







## WORKSHOP ON HEALTH INFORMATION ARCHITECTURE: DESIGN, IMPLEMENTATION, & EVALUATION

22-26 Mar 2011

Venue: Jamia Hamdard, New Delhi

## **Organizers:**

- National Health Systems Resource Centre, New Delhi
- Department of Management Studies, Jamia Hamdard
- Health Information System Programme, New Delhi
- Department of Business Administration and Community Health Division, BITS Pilani









## **Introduction:**

India has now over 15 years of building HMIS. The last five years of the NRHM has seen the most successful of these efforts, but there is still a long way to go. Also, the range of information needs has rapidly expanded. NHSRC, in coordination with the MOHFW has already developed three training modules – for Service Providers, for Health Programme Managers, and one for HMIS Managers, which together impart seven specific competencies. This workshop is positioned at a much higher level of complexity - and meant exclusively for those who lead the state HMIS team or who work as Consultants and Resource Persons in the design of health information systems. Only those who have worked with existing systems in India are invited to attend. If we have too many requests for participation, then we would shortlist and selected only 35 participants, based on those most likely to be available to guide the States on HMIS in the coming years and those who are especially interested in developing themselves as Resource Persons in Health Information Systems.

**Workshop objectives:** By the end of the workshop the potential resource persons are expected to be equipped with an understanding of:

- a) basic concerns of HMIS and its implications for design of HMIS
- b) the complexities of implementation and how to strategically address them
- c) how to evaluate HMIS in an ongoing manner for optimal use of the HMIS resource
- d) current status of HMIS and available information systems/technology









## **AGENDA**

| Time                              | Topic   | Description   | Methodology  |  |  |  |
|-----------------------------------|---|---|--------------|--|--|--|
| DAY 1 : UNDERSTANDING HMIS DESIGN |   |   |              |  |  |  |
| 09.30 AM                          | Registration  |   |              |  |  |  |
| 10.00 AM                          | Welcome & Inaugural   |   |              |  |  |  |
| 10.30-11.30 AM                    | Data quality issues and ways to overcome them   | This is the current frontline in HMIS. Despite popular perception, most quality issues are not due to errant employees, but due to systems faults. This session describes how to identify and trouble-shoot these systemic fault-lines.   | Presentation |  |  |  |
| 11.30-13.00 PM                    | a.Developing tools on assessment of data quality & fidelity: b. Principles of primary registers development | How does one rapidly assess the data quality of a District? How do we recognize and reward truth-telling- not those who report high, but those who report truthfully? How do we analyse and incrementally improve primary registers – one of the most important contributors to poor data quality?  | Group work   |  |  |  |
|                                   |   | LUNCH   |              |  |  |  |
| 14.00-15.00 PM                    | Principles of design in choice of data elements & indicators: Rationalization of data collection            | Programme Officers want as many data elements as possible. HMIS Managers want as few as possible. The final decision often depends on who commands more authority. But could there be principles based on which data elements and indicators are chosen? How do we reduce the burden of data collection without loss of useful information or data quality? | Presentation |  |  |  |
| 15.00-16.00 PM                    | Crafting and validating indicators  | Some indicators "behave", some don't. How do we check the precision, sensitivity and reliability of indicators? Should all indicators be field-tested before introduction? How do we do that?   | Group Work   |  |  |  |
| 16.00-17.00 PM                    | Indicator choices for specific programs   | When we make District specific or State-<br>specific programmes we need to craft new<br>indicators. Some exercises to learn how it is<br>done.  | Group work   |  |  |  |









| DAY 2 : PLANNING & EVALUATION OF HMIS DESIGN |  |   |                                   |  |  |  |
|--|--|---|-----------------------------------|--|--|--|
| 10.00-11.30 AM                               | Health Information Needs: objectives, strategy, & architecture | There are choices to be made. Do we go for a centrally defined framework, where all fields and functions are fixed and standardized at the outset. Or is architecture a verba bottom-up approach, where Districts define the information needs, incrementally improve and add on more and more functions, but at all times providing the information that higher level Policy makers require. | Panel discussion.                 |  |  |  |
| 11.30-13.00 PM                               | Data Policy and Standards of HMIS                              | Policy frameworks from international experience. How do we construct policy that addressed issues of data security, public access, storage, retrieval, interoperability? How do we define data standards?   | presentation                      |  |  |  |
| LUNCH  |  |   |                                   |  |  |  |
| 14.00-15.30 PM                               | Software Application in HMIS: Writing requirements             | How do we write software requirements? How do we avoid pitfalls in design? We exhume a few corpses of past HMIS efforts to understand the problems.   | Presentation and interactions.    |  |  |  |
| 15.30-17.00 PM                               | Evaluating HMIS systems  | There are many HMIS systems running. National systems for RCH, immunization, disease monitoring; State level systems etc. Why evaluate? What to evaluate? What are evaluation methodologies as relevant to health systems?  | Group work with lead presentation |  |  |  |
| DAY 3 : PLANNING CAPACITY BUILDING           |  |   |                                   |  |  |  |
| 10.00-12.00 PM                               | Use of information in District planning                        | Why does information use lag behind? Some exercises to understand the constraints and developing plans overcome them.   | Group work                        |  |  |  |
| 12.00-13.00 PM                               | Approaches to capacity building for HMIS                       | The needs and the approaches to capacity building. The design of competency-based training material.  | Panel discussion                  |  |  |  |
| LUNCH  |  |   |                                   |  |  |  |
| 14.00 PM                                     | Developing training programs                                   | Exercises on how to identify and develop training programmes. Evaluation  | Field visit (1/2 day) Group work  |  |  |  |
| DAY 4: HMIS APPKICATION TO PRACTICE          |  |   |                                   |  |  |  |
| 10.00-11.00 AM                               | Issues of Equity &<br>Community participation in<br>HMIS       | How do we collect disaggregated data related to equity concerns? And how do we not collect it? How does community monitoring  | Panel discussion                  |  |  |  |









|                                      |  | information relate to HMIS data?   |                                    |  |  |
|--------------------------------------|--|--|------------------------------------|--|--|
| 11.00-12.00 PM                       | Data triangulation   | What are the 3 apexes of the triangle?  How do we systematically get the work done for policy and for management purposes?                                       | Presentation and discussions       |  |  |
| 12.00-13.00 PM                       | GIS in HMIS  | GIS systems in operation. Strengths and limitations. Getting started on GIS  | Presentations from best practices. |  |  |
|                                      |  | LUNCH  |                                    |  |  |
| 14.00-15.30 PM                       | HR Management systems:<br>available systems, their<br>strengths and limitations  | What are the HR Management systems available? Relative strengths.  | Presentation                       |  |  |
| 15.30-15.00 PM                       | Developing output records for HR Management  | What indicators are needed for policy, and for workforce management and performance appraisal?   | Group work                         |  |  |
| DAY 5 : HMIS APPLICATION TO PRACTICE |  |  |                                    |  |  |
| 10.00 – 11.30<br>AM                  | Best practices in name-<br>based tracking systems  | Pregnancy and immunization tracking – appraisals and evaluations, chronic diseases, ART tracking.  | Presentation of best practices     |  |  |
| 11.30-13.00 PM                       | Hospital Management<br>information systems in<br>public hospitals (Punjab-<br>State IT Dept; TN, Gujarat-<br>TCS, HP-HISP model,<br>IGCMC Shimla; CDAC-<br>Kerala) | What is the 'state-of-art' and what is suitable for public health facilities?  | Presentation of case studies.      |  |  |
| LUNCH                                |  |  |                                    |  |  |
| 14.00-15.30 PM                       | Examining hospital performance indicators  | There are many indicators already available. A critical examination of indicators in hospital management.  | Group work                         |  |  |
| 15.30-17.00 PM                       | M-health initiatives in India  | The use of mobiles in health care and public health is a rapidly expanding new area. A brief introduction to all that is happening under the rubric of M-health. | Presentation of case studies       |  |  |