

www.healthdatacollaborative.org







A JOINT EFFORT BY COUNTRIES, DEVELOPMENT PARTNERS, CIVIL SOCIETY AND ACADEMIA TO:

- STRENGTHEN NATIONAL HEALTH INFORMATION
 SYSTEMS
- IMPROVE THE QUALITY OF HEALTH DATA
- BUILD CAPACITY TO TRACK PROGRESS TOWARDS
 SUSTAINABLE DEVELOPMENT GOALS



WHY DO WE NEED THE HEALTH DATA COLLABORATIVE APPROACH?



KENYA

PARTNER INVESTMENTS IN DIGITAL HEALTH DATA SYSTEMS THAT ARE **INCOMPATIBLE** WITH DHIS 2 SOFTWARE USED BY HEALTH MINISTRY

ZIMBABWE

PARTNERS REQUESTING REPORTING ON 230 INDICATORS THAT FALL OUTSIDE OF NATIONAL HEALTH PLAN





CAMBODIA DONORS AND HEALTH MINISTRY REQUIRING 19 MONTHLY REPORTING FORMS, OVERWHELMING HEALTH WORKS

EBOLA-AFFECTED COUNTRIES DONOR-DRIVEN, FRAGMENTED DATA SYSTEMS HAMPERED EFFECTIVE USE OF DATA DURING OUTBREAK

HEALTH FACILITY SURVEYS PARTNERS HAVE DEVELOPED AT LEAST 8 TOOLS COLLECTING OVERLAPPING INFORMATION



THIS RESULTS IN

4



FRAGMENTED, UNCOORDINATED DATA SYSTEMS DUPLICATED INVESTMENTS TAKING HEALTH WORKERS' TIME AWAY FROM PATIENT CARE







CHANGING THE WAY WE WORK TOGETHER

PRIMARY STRATEGIES

Alignment of funding and technical support for a single strong country health information system

Package of standards, tools and repository of information available to all countries

OUTPUT

Increased efficiency of domestic and external investments in comparable, timely and accurate health

RESULTS

Strengthened country systems for monitoring programmes and accountability

Better reporting of national and global progress on SDGs











COUNTRIES NEED GOOD QUALITY DATA TO TRACK PROGRESS TOWARD THE HEALTH-RELATED SUSTAINABLE DEVELOPMENT GOALS, INCLUDING UNIVERSAL HEALTH COVERAGE









Technical package of tools and standards to strengthen country data systems





Improve birth and death registrations



Improve facility and community data, including disease surveillance

Improve collection of health workforce data



Improve tracking of health spending



Improve capacity for data analytics and use





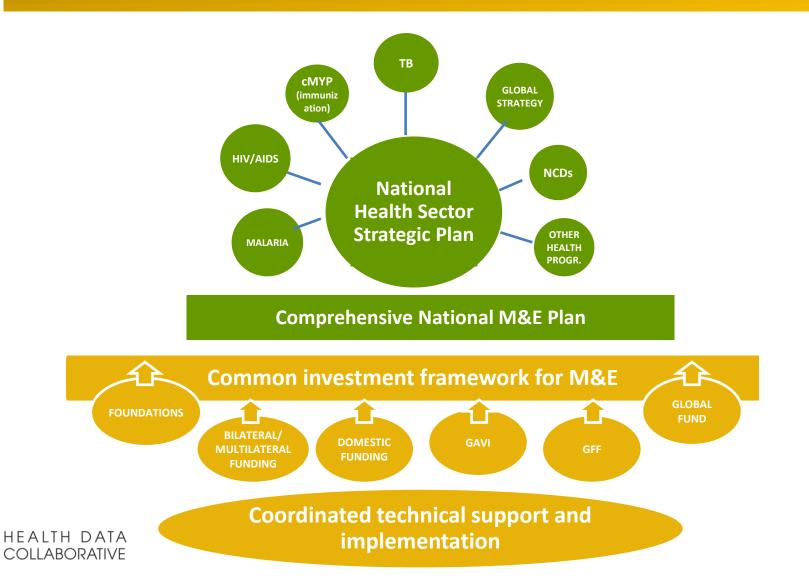


	DELIVERABLES BY WORKING GROUP	
Country and regional engagement	 M&E assessment, planning & costing tool Engagement with 4-5 pathfinder countries + 4 specific needs Collective technical action to support country M&E /HIS priorities 	
Facility and community data	 Package of data standards (RHIS curriculum, indicators, data quality, analyses, use) Joint investment plan for DHIS Quality of care metrics and methodologies Harmonized facility survey indicators, modules 	
Civil Registration and Vital Statistics (CRVS)	E-learning course on CRVSAligned country support and best practices	
Health systems monitoring	 Handbook on national health workforce accounts Package of guidelines and tools for unified resource tracking 	
Digital health systems and interoperability	 Guidelines & standards for national digital health architectures Country strategic digital health investment plans /interoperability lab Functioning use cases (eg. IDSR integrated into HMIS, open health facility registry) 	100 A
Analysis & use	 Country assessments on barriers to data use & best practices Guidance and suite of electronic tools to strengthen institutional capacity 	
Country & global data & statistics	 Global health observatory revamped for health SDG monitoring Open data policy guidance & national health observatories 	1





GETTING BEHIND COUNTRY PRIORITIES



17

COUNTRY ENGAGEMENT APPROACH

Principles of engagement

Country-led with strong country stewardship
 Opportunities for collective action & joint investment
 Broad stakeholder participation

Type of engagement Strategic request for collective action linked to M&E /HIS plans
 Focused request for collective action (i.e. HMIS)
 Joint learning & documenting best practice

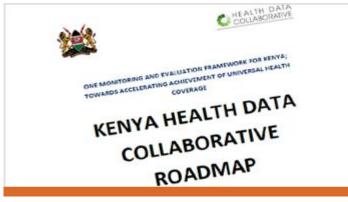
Where we engage

In 2016-17, at least 5 countries (starting with Kenya and Malawi)
 Approach will be scaled up in more countries over subsequent years



KENYA HEALTH DATA COLLABORATIVE (Launched May 18, 2016)





ALL STAKEHOLDERS SUPPORTING KENYA'S M&E PRIORITIES

- DATA ANALYTICS CAPACITY
- QUALITY OF CARE
- KENYA HEALTH DATA
 OBSERVATORY
- CRVS
- MID-TERM REVIEW



"WE NOW EXPECT ALL HEALTH DATA COLLABORATIVE PARTNERS TO PULL IN THE SAME DIRECTION AND IN LINE WITH OUR OWN VISION AND GOALS."

DR NICHOLAS MURAGURI, PRINCIPAL SECRETARY, KENYA MINISTRY OF HEALTH



REGIONAL ENGAGEMENT IN ASIA



Peer learning and review

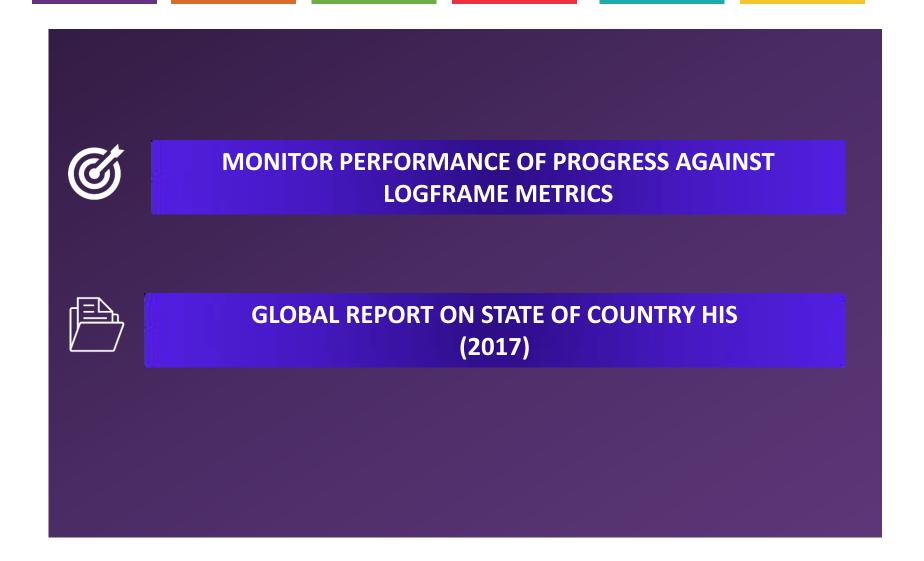
Bangladesh Nepal, Philippines, Cambodia, Bhutan, Indonesia, Myanmar and South Africa

















HDC WORK WILL ENGAGE & LEVERAGE DATA EFFORTS OF GLOBAL HEALTH INITIATIVES & NETWORKS









