

Malawi German Health Programme (MGHP)

Health Information and Digitalization

Challenge

Evidence-based decision making has proven beneficial in attaining high efficiency in the provision of quality health care services. To establish this process, the health sector needs a robust Health Information System (HIS) that provides reliable information as evidence for making rational decisions. The Sustainable Development Goal 3 within the context of Universal Health Coverage (UHC) puts emphasis on measurement and accountability which can be achieved through a vibrant national HIS that is aligned to “The Five-Point Call to Action in Measurement and Accountability for Results in Health”¹ endorsed at the Washington Summit of June 2015.

In Malawi, a key challenge hindering evidenced decision making is the use of paper-based systems for data management. In addition, the health information systems (HIS) are not capable of generating real time data. Over the years, the country has made tremendous efforts to advocate for and implement effective health information systems. Despite some significant strides to harmonize and synthesize existing systems, challenges still exist in data collection, analysis, interpretation, use and dissemination of information. Regarding the main data repository, the District Health Information Software (DHIS2), problems continue to exist for data accuracy, data completeness and data timeliness of reporting.

Our approach

The Malawi German Health Programme (MGHP) has adopted a multi-level approach collaborating with national and international partners and institutions to address some of these challenges. Its focus is on health systems strengthening in four target districts with an emphasis on enabling the collection and use of accurate and real-time data at the point of care. Alongside other interventions, this aims to contribute to

the improvement of quality-of-service delivery in Maternal and New-born Health (MNH). The interventions are derived from the country’s priorities formulated in the national Digital Health Strategy 2020-2025.



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Commissioned by	German Federal Ministry for Economic Cooperation and Development (BMZ)
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Project region	Malawi; Target districts: Dedza, Lilongwe, Mchinji and Ntcheu
Lead executing agency	Ministry of Health
National partners	Ministry of Health (MOH), Local Councils in target districts;
Duration	01.08.2020 – 31.07.2023
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At national level, MGHP supports technical advisory services to the Digital Health Division in the Ministry of Health (MoH) with the development and testing of an eRegister platform which aims to replace paper-based registers and reporting tools. The solution is currently implemented in Bilira Health Centre in Ntcheu district for Antenatal care (ANC), Maternity, Postnatal care (PNC) and Child Health modules. A consortium consisting of Management4Health (M4H) in partnership with

¹ <https://www.healthdatacollaborative.org/fileadmin/uploads/hdc/Documents/5-point-call-to-action>



Photo left: eRegister Project Launch

Photo right: Health workers administering vaccinations to children



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Photo left: Health worker demonstrating the registration of a patient with the eRegister

Photo right: Under-five shelter construction

Compelling Works and Cooper Smith, will scale-up the eRegister implementation to two additional facilities and document the processes to inform further potential scale up.

With funding from the GIZ Innovation Fund and co-financed by the Merck Family Foundation, a digital immunization tracking tool was integrated into the child health module (Emmunize project). The tool supports health workers in planning outreach services through features such as visualizing children due for vaccination and vaccine doses needed. The project also supported the construction of the under-five clinic including cold chain management to improve immunisation services.

MGHP supports the Reproductive Health Department with customization of MNH dashboards in DHIS2 and its roll out. The dashboard has 21 key indicators instrumental for monitoring coverage and quality of care at all levels.

At district level, MGHP supports health facilities with strengthening of HMIS data quality through capacity development and provision of ICT infrastructure. The Central Monitoring and Evaluation Division (CMED) in collaboration with the District Health Management Information System (HMIS) offices trained statistical clerks from the health facilities and provided them with licenses. The individual health facilities are now able to upload data directly into DHIS2.

MGHP also intensified supporting the districts with regular data quality audits and HMIS review meetings. Findings are discussed in coordinators meetings and appropriate action is taken to further strengthen data quality. The coordinators meetings are also used to transfer knowledge and skills on the use of data and DHIS2 to inform planning and supervision.

In Ntcheu district hospital, MGHP strengthened internet connectivity with a comprehensive Local Area Network (LAN) and introduced a patient archiving system with the aim of digitizing patient files and making them easily accessible.

Results in figures...

The eRegister platform contributes to both the HIS and Quality Management (QM) policy objectives.

To date, the system has recorded 12,841 patients at Bilira Health Centre. The capacity of 40 health care workers has been built through trainings on the use of the eRegister of which 23 are using the app routinely. 5,882 of the total clients recorded are children, monitored by the eRegister immunization tracking tool.

Regarding the supporting activities at district level, 65 statistical clerks have been trained and granted access rights to DHIS2. A total of 70 chrome-books and 62 mobile MiFi devices and routers have been distributed to health facilities.

Following this intervention, DHIS2 reporting timeliness has improved by 15% on average across the 4 districts. For example, in the first half of 2021, only 53% of reports were submitted on time in Dedza, which improved to 80% in the second half of 2021.

The data quality audits, HMIS reviews and coordinators meetings have also shown a positive impact on DHIS2 reporting completeness in almost all districts with an average increase of 4.5 % in complete reports submitted i.e., Dedza improved from 76% to 87%, despite the slight drop in Lilongwe from 81% to 79%.

...and in stories

All health providers in maternity and environmental units are using the eRegister and there is a high degree of satisfaction. *"The use of tablets has made our work easy. In the past when we go for an outreach, we would take long time to finish our work, now it's very easy and fast. Also, the tablets help in self-keeping of data. With paper-based records some of the pages could be lost or torn out but that cannot happen with tablets, all patient data is safe."* Health worker, Bilira Health Centre.

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