Theme 7: Monitoring & evaluation, and use of data (links with HMIS)

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The Malaria Surveillance System in Tanzania

- Integrates public and private sector data

- Passive data collection through Health Management Information System (HMIS) and eIDRS (mobile reporting)

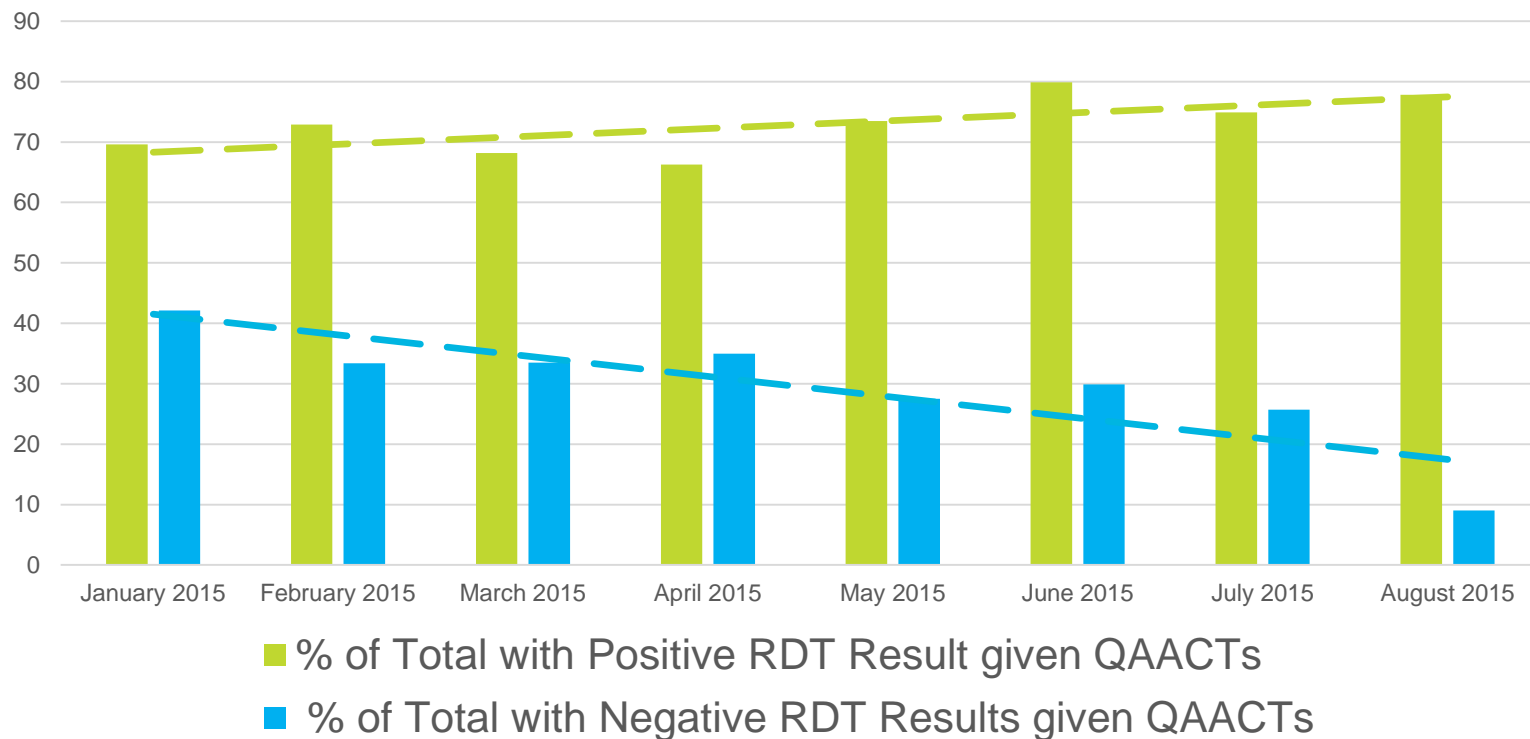- Data housed/analyzed through DHIS2 (open source software)

NMCP and PSI Partnership in Tanzania:

- With support from UNITAID, collaboratively identified opportunities to improve case management in the private sector through consistent use of data for decision making under DHIS2 platform, namely:
  - Improved aggregation of surveillance data to report on global standard indicators, specifically **treatments given**
  - **Quality of Care (QoC) indicators** measured through routine supervision visits
  - **Supervision planning** targeted to the needs of providers
  - Routine use of data through DHIS2 **dashboards**

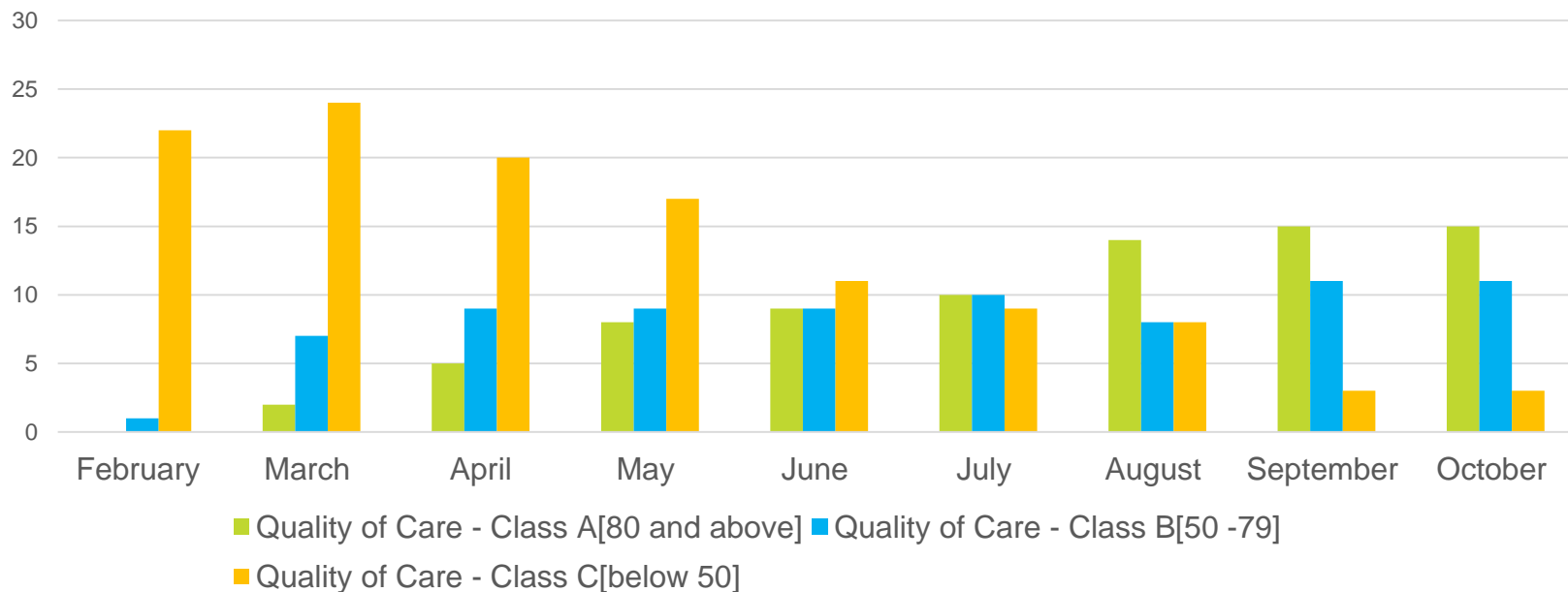psi
Healthy lives, Measurable results,

Results: Tally sheets enable routine monitoring of treatment given in private sector

Treatments given for clients tested with mRDT in private sector
(50 outlets, Morogoro, Mbeya, Tanga)

■ % of Total with Positive RDT Result given QAACTs

■ % of Total with Negative RDT Results given QAACTs

Results: Integrating QoC data into DHIS2 (monitor and plan modules) improves private sector provider capacity

Quality of Care scores for 50 private sector outlets (Morogoro, Mbeya, Tanga)

Legend:
- Quality of Care - Class A[80 and above]
- Quality of Care - Class B[50 -79]
- Quality of Care - Class C[below 50]

QoC Score: assessment of danger signs, RDT procedure, classification of patients' illness, provision of treatment as per guideline, and counseling of patient

Results: Dashboards enable evidence based decision making in the private sector

Lessons Learned

- Treatment indicators, quality of care, and other standard global indicators for fever case management can be integrated into DHIS2 and utilized for decision making

- Mobile reporting tools can be used for real-time reporting of caseload data

- Public/private collaboration required for long-term quality assurance of the private sector

- DHIS2 dashboards are helpful, but need to be simplified for actionable decision-making at multiple levels (provider, supervisor, district management teams, etc.)

- Misalignment of private sector, public sector, and donor reporting needs can create parallel reporting systems

Next steps

- In collaboration with the NMCP and other key partners, support seamless integration of private sector fever case management data (inclusive of treatment and quality) into DHIS2

- Improve DHIS2 dashboards for actionable decision-making

- Include lessons learned on surveillance/monitoring within public/private partnership roadmap (under leadership of WHO)