

# Data (UPHMIS/HMIS) Quality Audit Report (5<sup>th</sup> Round),

26<sup>th</sup> Feb to 1<sup>st</sup> Mar 2019

## 6- District- Jhansi

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

Two blocks namely Badagaon BCCH, Moth 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 in DWH Jhansi. -In blocks these records are to be maintained in a register with the help of BPM/BCPM and DEO.	BPM/BCPM and DEO
2	Summary of complication in labor room register in the DWH is missing.	Need to prepare a summary of required information at the end of reporting duration.	SN and Hospital Manager
3	Responsibility of data collection, compilation, validation, and uploading on time	In the blocks nobody has to own responsibility for data quality including timely collection, compilation, validation etc.	BPM and Pharmacist
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 DWH and BPM in block has to be given responsibility.	HM/BPM
5	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

### 1. Block- Moth

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	Training register was not available	Mentioned about the register and suggested the format of register	BPM	Done
2	Stock Book registers maintenance - Two stock book registers are being maintained; one by Pharmacist and other by Health supervisor.	Main stock book register to be maintained by Pharmacist and a sub stock book to be maintained by others (if needed).	Pharmacist	15 <sup>th</sup> March 19
3	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	MO and Ward boy follow up by BPM	5 <sup>th</sup> March 19 and follow in each month

		to 5 years by doctors on daily basis and then compiled by the ward boy.		
S. No	Identified Issue	Action Plan	Responsibility	Timeline
4	No source register for JSSK related data elements like Diagnosis services, IFT and drop back for Pregnant women and for newborn health	Source register for JSSK for each elements has to be prepared and updated on regular basis	BPM	15 <sup>th</sup> March 19
5	ANC register is not maintained properly- 4 ANC checkup are not mentioned.	For every ANC case all checkups should be mentioned separately. If 4 ANC is completed and mentioned in the register then only it can be considered as 4 ANC check- up	LMO/ SN	Every month

## 2. Block- Badagaon

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	Filled UPHMIS format not available at facility and data not uploading in portal	To ensure the data and format must be at facility. Data should be entered in portal.	BCPM and ARO	5 <sup>th</sup> March 19
2	Training register was not available	Training register has been prepared and suggested to update every month.	BCPM	Done
3	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 years by doctors on daily basis and then compiled by the ward boy.	Pharmacist	20 <sup>th</sup> March and follow in each month
4	No source register for JSSK related data elements like Diagnosis services, IFT and drop back for Pregnant women and for newborn health	Source register for JSSK for each elements has to be prepared and updated on regular basis	BPM	15 <sup>th</sup> March 19
5	Data Validation Committee are organized but verification of data is not done	Data Validation Committee should be activated and needful data correction is required for every month	MOiC	Every 25 <sup>th</sup> of the month
6	Medicine are available but reported as blank in portal	Data reporting errors on portal was corrected. Pharmacist should take responsibility for data compilation.	HMIS Operator and Pharmacist	Every 25 <sup>th</sup> of the month

## 3. DWH, Jhansi

S. No	Identified Issue	Action Plan	Responsibility	Timeline
1	Human Resources data base not clear and over reporting	Establishment staff should be clear and update the data.	Senior Clerk and DEO	5 <sup>th</sup> March 19
2	Training register was not available	Training register has been prepared and suggested to update every month.	Hospital Manager	Done
3	Pathology and SNCU registers was not properly maintained and summarized	The register should maintain and summarize at the end of the day or month.	LT and SN	5 <sup>th</sup> March 19
4	Maternal and Child complication data not reporting while data available in sources register.	To ensure daily summary of required elements related to HMIS/ UPHMIS in Labor room register and will report in the portal.	SN	Every Month
5	Still Birth not bifurcated as Fresh or Macerated in Labor room register	SNs were oriented for the same and advised that it should be part of summary in each month.	SN	Immediately and every month

6	ANC register was not properly maintained	Suggested to maintain it in proper format	SN	5 <sup>th</sup> March 19
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