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Visualizing and Using Routine Reproductive, Maternal, Neonatal, and Child Health Data at Health Facilities: A Resource Package for Health Providers and District Managers

Supportive Supervision Module on Data Use

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This module provides guidelines to ministry supervisors as they conduct supportive supervision visits with health facilities. The goal is to help the facility use its routine health management information system data to strengthen its reproductive, maternal, newborn, and child health (RMNCH) service delivery spectrum, intervention coverage, and health outcomes. It can be added to existing supportive supervision tools that do not address use of routine data for decision-making.

Many health facilities have regular meetings to discuss operational issues. Those meetings may or may not include review and use of the RMNCH service statistic data that they collect. During the meetings, facility staff ideally review current data for key RMNCH indicators, chart/graph (or visualize) them, and then decide what the data say and how they can be used to improve the facility's coverage, service, or outcomes. This module will assist supervisors in determining to what extent this is already happening and in identifying ways to support facility staff to use their data for decision-making.

The focus of this supportive supervision module is to:

- Determine whether the facility has a process in place to monitor, display, and use a priority set of postnatal and newborn indicators over time.
- Determine if the facility follows that process, if one is in place.
- Understand the trends in the postnatal and newborn indicators the facility is tracking over time and why these trends are occurring.
- Examine the quality of the data for the priority indicators the facility is tracking.
- Find out if changes have been made as result of tracking and discussing indicators.
- Encourage and support staff as they monitor postnatal and newborn indicators, and help resolve any service problems staff have identified from the data as feasible.

Table 1. General information

Item	
Name(s) of supervisor:	Date: _D_ _D_ _M_ _M_ _Y_ _Y_
Facility name:	Facility ID code:
Location: A. Regional: B. District: C. Subdistrict:	
Type of health facility: A. Hospital: B. Health center/clinic: C. Health post/dispensary D. Other (specify):	
Service area(s) being visited:	

- Are health facility staff using a data poster/wall chart or electronic dashboard to track a set of RMNCH service delivery indicators? Circle all that apply.
 - Yes, wall chart/poster
 - Yes, electronic dashboard
 - No (go to Table 3)

Table 2. Health facility RMNCH wall chart or other electronic dashboard review and interpretation

Below, write up to 10 RMNCH indicators (usually percentages or rates) that the facility is tracking and have data posted on the wall.	Displayed but not updated for last month	Displayed and updated for the last month
	1	2
	1	2
	1	2
	1	2
	1	2
	1	2
	1	2

Below, write up to 10 RMNCH indicators (usually percentages or rates) that the facility is tracking and have data posted on the wall.	Displayed but not updated for last month	Displayed and updated for the last month
	1	2
	1	2
	1	2
Score for Data Visualization Availability		

- Ask the health workers what the data on the data posters/wall charts show (what the meaning is). Are health workers able to explain what the indicator trends mean? Circle best answer.
 - Yes
 - No
 - Partially

- Ask the health workers: “Which indicators are improving, staying the same, or declining? What are the reasons for these trends?”

Based on your review of the indicators graphed on the data posters/wall charts and discussions with health workers, what do the indicator trends show? Are things improving? Please explain:

- Are there any data quality concerns observed for the data posters or dashboards? Are the indicator values within realistic/expected ranges? (For example, if some indicators are consistently 100%, is that realistic? Are there any indicators over 100%? Are there any numbers that look unusually high or low?) Please explain:

5. Have facility staff encountered any problems calculating and graphing indicators on the data posters and/or interpretation of the indicators that you can help resolve? Please explain any problems identified and any actions that you take to support the staff:

6. Review the facility registers that have data that are being used to calculate the indicators (e.g., maternity register, postnatal care register, family planning register, well-baby clinic register, sick-child register). Are the registers complete and accurate, with every column filled out correctly? Please explain:

Table 3. Data accuracy check (list indicator numerators and denominators from above)

Below, write in up to 10 data elements that the facility is using to calculate the priority RMNCH indicators (i.e., numerators and denominators if indicator is a percentage). Repeat for multiple months as needed.	Source and value for previous month			Do figures in columns 2, 3, and 4 match? Circle yes or no.	
	Register value	Tally sheet, wall chart, or dashboard value	Monthly facility report value (if reported)	Yes	No
1	2	3	4	5	6
				1.Yes	0.No
				1.Yes	0.No
				1.Yes	0.No
				1.Yes	0.No
				1.Yes	0.No
				1.Yes	0.No
				1.Yes	0.No

Below, write in up to 10 data elements that the facility is using to calculate the priority RMNCH indicators (i.e., numerators and denominators if indicator is a percentage). Repeat for multiple months as needed.	Source and value for previous month			Do figures in columns 2, 3, and 4 match? Circle yes or no.	
	Register value	Tally sheet, wall chart, or dashboard value	Monthly facility report value (if reported)	Yes	No
				I.Yes	0.No
				I.Yes	0.No
				I.Yes	0.No
Score for Data Accuracy					

7. Are there any data quality concerns observed? Are the data complete, with every element filled out?

Many health facilities have regular meetings to discuss operational issues that may or may not include review and use of the service statistic data that they are collecting. These meetings can be a great opportunity for facility staff to review RMNCH service delivery data trends.

Table 4. Existing health facility data review processes (a mechanism for periodically reviewing/discussing RMNCH service delivery data)

4.1	Is there a plan to meet regularly and review data? If so, how many times per year?		
4.2	How many times did facility staff, either as part of a quality/data review committee or other facility group, meet to review data on the RMNCH priority indicators during the last 3 months?		
4.3	Are the wall charts or other data visualizations used to review progress at the data review meeting?	I.Yes	0.No
4.4	Does the facility receive any feedback on health management information system monthly facility reports submitted to district/higher levels?	I.Yes	0.No
Score for Health Facility Data Review Processes			

8. Comments on data review processes (e.g., who attended the facility data review meetings, if held):

Table 5. Data use and decision-making

	Have any decisions and actions resulted from review of RMNCH data at this facility? Please provide specific examples of the types of actions/changes that have been made.	Yes		No		Were any key changes introduced or adopted since last supervision visit?	If yes, describe the key change(s) and other comments.
		I.Yes	0.No	I.Yes	0.No		
5.1	Changes made to service delivery	I.Yes	0.No	I.Yes	0.No		
5.2	Facility personnel responsibilities reviewed and/or changed	I.Yes	0.No	I.Yes	0.No		
5.3	Mobilization/shifting of resources	I.Yes	0.No	I.Yes	0.No		
5.4	Changes in commodity procurement	I.Yes	0.No	I.Yes	0.No		
5.5	Staff training or supervision conducted	I.Yes	0.No	I.Yes	0.No		
5.6	Changes in community education or outreach	I.Yes	0.No	I.Yes	0.No		
5.7	Appreciation and acknowledgment of staff based on performance	I.Yes	0.No	I.Yes	0.No		

	Have any decisions and actions resulted from review of RMNCH data at this facility? Please provide specific examples of the types of actions/changes that have been made.	Yes	No	Were any key changes introduced or adopted since last supervision visit?		If yes, describe the key change(s) and other comments.
		I.Yes	0.No	I.Yes	0.No	
5.8	Organization of services changed (e.g., client flow, organization of physical space)	I.Yes	0.No	I.Yes	0.No	
5.9	Others (specify):					
Score for Data Use for Decision-Making						

9. Please explain more about any decisions or actions identified above:

10. Barriers identified for improving quality of care/indicator trends:

11. Recommendations made to the facility staff during this visit, including to address any barriers:

12. Date of next proposed follow-up visit: Date: |_D_|_D_| |_M_|_M_| |_Y_|_Y_|

Table 6. Summary score

Item	Score (%)
Score for data accuracy	
Score for wall chart or other data visualization	
Score for health facility data review process	
Score for data use and decision-making	
Total score	

MCSP is a global United States Agency for International Development (USAID) initiative to introduce and support high-impact health interventions in 25 priority countries to help prevent child and maternal deaths. MCSP supports programming in maternal, newborn, and child health, immunization, family planning and reproductive health, nutrition, health systems strengthening, water/sanitation/hygiene, malaria, prevention of mother-to-child transmission of HIV, and pediatric HIV care and treatment. MCSP will tackle these issues through approaches that also focus on household and community mobilization, gender integration, and digital health, among others.

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