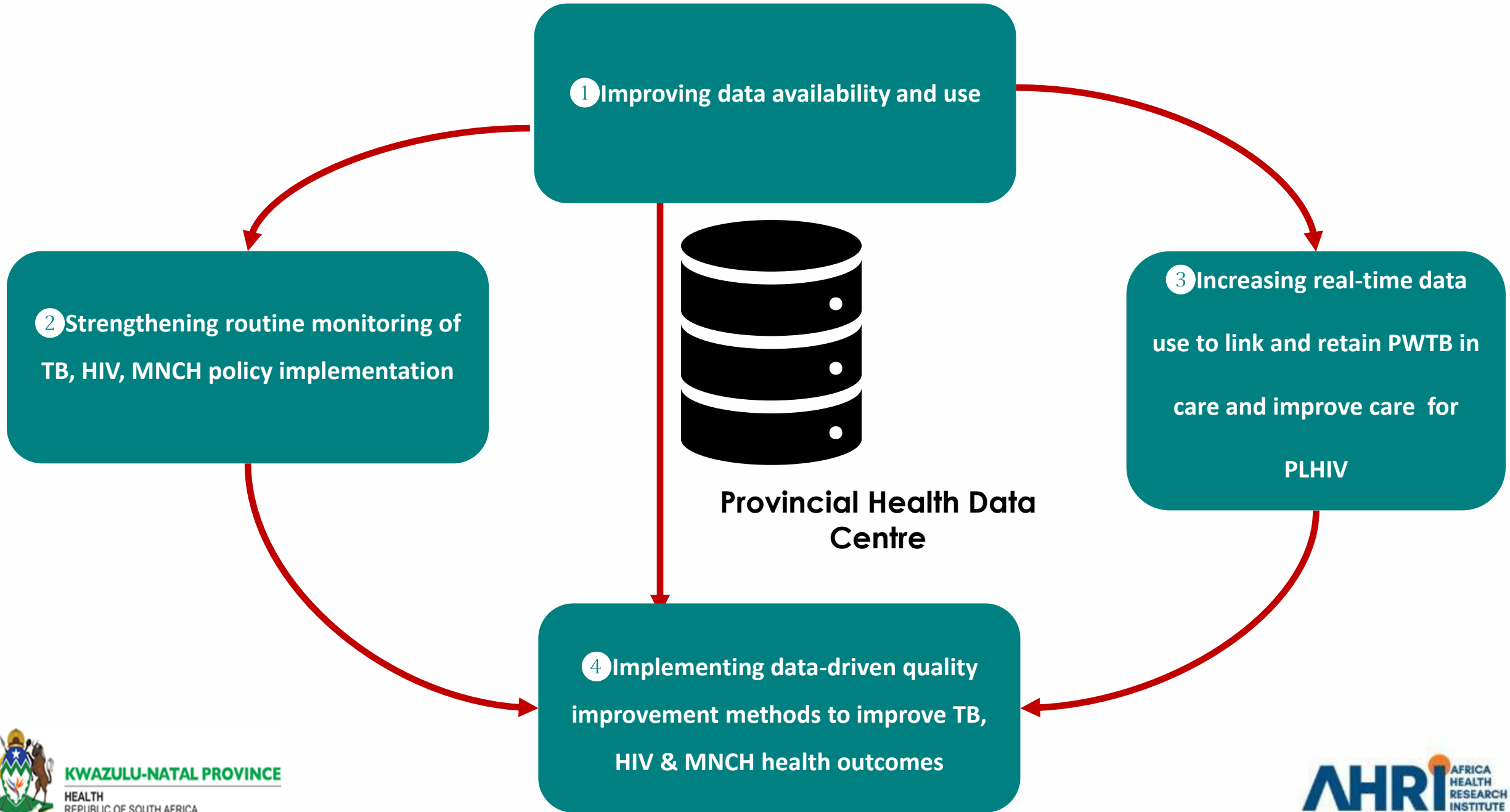


Effective Data Use Project

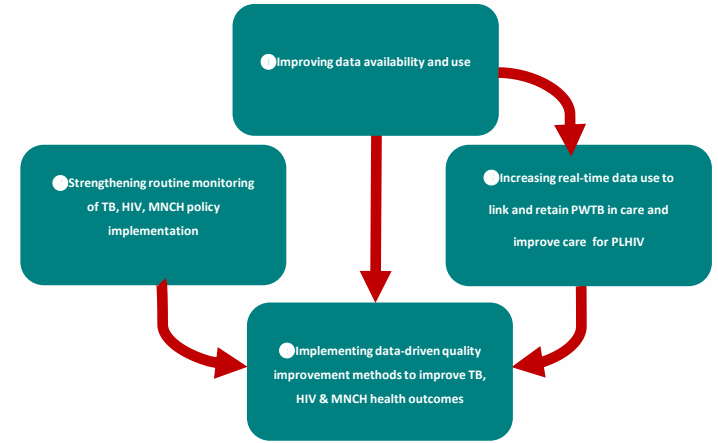
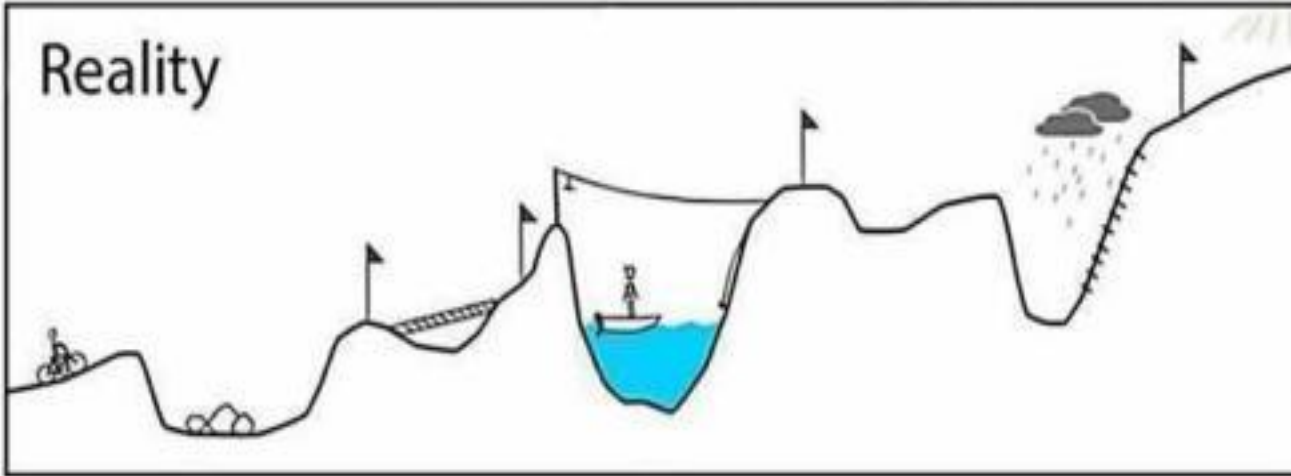
AWACC 20 October 2023



Your plan



Reality



How can we impact the data use environment to prepare for a resource like the KZN Data Centre?

How can we impact the data use environment to prepare for a resource like the KZN Data Centre?

IT Audit

Data Needs
Assessment

Data Skills Audit

Data Skills Training

Data Skills Training

Overview

Aimed to develop the data skill capacity of relevant staff (e.g., clinicians, FIO, data capturers, managers, etc.) through mentorship, training and coaching in selected facilities.

Data pipeline consisted of **5 components** with a focus on the TB, HIV and Maternal Health Programs

Target audience –
Clinicians
TB, HIV & MH Programs, Data Capturers, FIO

Duration – NIDS training in March, Data Pipeline April-August, each month different component trained on

Delivery of trainings-
Mentoring was one on one, group sessions, formal and informal content

Mentorship agreement-
Developed and completed by mentor and mentee

Data Pipeline Components

1

Understanding data elements at the point of care ✓

2

Capturing from source documents into information system (DHIS/Tier) ✓

3

Accessing information system for purpose of retrieving /viewing data and extracting reports ✓

4

Accessing DHIS2 dashboards and manipulating data into useful tables /graphs ✓

5

Presenting data for identifying gaps and making decisions, and developing QIPs ✓

Training Content

Data Pipeline Components	Training Content
1. Understanding data elements	<ul style="list-style-type: none"> Data elements on TB, HIV & MH Programs Case studies - different scenarios to test how well the training of data elements pertaining to TB, HIV and MH programs was understood
2. Capturing source documents into information systems	<ul style="list-style-type: none"> Clinical Stationery - TB Case Identification Register & Tick Register Data capturers/FIOs to capture data on DHIS2 from source documents
3. Accessing information system for purpose of retrieving /viewing data and extracting reports	<ul style="list-style-type: none"> Retrieving reports on Tier.net and interpreting the data on the reports <ul style="list-style-type: none"> VL Overdue list, VL Unsuppressed list, VL Cascade list, Patient Appointment list, Data Validation List, Workload report , Facility Management Report
4. Accessing DHIS2 dashboards and manipulating data into useful tables /graphs	<ul style="list-style-type: none"> Manipulating data on DHIS2 Dashboards on TB & HIV programs Confidently identify trends within the data Pre-recorded audio-visual presentation DHIS2
5. Presenting data for identifying gaps and making decisions, and developing QIPs	<ul style="list-style-type: none"> How to present data for decision making <ul style="list-style-type: none"> Knowing your audience, right data & format, communicating clearly & effectively , types of graphs Introduction to QI and QIPs

Component 2

TB Identification Register

TB Identification Register

health Department: Health REPUBLIC OF SOUTH AFRICA		TUBERCULOSIS IDENTIFICATION REGISTER														
Specimen Barcode Sticker	Patient Folder Number/HPRN	Surname (Top row)	Date of birth (Top row) DD/MM/YYYY	Gender M/F	Physical Home Address/ Land Mark	Nearest	Telephone / Cellphone	TB symptoms present	Risk Groups							
		Name(s) (Bottom Row)	Age (bottom row)					Y/N (Top Row)	TB Contact Y/N (Top Row)	HIV Status (Pos/Neg/Unk)	Previously treated for TB (Y/N)	Diabetes Mellitus	Pregnant	Silicosis		
								if Yes (Code) (bottom row)	DS-TB/DR- TB/Unk (Bottom Row)							
																1
																2

Affix NHLS
barcode/or write
barcode on

HPRN is
system
generate
d number
from
HPRS

Must have landmark
and not a P.O.BOX
address

Code must
be aligned
to TB
register
instructions

Includes a person
who has had TB in
the last two years

TB Identification Register

															Version GW20/12					
															Health Facility Name: _____		Start Date: _____		End Date: _____	
RR- Rifampicin Resistant , RS - Rifampicin susceptible, RU - Resistance test unsuccessful										TB Tests					TB Diagnosed (DS- TB and DR-TB)			Remarks Urine LF- LAM assay Lot Number (if conducted)		
Bacteriological Tests					Non-Bacteriological tests					TB treatment Start Date DD/MM/YYYY	Died before Treatment Start (Tick)	Lost to follow-up (Tick)	TPT Start Date DD/MM/YYYY							
Xpert test		Rif Resistance profile	Culture		LPA/DST Results		X-Ray Result (top row)	Urine LF- LAM Result (Pos/Neg) (top row)	Tuberculin Skin Test Result (Pos/Neg) (top row)					Other Tests Results (top row)						
Date Specimen collected DDMMYYYY	Date Result Received DD/MM/YYYY		Xpert Test Result (Pos/Neg/Trace/ Unsc)	Date specimen collected DD/MM/YYYY	Result (Neg/Pos/ Cont)	RR/RS	HR/HS	Date DDMMYYYY (bottom row)	Date DDMMYYYY (bottom row)	Date DDMMYYYY (bottom row)	Date DDMMYYYY (bottom row)	TB treatment Start Date DD/MM/YYYY	Died before Treatment Start (Tick)	Lost to follow-up (Tick)	TPT Start Date DD/MM/YYYY					
1	1	1																		
2	2	2																		

Leak of the sputum or poor-quality retest needs to be recorded on second line.

Contaminated

HR Isoniazid Resistant ,
HS -Isoniazid susceptible

TB Identification Register

												Total number with known HIV status	Total number TB Contacts Pregnant	Total number previously treated	Total number Diabetes Mellitus	Total number pregnant
TOTALS:																
1 Place /Stick/Barcode from laboratory specimen form, eg. AAGX8459		2. HPRN is system generated number from HPRS		3 Full detailed address of where the patient can be traced during the day/ landmark (where the client do not have a formal address, easily recognizable building, shop or house nearest to the patient's place of residence can be used) next to where the patient resides.				4. Use the coding below for TB symptoms 1 = Cough; 2 = Fever of more than 2 weeks, 3= Unexplained weight loss/Faiure to thrive in children; 4 = Drenching night sweat.								
Compiled by:.....		Signature:.....		Date:.....				Verified by:.....								
								Signature:.....								

Clinician conducting test

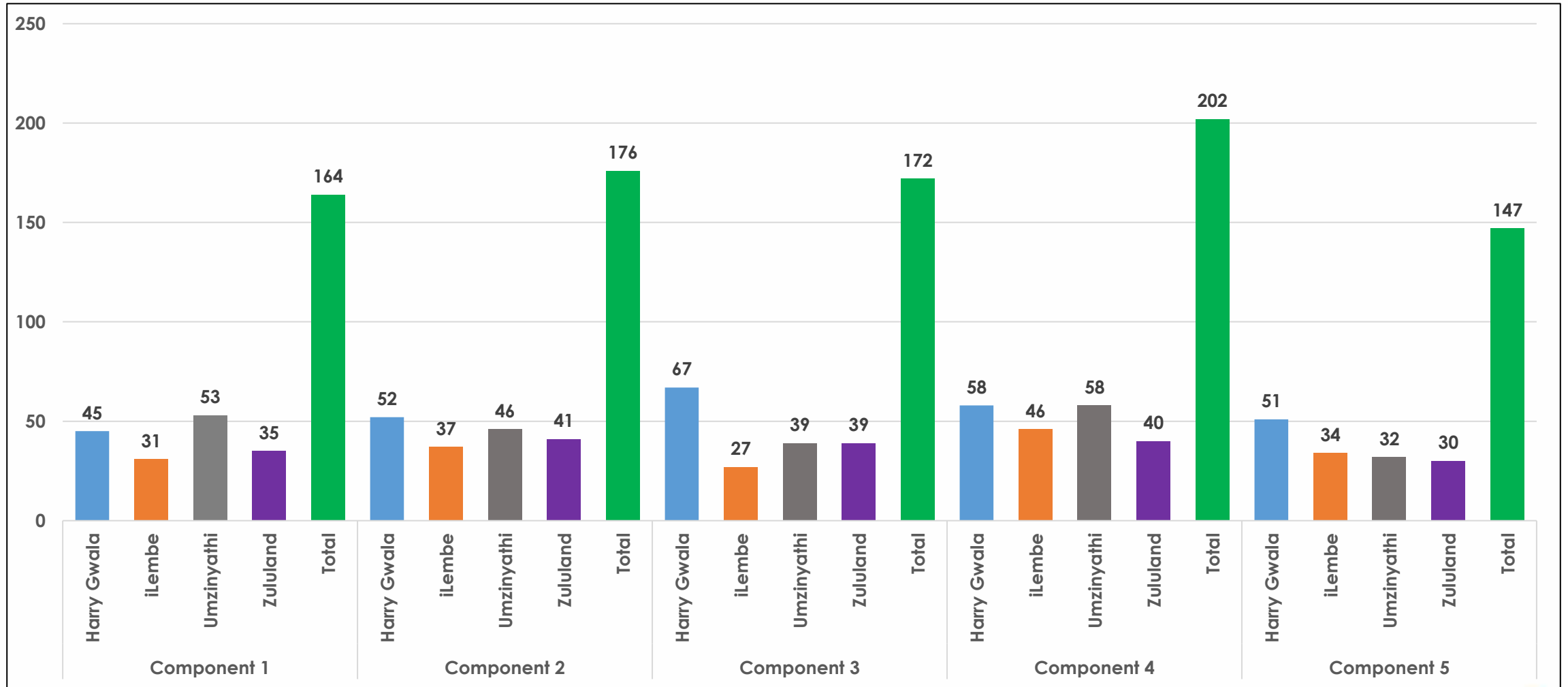
Clinicians signature

Last date of the last entry

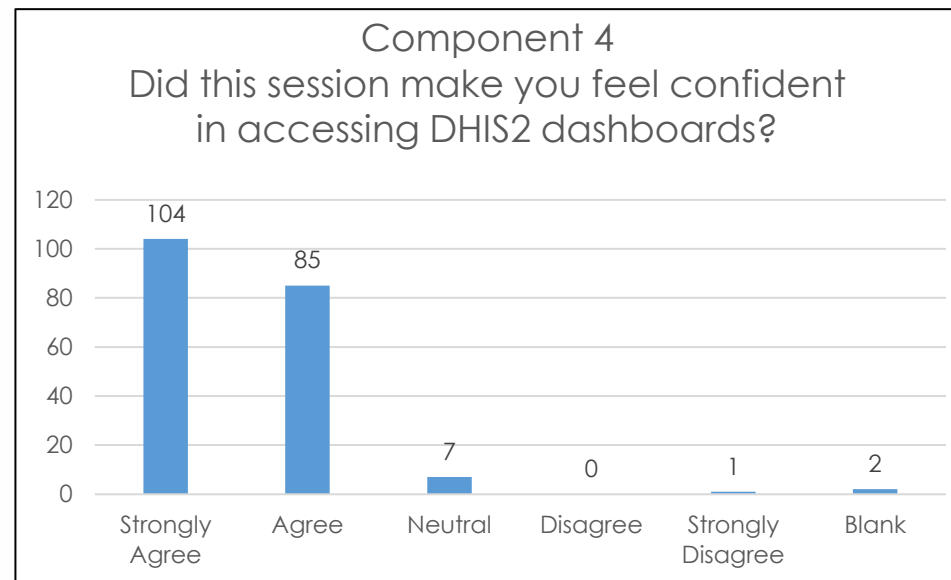
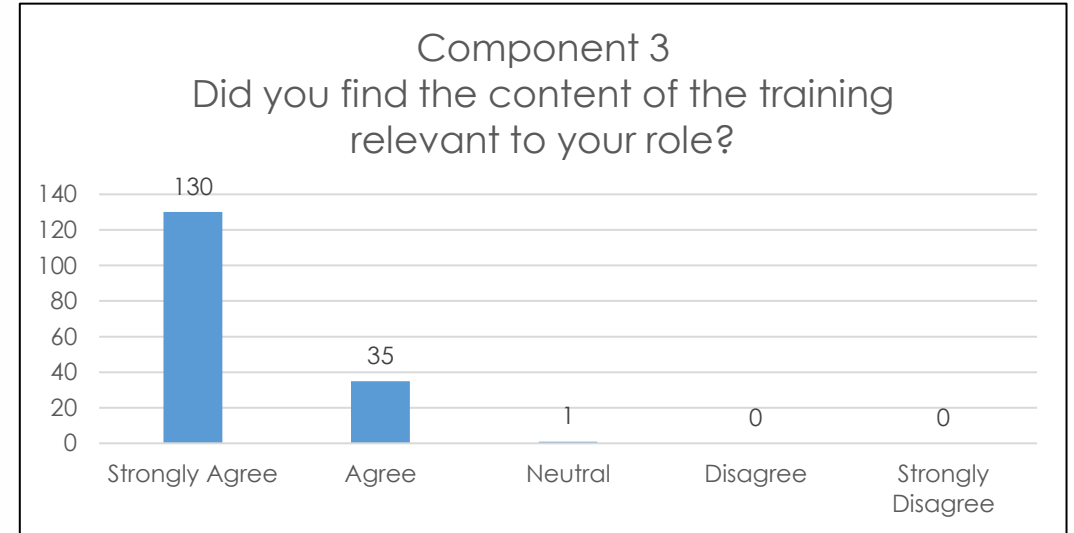
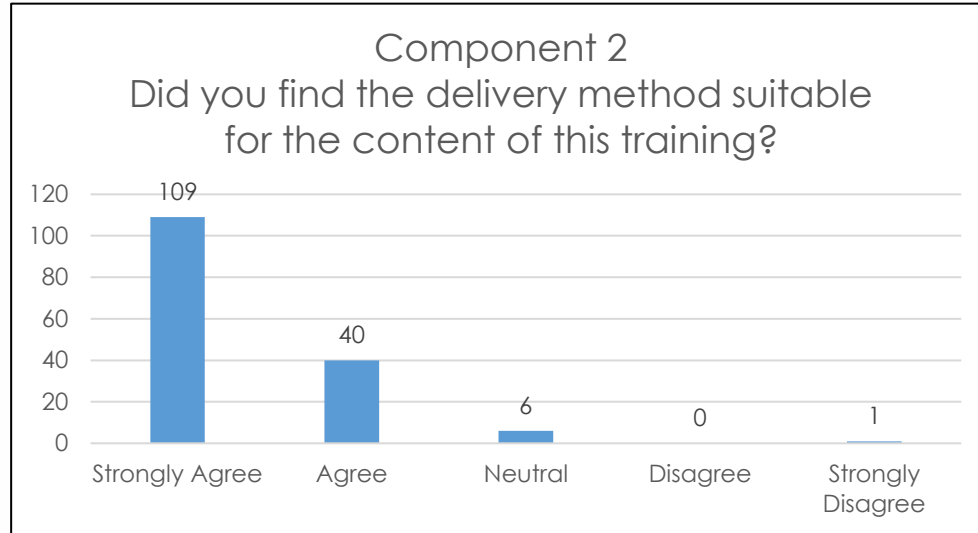
OM to verify

OMs signature

Staff Trained Per Component



Training Evaluation Feedback





Umzinyo

• Harry Gwala District



Thank you