to the facility.	To sensitize pregnant women through ASHA/ANM to bring MCP card while visit to facility.	BCPM
4	Summary on each record in the facility is missing.	To ensure preparing a summary of required information at the end of reporting duration.	Each concerned person
5	MCTS number is missing in ANC & delivery registers.	To ensure updating MCTS number on ANC & delivery registers daily/weekly.	MCTS operator
6	Role distribution of data elements is missing at the facility.	To separate data elements of HMIS/UPHMIS person wise, orient once and ensure reporting on time	MOIC at block and CMS at DH.
7	Reporting concerns for many sections like stock status, child diseases, child health,	For ensuring Childhood Diseases reporting in HMIS/UPHMIS all doctors running OPD need to ensure to mark the childhood diseases	MOIC/Pharmacist/S N/BCPM

SN	Issue	Possible solution	Responsible person
	JSSK, process, family planning related sections are left blank or filled with zero.	in OPD register and make the summary each day. MOIC needs to understand and ensure the reporting of JSSK part through concerned person like SN & pharmacist and person responsible for 102 & 108 record maintenance. Fix day services need to report with the help of SN/BCPM.	
8	Validation committee is functional but it is not effective.	Validation committee meeting needs to be conducted in effective way. It needs to fix a certain date (between 27, 28 or 29 of every month) for validation committee meeting and follow the following steps– Step 1- Checking use of correct format Step 2- Matching of manual format with portal format Step 3- Audit NITI AYOJ & ranking 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
9	SC format- HB test related data element is not correctly written in Hindi. it is written as “Number of PW tested for Hemoglobin (HB)” instead of “Number of PW tested for Hemoglobin (HB) 4 or more than four times for respective ANCs”	To ensure the distribution of updated SC Hindi formats to ANMs.	CMO/ACMO RCH/DPM/MOIC
10	Death register- death register was not found at block facilities. Death reporting issue at DCH.	To prepare a death register to record all types of deaths at the facility and ensure reporting of these, if any, in monthly reporting or HMIS/UPHMIS. DCH needs to ensure to report all kind of deaths at facility in the formats.	DH manager/Staff nurse

Findings of Data Quality Audit Facility wise

1. Block: Block PHC Ghughali, Maharajganj (Date of visit: 30/10/2018):-

S N	Issue	Possible solution	Responsible person	Timeline
1	Completeness issue- many data elements are left blank in UPHMIS and HMIS formats	To ensure review of filled formats by ARO/BPM before giving for entry to MCTS operator. One needs to leave blank if program/service not applicable at the facility.	BPM/MOIC	15 th Nov 2018
2	Many sections in UPHMIS BPHC format like ASHA detail, training detail, family planning, child health, JSSK & process indicators & some sections in HMIS PHC format like child diseases & stock related are left blank.	To ensure reporting of the data as per the availability. To ensure segregation of women and newborn drop back hospital to home & hospital to hospital under JSSK record maintenance for further reporting.	MOIC/BPM	30 th Nov 2018
3	Understanding issue for some data elements like 4 ANC and stock status as adequate & inadequate not found to be clear.	To inform/explain staff nurse/ANM the correct way of reporting, detailed in the district summary.	MOIC/BPM	Done
4	PW not carrying MCP card while ANC visit—Majority of PW are not carrying MCP card while ANC visits to the facility.	To sensitize pregnant women through ASHA/ANM to bring MCP card while visit to facility.	BCPM	31 st Dec 2018
5	Summary on each record in the facility is missing.	To ensure preparing a summary of required information at the end of reporting duration.	Each concerned person	Nov 2018 onwards
6	Validation committee is not functional.	A certain date between 27 & 29 was decided to fix for the validation committee meeting and to conduct it in effective way. Need to share meeting minutes to CMO office/DPMU	MOIC/BPM/ MCTS operator	30 th Nov 2018

2. CHC Ratanpur, Block Naothnawan, Maharajganj (Date of visit: 31/10/2018):-

SN	Issue	Possible solution	Responsible person	Timeline
1	Completeness issue- many data elements are left blank in UPHMIS and HMIS formats	To ensure review of filled formats by ARO/BPM before giving for entry to MCTS operator. One needs to leave blank if program/service not applicable at the facility.	Sanoz Kumar, BPM	15 th Nov 2018
2	Understanding issue for some data elements like 4 ANC and stock status as adequate & inadequate not found to be clear.	To inform/explain staff nurse/ANM the correct way of reporting, detailed in the district summary.	MOIC/BPM	30 th Nov 2018
3	Summary on each record in the facility is missing.	To ensure preparing a summary of required information at the end of reporting duration.	Each concerned person	Nov 2018 onwards
4	Child health related summary is not prepared in OPD register by doctors.	To explain doctors child health data elements and stick it on the wall before him. To ensure preparing summary for child health related data elements per day in OPD register to ensure reporting.	MOIC/OPD running doctors/Pharmacist	30 th Nov 2018
5	JSSK recording issue- not clear about source document to report required information.	To ensure reporting of JSSK part related data elements.	BPM	30 th Nov 2018
6	SC format- HB test related data element is not correctly written in Hindi. it is written as “Number of PW tested for Hemoglobin (HB)” instead of “Number of PW tested for Hemoglobin (HB) 4 or more than four times for respective ANCs”	To ensure the distribution of updated SC Hindi formats to ANMs.	MOIC/BPM	30 th Nov 2018
7	Death register- death register was not found at the facility.	To prepare a death register to record all types of deaths at the facility and ensure reporting of these, if any, in monthly reporting or HMIS/UPHMIS.	Staff nurse	30 th Nov 2018
8	Validation committee meeting process is not correct.	To conduct validation committee meeting in correct process, detailed in district summary. Need to share meeting minutes to CMO office/DPMU	MOIC/BPM /MCTS operator	30 th Nov 2018
9	PW not carrying MCP card while ANC visit—Majority of PW are not carrying MCP card while ANC visits to the facility.	To sensitize pregnant women through ASHA/ANM to bring MCP card while visit to facility.	BCPM	November-December 2018

3. DHQ: District Combined Hospital, Maharajanj (Date of visit: 01/11/2018):-

S. No	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Recording of ANC is not taking place.	To assign a SN/ANM to record ANC details to ensure related reporting.	CMS/DH manager	30 th Nov 2018
2	OPD summary is missing.	To ensure preparing summary of OPD for related data elements each day by doctors.	Doctors running OPD/DH manager	30 th Nov 2018
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.	Each concerned person	From next reporting
4	Reporting issue in JSSK part-correct reporting is lacking.	To ensure correct reporting.	DH Manager	30 th Nov 2018
5	Death reporting issue- maternal and child deaths were missed to report.	To ensure correct reporting of deaths in HMIS/UPHMIS monthly formats.	DH Manager/SN	30 th Nov 2018
6	Validation committee is not functional.	Need to make it functional (on a certain date between 27 and 29 each month) with correct process, detailed in the district summary.	CMS, hospital manager and concern record in-charge	30 th Nov 2018