Capacity Building for Effective Health Campaign Digitalization: Lessons Learnt and Best Practices

HISP Kenya

HISP KENYA

Our Vision.

Development and implementation of sustainable and integrated Health Information Systems

Our Mission

Support developing countries to strengthen their HIS.
Capacity Strengthening for governing their HIS.

Not-for-Profit Organisation

Registered in 2018 - Limited by Guarantee

Our Plan

Adopt a broad based, development approach to capacity building and support of National and Subnational communities,

Internal

OUTLINE OF PRESENTATION

♦ Background/context
♦ Capacity building for digitization
♦ Campaign digitalization experience-Best practices
♦ Challenges (focus on digitalization)
♦ Lessons learned and recommendations

BACKGROUND

♦ Timely and accurate data are vital for effective health campaigns

♦ Adoption of advanced technology through Digitization facilitates data management during the campaigns

♦ Ways of Digitization include
   ♦ Adoption of a national system e.g., the DHIS2
   ♦ Development of a custom-made software
   ♦ Adoption of hybrid system of both paper and digital platform

BACKGROUND

♦ Digitization enhances
♦ Planning
  ♦ Pre-registration of clients,
  ♦ Scheduling of appointments with clients (sms),
  ♦ Forecast logistics requirements

♦ Recording and reporting
  ♦ Maintain appointment schedules and re-appointment dates
  ♦ Daily recording of the accomplished work and other logistics
  ♦ Verify and check the completeness and accuracy of all summary reports
  ♦ Send campaign summary reports
♦ Performance monitoring
  ♦ Conduct regular data review meetings and track key performance indicators

CAPACITY BUILDING FOR DIGITIZATION

♦ Digitization for campaign data requires training
♦ The following are some of the objectives of the training
  ♦ To introduce the campaign team to the digital platform
  ♦ To give an overview of the customization process and basic maintenance functionalities of the system
  ♦ To train the officers on data entry, data analysis, and presentation of various reports and dashboards
  ♦ To receive feedback regarding the system and prepare a way forward concerning the implementation of the campaign

BEST PRACTICES-STAKEHOLDER ENGAGEMENT

♦ Most health campaigns involve multiple stakeholders

♦ Stakeholders can include government agencies, System users, data collectors, health managers, donor agencies, server managers, system administrators, system, architects

♦ Stakeholders' needs should be considered from the beginning because a lack of focus on key stakeholder engagement can lead to the failure of the campaign

♦ When involved, the Stakeholders can support in many ways e.g., training, availing digital tools (computer mobile phones), transport

BEST PRACTICES-STAKEHOLDER ENGAGEMENT

Establish a framework for examining connections between stakeholders and the achievement of various campaign goals

BEST PRACTICES-MULTIPLE TRAINING APPROACHES

♦ Trainer of Trainees (ToT) approach, through residential workshops is effective

♦ Selected officers are trained as ToTs. They cascade the training to others

♦ Training sessions comprise a combination of theoretical lectures and hands-on practice on relevant topics

♦ Trainees are kept to a manageable number (40)

♦ This approach has logistical challenges in terms of organizing workshop venues, trainers, participants, equipment and hardware

BEST PRACTICES-MULTIPLE TRAINING APPROACHES

♦ On-job training that involves visits to campaign sites for coaching and mentorship services

♦ This offers individualized attention to users within their sites and facilitates solving local issues related to computers (both software and hardware)

♦ The use of social media like WhatsApp is emerging as an important way of learning

♦ Users of the system form WhatsApp groups and share their challenges with colleagues for support

♦ This effectively reduces the burden on the national team and creates a new learning process through a community of practice

BEST PRACTICES-MULTIPLE TRAINING APPROACHES

♦ Virtual training is becoming common

♦ For instance, the MoH Kenya has a virtual training application that helps users learn, get a certificate and gain continues training points

♦ This approach was very common during the COVID-19 pandemic

E-learning SOPs Workshop

BEST PRACTICES-ADOPTING A NATIONAL SYSTEM

- While custom-made systems are specific to the campaign, usually there is never enough time to conduct all user tests
- Training is usually done by the vendors/developers of the system and hence difficult to have experts in the MoH for support
- The system tends to "die" after the campaign
- Adopting a national system is therefore a best practice
- It is easy to utilize the community of practice
- Kenya used DHIS2 for the polio immunization campaign and one can still view the data two years down the line

CHALLENGES OF DIGITIZATION

♦ Capacity building- can be expensive, especially in workshops

♦ It is always difficult to get the intended target officers for training- managers prefer coming for such workshops leaving the real implementers

♦ Requisite hardware- there is always an urgent demand for computers, and tablets before a campaign(even if the institutions have computers)

♦ ICT infrastructure- the digital divide- some remote areas don't have access

♦ Continuous system development- some systems evolve even within the campaign period necessitating more training

♦ Failure to institutionalize some topics in training schools

LESSONS LEARNT

♦ While digitization is effective, it is always advisable to think of plan B because at times internet just fails

♦ Try to train the end users well because the poor data quality is generated at the source

♦ It helps to give feedback to all stakeholders to keep them updated during the campaign

♦ Sometimes it is important to discuss some critical issues like servers and data custodians before the campaign starts

♦ If possible, adopting a national system is more effective than coming up with a new one for the campaign

THANK YOU!