



Kenya CRVS Best Practices, Challenges and Priorities

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Outline of Presentation

- ❖ Background
- ❖ Current Efforts towards strengthening CRVS
- ❖ Best Practices
 - ❖ UNLIA Taskforce
 - ❖ KHIS Tracker for MCCOD
- ❖ Challenges
- ❖ Priorities



Background

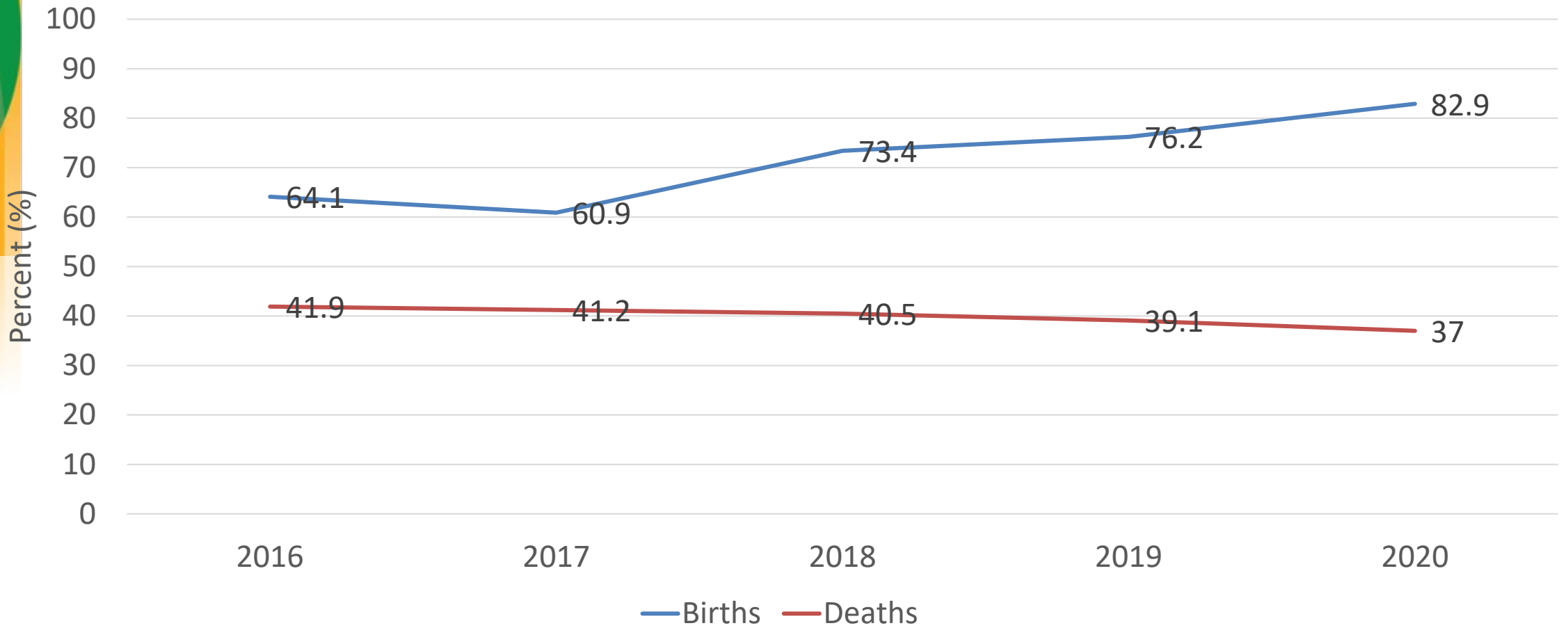
- ❖ The Civil Registration Services Department under the Ministry of Interior and Coordination of National Government in the Office of the President is mandated to Register Births and Deaths.
- ❖ Civil Registration is compulsory in Kenya and is done on agency basis (Health Sector and Communities).
- ❖ CRVS system in Kenya largely paper-based and manual.



Current Efforts to Improve Death Registration and HIS

- ❖ Production and dissemination of Kenya Annual Vital Statistics report.
- ❖ Establishment of CRVS and Mortality Technical working Groups.
- ❖ Rapid Mortality Surveillance (RMS) in Kenya established to determine excess mortality.
- ❖ Developments of Medical Certification of Cause of Death App in KHIS for reporting mortality during RMS ongoing
- ❖ Continuous monitoring and evaluation of our registration process.
- ❖ Government commitment to strengthening CRVS.
- ❖ Use of MCH to register home births for children below 6 months old.
- ❖ Use of Mobile outreach programs in hard to reach and remote areas
- ❖ Demand for birth certificates for school enrolment has boosted registration

Trend of Birth and Death Registration Coverage in Kenya





Kenya UNLIA Task-Force

- ❖ In 2019, UN Legal Identity Expert Group established the UN Legal Identity Agenda (UN LIA) to operationalize target 16.9 on Legal identity for all, including birth registration by 2030.
- ❖ Pilot phase implementation in Africa is on-going and Kenya is one of the 13 pilot countries.
- ❖ UN LIA Kenya Task Force established 2020. Implementation through a joint One UN approach under the UNCT leadership.
- ❖ Country level implementation led by UNICEF and comprises membership from other UN Agencies including; WHO, UNDP, UNFPA, UNHCR, OHCHR, IOM and WFP.
- ❖ Advocating for civil registration as the foundation for legal identity – with birth registration as the entry point and death registration as the exit into the integrated system.



Achievements

- ❖ Progress made towards a harmonized approach to the registration of persons and identity management in Kenya.
- ❖ National Integrated Identity Management System (NIIMS/ “Huduma Namba” was launched in 2019 and envisioned as the “**single source of truth**” on persons’ identity data “*from cradle to the grave*”.
- ❖ High-level co-ordination mechanisms established – inter-Ministerial Co-ordination Committee set up, Chaired by Cabinet Secretary for Interior & Co-ordination of National Government.
- ❖ The government also made great strides in providing an enabling legal framework.
 - ✓ The Huduma Bill, 2020
 - ✓ Enactment of the Data Protection Act, 2019 and appointment of a Data Commissioner



Achievements

- ❖ Business Process Review -birth and death registration processes
- ❖ Review of the current birth and death registration tools
- ❖ Development of birth and death registration SOPs and Vital Statistics SOPs
- ❖ Procurement of end user's equipment's (laptops, Tablets, desktops, printers etc.)
- ❖ Conducted Rapid Mortality Surveillance in six counties; Kajiado, Kisumu, Nairobi, Busia, Siaya and Machakos
- ❖ Sensitization on special populations to ensure inclusion in the Bill.
- ❖ Public participation: Joint UN memo
- ❖ Convening of National CRVS Stakeholders Forum in Nov/Dec 2021.
- ❖ Implementation of Knowledge, Attitudes, and Practice (KAP) survey on birth and death registration.
- ❖ Mid Term Review of the CRS Strategy 2018-2023




Introduction of MCCOD in DHIS2 Tracker

- ❖ With support from WHO, MOH developed a tool for MCCOD
- ❖ This an electronic tool for coding cause of death using ICD 11 embedded tool
- ❖ Developed as a web API in the DHIS2 tracker platform.
- ❖ It is used in the implementation of Rapid Mortality Surveillance.
- ❖ It is used to report mortality data and especially underlying cause of death.
- ❖ Rollout in six pilot counties from March 2021.
- ❖ Easy to use and flexible to accommodate any feature enhancements


DHIS2 Tracker Platform



 **KHIS Tracker**
Kenya Health Information System(KHIS) for Event and Case-based reporting.

KHIS Tracker

Sign in

mumo 

.....

Login using two factor authentication

Sign in

[Forgot password?](#)

For assistance on use of **KHIS Tracker** click [here](#) or send an email to servicedesk@health.go.ke.

Note A: For Aggregate reporting use - KHIS Aggregate- hiskenya.org

Note B: If you had an account for the KHIS Aggregate by 23rd March 2019, please use the same credentials to login to the KHIS Tracker, else request for an account via the MoH



MCCoD App

KHIS Tracker KHIS Tracker

99+ 99+ Search apps

Search for a dashboard Inpatient Morbidity and Mortality Dashboard Malaria MOH 73 SHOW MORE

Inpatient Morbidity and Mortality Dashboard ☆ ⓘ EDIT SHARE FILTER

Malignant-Neoplasms - Last 5 years - Chart - Sex -Discharged Status

Kenya

Year	Green Line (k)	Blue Line (k)
2018	~5.5	~5.5
2019	~6.5	~6.0
2020	7,181	6,172
2021	~7.0	~6.0

7 181

6 172

5 197

Custom Js Css

KHIS Tracker Instance

Action Tracker Management

Indicator Dictionary

ICD-11

RMS - Medical Certificate of Cause of Death

KHIS Aggregate Instance

Health Data Analytics

Data Import Wizard

mfl dhis integration app

Function Maintenance

Manage my apps

Facility Report

Demographics

- Pick an organisation unit
- Kenya
 - Baringo County
 - Baringo Central Sub County
 - Ewalel/Chapchap Ward
 - Kapkomoi Dispensary
 - Kaptorokwa Dispensary
 - Kituro Health Centre**
 - Moi Teachers College Dispensary (Baringo)
 - Riwo Dispensary
 - Seretunin Health Centre
 - Talai Dispensary
 - Talai sec school Dispensary
 - Kabarnet Ward
 - Kapropita Ward
 - Sacho Ward
 - Tenges Ward
 - Baringo North Sub County

Medical Certificate of the Cause of Death Add Event

Past events Download

In-Patient File number	Underlying cause of death	Age	Gender	Date of Death	Event Date	...
7883109	(b). Malaria without parasitological confirmation - Malaria without parasitological confirmation	27	Male	7/16/2021, 12:00:00 AM	7/29/2021, 12:52:05 PM	Edit
	(a). Malaria without parasitological confirmation - Malaria without parasitological confirmation	5			7/28/2021, 10:57:53 PM	Edit

Medical Certificate of the Cause of Death Cancel

Part 1: Demographics

Death Notification No. Event date Facility/Site

In-Patient File Number

Usual residence (county) Usual residence (subcounty)

Usual residence (Ward) Usual residence (village)

Occupation Date of birth Age

Sex Place of birth Date and time of death

Capturing UCOD using ICD 11

Part 2: Medical Data

	Cause of death	Code	Time interval from onset to death
Report disease or condition directly leading to death on line a	<input type="text" value="pneumonia"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> Pick one ▼
The results shown are incomplete			
Destination Entities			
sort: Matching score ▼			
CA40.Z	Pneumonia, organism unspecified		
	Pneumonia ▼ *		
CA40.Y	Other specified pneumonia		
1A07.Y	Other specified typhoid fever		
	Typhoid pneumonia ▼		
1A09.Y/CA...	Salmonella pneumonia		
1A72.Y	Gonococcal infection of other specified sites		
	Gonococcal pneumonia ▼		
1B10.Z	Respiratory tuberculosis, without mention of bacteriological or histological confirmation		
	caseous pneumonia ▼		
1B40.Y	Other specified acute rheumatic fever without mention of heart involvement		
	rheumatic pneumonia ▼		
1B93.2	Pneumonic plague		

Part 2: Medical Data

	Cause of death	Code	Time interval from onset to death
Report disease or condition directly leading to death on line a	<input type="text" value="Pneumonia, organism unspecified"/>	<input type="text" value="CA40.Z"/>	<input type="text" value="5"/> <input type="text" value="Week(s)"/>
Report chain of events 'due to' (b to d) in order (if applicable)	<input type="text"/>	<input type="text"/>	<input type="text"/> Pick one ▼
c	<input type="text"/>	<input type="text"/>	<input type="text"/> Pick one ▼
d	<input type="text"/>	<input type="text"/>	<input type="text"/> Pick one ▼
State the underlying cause	<input type="text" value="a. Pneumonia, organism unspe"/>	<input type="text" value="Pneumonia, organism unspecified"/>	
Other significant conditions contributing to death (time intervals can be included in brackets after the condition)	<input type="text"/>	<input type="text"/>	



Quick Analysis using DHIS2 Event Reports

DHIS 2 Event Reports
RMS Medical Certificate of cause of death -- report
About Home

Aggregated values
Show aggregated event report
Events
Show individual event overview

Data

Program Stage

Select program RMS - Medical Certificate of Cause of Death

Available All

Selected data items ⤴

[DE] MCCOD Usual Residence(County) Remove

[DE] MCCOD Usual Residence(Sub-county) Remove

[DE] MCCOD Date of Birth Remove

Periods

Organisation units

ART Central Sites

ART Facility Type

Beyond Zero Clinics

Facility Ownership

Facility Type

⏪ Update
Favorites
Layout
Options
Download
Embed
Table Chart ⏪

#	Event date	Organisation unit	MCCOD Usual Residence(County)	MCCOD Usual Residence(Sub-county)	MCCOD Date of Birth	MCCOD Age	MCCOD Date and time of Death	MCCOD State the underlying causes (Cause of death)	MCCOD Was surgery performed within the last 4 weeks?	MCCOD Manner of death	MCC Se
1	2021-08-02 17:18:36.976	Jocham Hospital	Kilifi County	Kaloleni Sub County		71.0	2021-07-31T21:00:00.000Z	(a). Cardiac arrest, unspecified - Cardiac arrest, unspecified	No	Disease	Fem
2	2021-08-02 17:13:22.673	Jocham Hospital	Kwale County	Kwale County		46.0	2021-07-27T21:00:00.000Z	(a). Cardiac arrest, unspecified - Cardiac arrest, unspecified	No	Disease	Male
3	2021-08-02 17:06:01.717	Jocham Hospital	Mombasa County	Kisauni Sub County		76.0	2021-07-25T21:00:00.000Z	(a). Acute respiratory acidosis - Acute respiratory acidosis	No	Disease	Male
4	2021-08-02 17:00:24.94	Jocham Hospital	Kilifi County	Kilifi County		46.0	2021-07-25T21:00:00.000Z	(a). Cardiac arrest, unspecified - Cardiac arrest, unspecified	No	Disease	Male
5	2021-08-02 16:54:26.061	Jocham Hospital	Mombasa County	Changamwe Sub County		67.0	2021-07-27T21:00:00.000Z	(a). Cardiac arrest, unspecified -	No	Disease	Male



Challenges

- ❖ Inadequate budgetary allocation.
- ❖ High turnover of registration assistants.
- ❖ COVID-19 adversely affected registration and service delivery
- ❖ Inadequate number of CRS stations 129 vs approx. 345 existing sub counties
- ❖ Lack of a communication strategy to guide advocacy and awareness creation
- ❖ Inadequate capacity of staff and Registration Agents
- ❖ Inadequate staff (we currently operate at below 25pc of authorized est.)



Priorities

- ❖ Scaling up of the MCH registration strategy
- ❖ Expansion of the pool of civil registration agents
- ❖ Digitize paper records and complete development and deployment of CRS electronic system.
- ❖ Strengthen coordination of registration of vital events at the community level by linking assistant chiefs and community health workers.
- ❖ Enhance institutional and human resource capacity.
- ❖ Establish strategic partnerships and improve existing ones.
- ❖ Build the capacity of CRS staff in data processing and analysis.
- ❖ Enhance resource mobilization and utilization strategies.
- ❖ Development of Communication Strategy