

**Data (UPHMIS/HMIS) Quality Audit Report (5<sup>th</sup> Round),  
26<sup>th</sup> Feb-28<sup>th</sup> Feb'2019**

**3- District- Shahjahanpur**

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

Two blocks namely Tilhar (CHC-FRU), Nigohi (BCHC) and District Combined 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	-Training record has to be maintained and updated in coordination with Hospital Manage in DWH -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	Summary in the facility record is missing.	Need to prepare a summary of required information at the end of reporting duration.	Each concerned person
3	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 DWH.	DPM/HM/SN
4	Lack of understanding of data elements (JSSK/4ANC/Child health)	-Need an orientation of all concerned staff at blocks/facility and DCH.	MOIC at block and HM at DCH.
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	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 CHC-FRU Tilhar, Shahjahanpur (Date of visit: 26/2/2019):-** CHC Tilhar have a lot of Still birth (Fresh) cases. Even maximum referral in SNCU was from Tilhar CHC

S. No.	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Training register not maintained.	Register was prepared during the visit. Mentored about register. Need to keep all the supporting documents staff wise regarding their training	MOIC/BPM	27 <sup>th</sup> feb,2019
2	In Attendance register staff Designation not mentioned correctly	Need to put correct designation. Responsibility should be assigned to one person for writing the names and designation of all the staff on attendance register	BPM	27 <sup>th</sup> feb,2019
3	ASHA approved for the block status not very clear at block, neither block officials had any supporting documents	It was advised to keep record of ASHA approval as per PIP with help of DPM	BCPM	28 <sup>th</sup> feb,2019
4	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 Mar 19 onward
7	Lack of understanding of data elements(JSSK/ Bags and Mask availability)	Mentored on the data elements for which facility staff had confusion.	BPM	DONE
8.	Labour room register Column "PW discharged Within 48 hrs of delivery" was partially filled.	Need to maintain the record properly.	Staff nurse	7 <sup>th</sup> Mar 19
9.	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	31 <sup>st</sup> Mar 19
10	Standard diet register not available. Local NGO who is providing diet under PPP model which is using their own register.	Advised to use standard diet register. And discussed this issue with CMO	Quality Manager	31 <sup>st</sup> Mar 19

**2. CHC Nigohi (Block-Nigohi), Shahjahanpur (Date of visit: 28/2/2019):**

S. No.	Identified Issue	Action Plan/Taken	Responsibility	Timeline
1	Improper maintenance of ANC-4 and children full immunization records	Correct report need to be recoded for ANC-4 and full immunization.	ANM	15 <sup>th</sup> Mar 19
2	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.	Staff Nurse	31 <sup>st</sup> Mar 19
3	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 medicine given to children for diarrhea and pneumonia should be mentioned and entered in portal.	MOI/c	31 <sup>st</sup> Mar 19
4	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.	Staff Nurse/BPM	31 <sup>st</sup> Mar 19
5	Standard diet register not available. Local NGO who is providing diet under PPP model which is using their own register.	Advised to use standard diet register. And discussed this issue with CMO	BPM	31 <sup>st</sup> Mar 19
6	Validation committee not functional at all.	26 <sup>th</sup> /27 <sup>th</sup> 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	1 <sup>st</sup> Mar 19
7	Case sheet not properly filled. Many columns are empty. Blank consent form was signed by beneficiary.	Need to fill quality case sheet covering all the sections.	LMO	31 <sup>st</sup> Mar 19

3. District Women Hospital, Shahjahanpur (Date of visit: 27/2/2019):-

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	28 <sup>th</sup> feb'2019
2	In PW received iron sucrose section Doses of Iron sucrose was reported instead of No. Of PW, due to lack of understanding	Mentored on correct definition of data element and Recommended for Using HRP register for proper documentation.	Staff Nurse	15 <sup>th</sup> Mar 19
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	Case sheet not properly filled. Many columns are empty. Blank consent form was signed by beneficiary.	Need to fill quality case sheet covering all the sections.	LMO	31 <sup>st</sup> Mar 19
5	SNCU Register do not properly capture outcome of admission in SNCU. (Like Died/survived)	Mentored staff on same and recommended to capture the outcome data in existing register by adding columns.	Staff nurse (SNCU)	7 <sup>th</sup> Mar 19
6	102 and 108 Register is not properly filled. Place of transportation is not clearly mentioned.	Mentored staff and EMT on same	Staff nurse	7 <sup>th</sup> Mar 19
7	Validation committee is not functional.	Need to make it functional	Hospital Manager and concern record keeping in-charge	1 <sup>st</sup> Mar 19
8	Standard diet register not available. Local NGO who is providing diet under PPP model which is using their own register.	Advised to use standard diet register. And discussed this issue with CMO	Quality Manager	31 <sup>st</sup> Mar 19