

DHIS2 INSIGHTS FOR ENHANCING NUTRITION PROGRAMME

LUANG PRABANG PROVINCE

Outline

Introduction

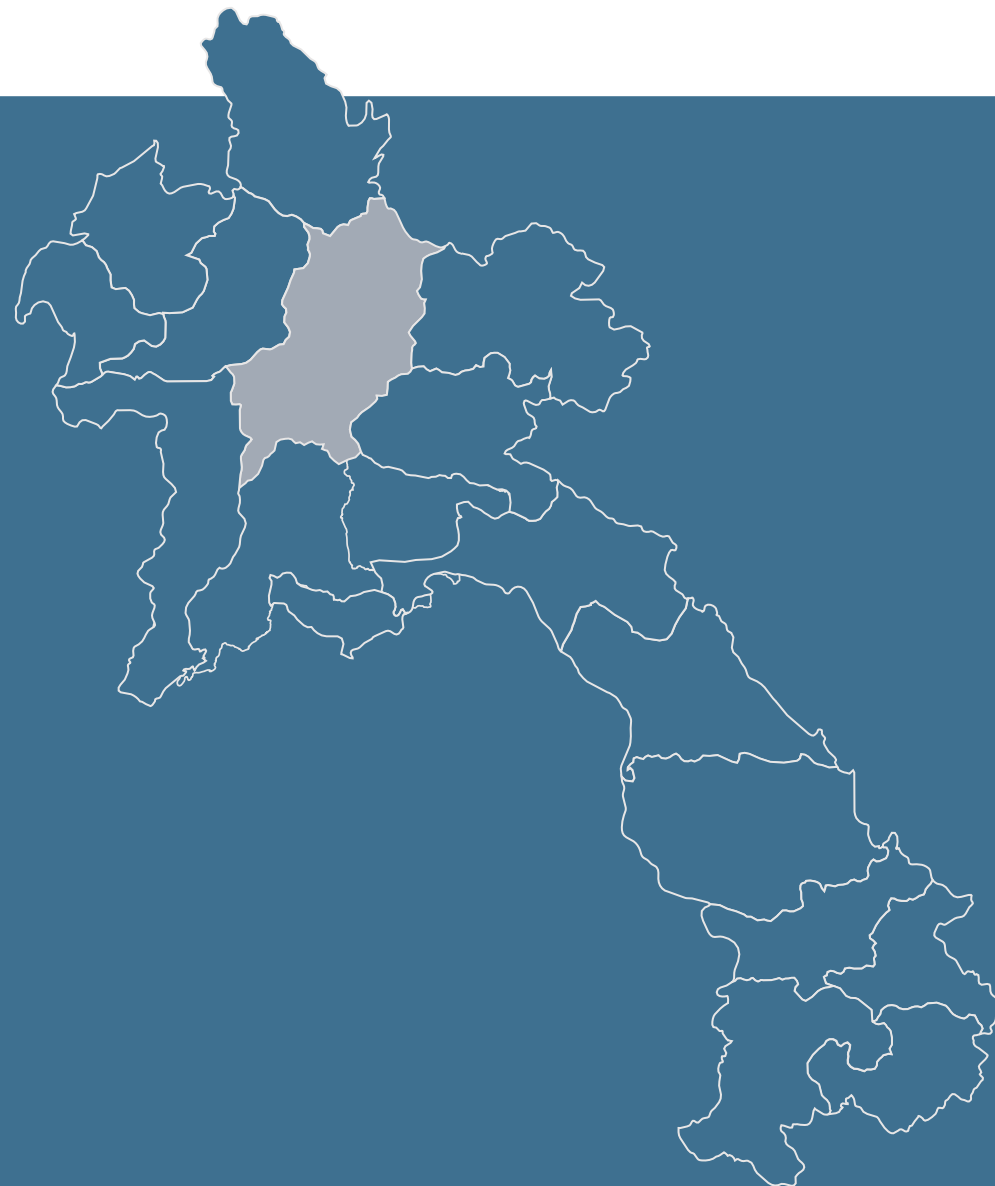
Methodology

Findings

Scorecard

Issues and Challenges

Recommendations



INTRODUCTION

Health system profile

- 1 Provincial Hospital (PH)
- 12 District Hospitals (DH)
- 82 Health Centers (HC)

Population Estimate in 2023

- 477,651 total population
- 45,641 children under five years
- 14,330 pregnant women

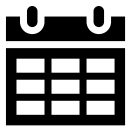


ANALYSIS METHODOLOGY – DATA QUALITY



01. COMPLETENESS

Number of health facilities reports actual against total expected reports



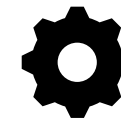
04. TIMELINESS

Number of health facilities reported on time out of total number of health facilities



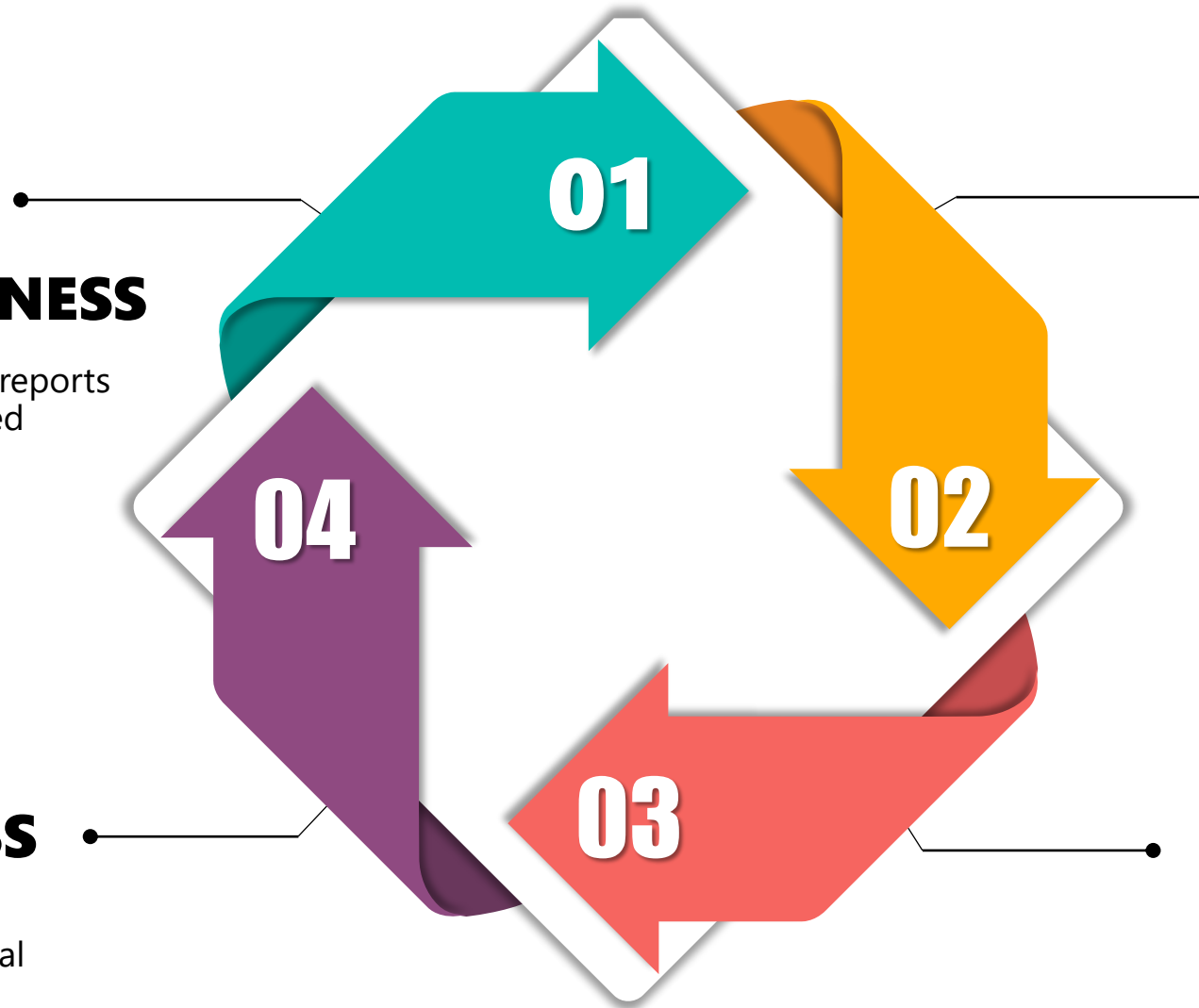
02. CORRECTNESS

Accuracy: Districts with values that are extreme outliers (at least 3 standard deviations (SD) from the mean)



03. CONSISTENCY

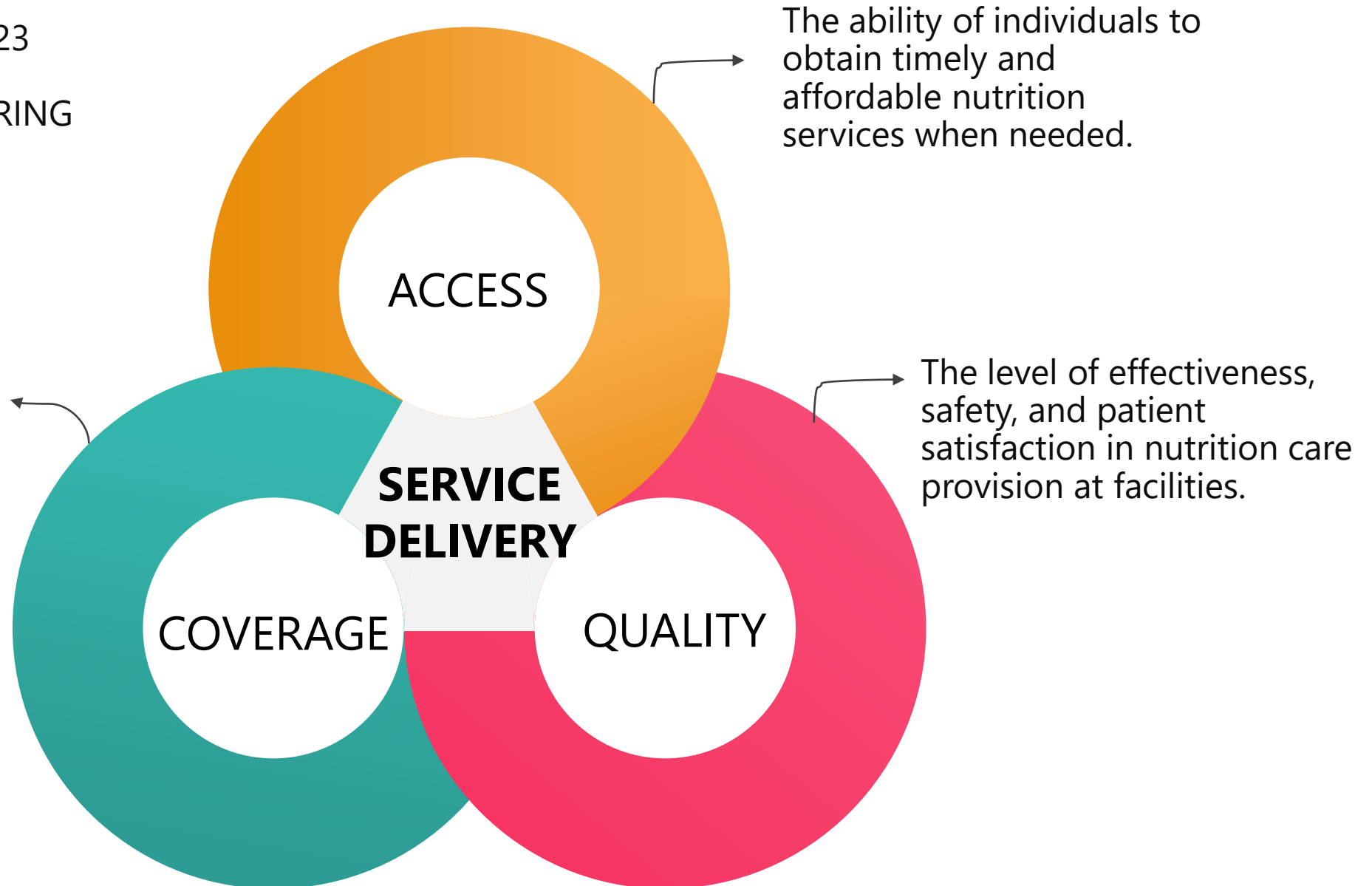
Districts whose ratio of two indicators is at least 33% difference from Province ratio



ANALYSIS METHODOLOGY – SERVICE DELIVERY

PERIOD: JAN – DEC 2023
SOURCE: DHIS2
METHODOLOGY: SCORING

The extent to which nutrition services are available and reach the population they are intended to serve.



Implementation Data Reporting in LPB

Staff responsible for report data from dhis2

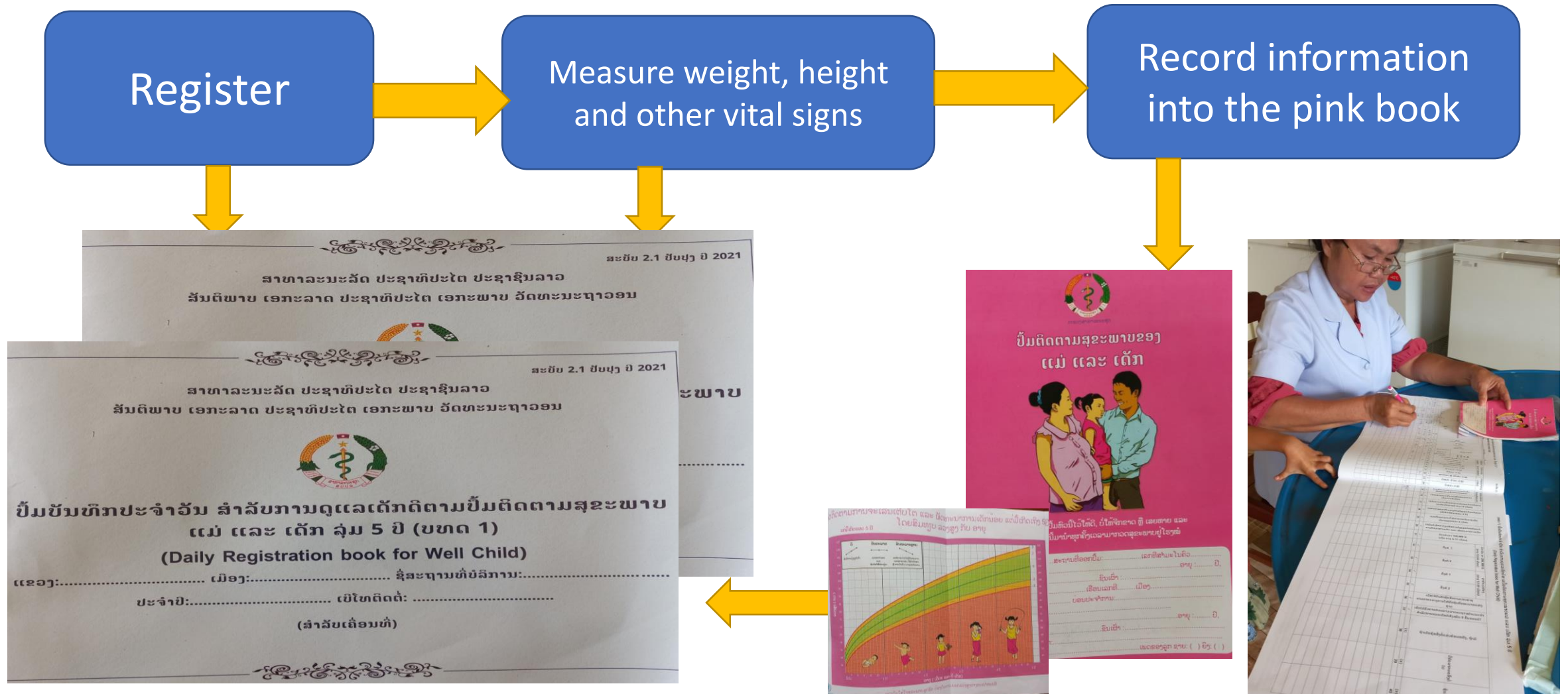
- There are at least 2 individuals responsible for data entry at each facility
- There are 2 individuals responsible for monitoring and verifying data at the district level
- There are 2 individuals responsible for monitoring and verifying data at the province level, along with 2 assistants



Period of reporting data

- Community hospitals should submit data by the 5th of the following month
- Data at the district level should be verified and modified by the 10th of the following month
- Data at the province level should be verified and modified by the 15th of the following month

Process of well-child screening



Summarize and report on nutrition works

Count all the records from well-child notebook

Record into nutrition work report form

ສະບັບ 2.1 ປັບປຸງ ປີ 2021

ສາທາລະນະລັດ ປະຊາທິປະໄຕ ປະຊາຊົນລາວ

ສັນຕິພາບ ເອກະລາດ ປະຊາທິປະໄຕ ເອກະພາບ ວັດທະນະຖາວອນ



ປຶ້ມບັນທຶກປະຈຳວັນ ສຳລັບການດູແລເດັກດີຕາມປຶ້ມຕິດຕາມສຸຂະພາບ
ແມ່ ແລະ ເດັກ ລຸ່ມ 5 ປີ (ບຫດ 1)
(Daily Registration book for Well Child)

ແຂວງ:..... ເມືອງ:..... ຊື່ສະຖານທີ່ບໍລິການ:.....
ປະຈຳປີ:..... ເປີໂຫຕິດຕໍ່:

(ສຳລັບເຄື່ອນທີ່)

Report into DHIS2
system



dhis2

ລາຍງານ 1: ສະຫຼຸບລາຍງານປະຈຳເດືອນ ການກວດສຸຂະພາບເດັກດີ ເດັກລຸ່ມ 5 ປີ

ປະຈຳເດືອນ:..... ເດືອນ:..... ສະຖານທີ່ບໍລິການ:.....

ລ/ດ	ອົງປະກອບສຸຂະພາບ	ຈຳນວນ	ເດືອນ
ໜ້າທີ 1: ສະຫຼຸບລາຍງານປະຈຳເດືອນ			
1	ຈຳນວນເດັກທີ່ມາກວດທັງໝົດ	118	
2	ຈຳນວນເດັກທີ່ມາກວດໄດ້ຕາມການກວດກາອາຫານທຳອິດ	88	
3	ຈຳນວນເດັກທີ່ມາກວດໄດ້ຕາມການກວດກາອາຫານທຳອິດ	60	
4	ຈຳນວນເດັກທີ່ມາກວດກາໄດ້ຕາມການກວດກາອາຫານທຳອິດ (ບຫດ 2)	148	
5	ຈຳນວນເດັກທີ່ມາກວດກາໄດ້ຕາມການກວດກາອາຫານທຳອິດ (ບຫດ 2)	0	
ໜ້າທີ 2: ສະຫຼຸບລາຍງານປະຈຳເດືອນ (ຕາມສະຖານທີ່)			
6	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -2 SD	138	
7	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -2 SD	0	
8	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -2 SD	10	
9	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -2 SD	6	
10	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -3 SD	4	
11	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -3 SD	0	
ໜ້າທີ 3: ສະຫຼຸບລາຍງານປະຈຳເດືອນ (ຕາມສະຖານທີ່)			
12	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -1 SD + 1 SD	102	
13	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -1 SD + 1 SD	0	
14	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ +1 SD + 2 SD	6	
15	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ +1 SD + 2 SD	0	
16	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -1 SD -2 SD	3	
17	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -1 SD -2 SD	0	
18	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ +2 SD	1	
19	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ +2 SD	0	
20	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -2 SD ຫາ -3 SD	2	
21	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -2 SD ຫາ -3 SD	0	
22	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -3 SD	4	
ໜ້າທີ 4: ສະຫຼຸບລາຍງານປະຈຳເດືອນ (ຕາມສະຖານທີ່)			
23	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -2 SD	134	
24	ຈຳນວນເດັກທີ່ມາກວດ ຕາມສະຖານທີ່ ຫຼື ເທົ່າກັບ -2 SD	0	

Integrated, Fix and outreach services



ການບໍລິການເຊື່ອມສານຂັ້ນຊຸມ
ຊົນ (Integrated outreach
services)

- ການບໍລິການເຊື່ອມສານຂັ້ນຊຸມຊົນ (Integrated outreach services) ໄດ້ຈັດຕັ້ງປະຕິບັດຮ່ວມກັບ ວຽກງານອື່ນໆເຊັ່ນ: ການກວດສຸຂະພາບ ເດັກນ້ອຍ, ການກວດສຸຂະພາບໃນໄລຍະຖືພາ, ການສຶກສາຊົນ, ການວາງແຜນຄອບຄົວ,...

Nutrition monitoring at school



Nutrition reporting form

ລາດັບ	ສິ່ງປະກອບຂໍ້ມູນ	ຈຳນວນ	ເຄື່ອນທີ່
ກ. ວາຍງານເດັກນ້ອຍ			
1	ຈຳນວນເດັກມາກວດທັງໝົດ	160	
2	ຈຳນວນເດັກເພດຊາຍໄດ້ຮັບການກວດກ້າມຕອງທັງໝົດ	91	
3	ຈຳນວນເດັກເພດຊາຍໄດ້ຮັບການກວດກ້າມຕອງທັງໝົດ	69	
4	ຈຳນວນເດັກໄດ້ເຂົ້າມາກວດກ້າມຕອງພິເສດພາຍໃຕ້ການສົ່ງເສີມຂອງເດືອນ (ບາດ 2)	160	
5	ຈຳນວນເດັກທີ່ກວດພົບການຜິດປົກກະຕິ ອື່ນໆ (ໃນການມາ ກວດທັງພາຍໃຕ້ຂອງເດືອນ)		
ຂ. ນ້ຳໜັກ/ອາຍຸ (ນ້ຳໜັກຫຼຸດລົງມາດຕະຖານ - Underweight)			
6	ຈຳນວນເດັກທີ່ມາກວດ ທັງພາຍໃຕ້ ຫຼາຍກວ່າ ຫຼື ເທົ່າກັບ -2 SD ຂຶ້ນໄປ	136	
7	ຈຳນວນເດັກທີ່ມາກວດ ທັງພາຍໃຕ້ ຕ່ຳກວ່າ -2 ຫາ -3 SD	19	
8	ຈຳນວນເດັກທີ່ມາກວດ ທັງພາຍໃຕ້ ຕ່ຳກວ່າ -3 SD	5	
ລວມ		160	0
ຄ. ນ້ຳໜັກ/ວຽງຫຼາງ (ອ່ອນ - Wasting)			
9	ຈຳນວນເດັກທີ່ມາກວດ ທັງພາຍໃຕ້ ເທົ່າກັບ -1 ຫາ +1 SD		
10	ຈຳນວນເດັກທີ່ມາກວດ ທັງພາຍໃຕ້ ຫຼາຍກວ່າ +1 ຫາ +2 SD		
11	ຈຳນວນເດັກທີ່ມາກວດ ທັງພາຍໃຕ້ ຕ່ຳກວ່າ -1 ຫາ -2 SD	148	
12	ຈຳນວນເດັກທີ່ມາກວດ ທັງພາຍໃຕ້ ຫຼາຍກວ່າ +2 ຫາ +3 SD		

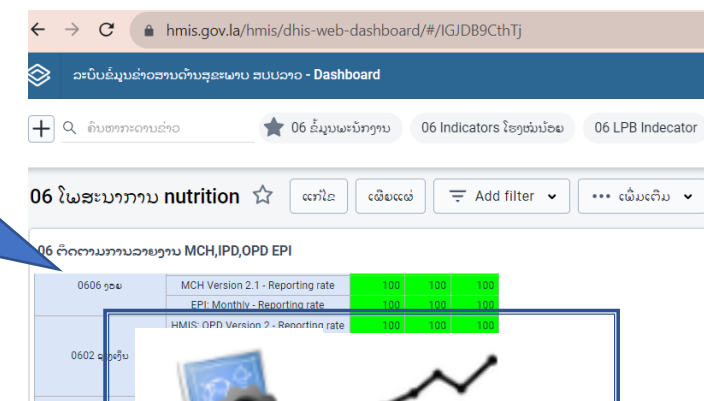
Data entry



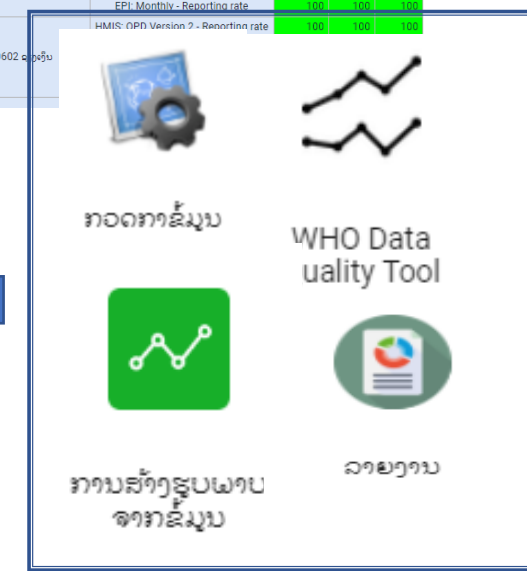
Data quality check



Data quality check using dashboard and other applications inside the system



Use the data to analyze and monitor the progress of the work, and create monthly, quarterly, 6-month, and annual summary reports



Dhis2 MONITOR THE COMPLETION AND TIMELY REPORTING

Search for a dashboard

★ 06 ຂໍ້ມູນພະນັກງານ

06 Indicators ໂຮງໝໍນ້ອຍ

06 LPB Indicator

06 ຂໍ້ມູນກວດເຂດຕອນອກ

06 ຂໍ້ມູນການຕາຍ

06 ຂໍ້ມູນການເກີດ

06 ຂໍ້ມູນນອນໂຮງໝໍ

06 ຂໍ້ມູນປະຊາກອນ

Organisation unit	Data / Period	November 2023	December 2023	January 2024
0601 Louangphabang	HMIS: OPD Version 2 - Reporting rate	100	100	100
	HMIS: IPD Version 2 - Reporting rate	100	100	100
	MCH Version 2.1 - Reporting rate	100	100	100
	EPI: Monthly - Reporting rate	100	100	100
0603 Nan	HMIS: OPD Version 2 - Reporting rate	100	100	100
	HMIS: IPD Version 2 - Reporting rate	100	100	100
	MCH Version 2.1 - Reporting rate	100	100	100
	EPI: Monthly - Reporting rate	100	100	100
0612 Phonthong (Louangphabang)	HMIS: OPD Version 2 - Reporting rate	100	100	100
	HMIS: IPD Version 2 - Reporting rate	100	100	100
	MCH Version 2.1 - Reporting rate	100	100	100
	EPI: Monthly - Reporting rate	100	100	100
06 PH Louangphabang	HMIS: OPD Version 2 - Reporting rate	100	100	100
	HMIS: IPD Version 2 - Reporting rate	100	100	100
	MCH Version 2.1 - Reporting rate	100	100	100
	EPI: Monthly - Reporting rate	100	100	100
0605 Nambak	HMIS: OPD Version 2 - Reporting rate	100	100	100

November 2023, December 2023, January 2024				
Organisation unit / Data	MCH Version 2.1 - Reporting rate on time	HMIS: OPD Version 2 - Reporting rate on time	HMIS: IPD Version 2 - Reporting rate on time	EPI: Monthly - Reporting rate on time
06 PH Louangphabang	100	100	83.3	100
0601 Louangphabang	100	100	100	87.5
0602 Xiangngeun	100	100	100	100
0603 Nan	100	100	100	91.7
0604 Pak-ou	100	100	95.2	90.5
0605 Nambak	87.5	100	95.8	100
0606 Ngoy	100	100	100	95.8
0607 Pakxeng	87.5	100	100	91.7
0608 Phonxai	96.7	100	100	100
0609 Chomphet	90	90	90	100
0610 Viangkham (Louangphabang)	100	100	100	100
0611 Phoukhoun	94.4	100	94.4	100

06 ອັດຕາລາຍງານຄົບຖ້ວນບຸກຄົນ

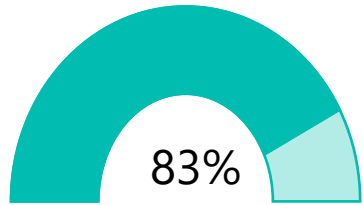
		August 2023	September 2023	October 2023	November 2023
06 Louangphabang	IPD Event (For Completeness) - Reporting rate	45.8	42.7	40.6	40.6
	EPI: Child Event (For Completeness) - Reporting rate	55.2	47.9	43.8	43.8
	EPI: Woman Event (For Completeness) - Reporting rate	39.6	25	31.3	31.3
	MCH: Child Mortality Event (For Completeness) - Reporting rate	3.2	7.5	5.4	5.4
	MCH: Maternal mortality Event (For Completeness) - Reporting rate	9.5	2.1	2.1	2.1
06 PH Louangphabang	IPD Event (For Completeness) - Reporting rate	100	0	100	100
	EPI: Child Event (For Completeness) - Reporting rate	100	0	0	0
	EPI: Woman Event (For Completeness) - Reporting rate	0	0	0	0

06 ອັດຕາລາຍງານທັນເວລາບຸກຄົນ

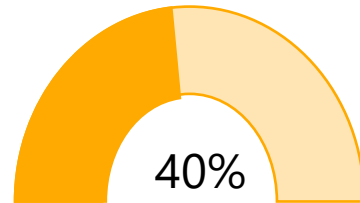
		August 2023	September 2023	October 2023	November 2023
06 Louangphabang	IPD Event (For Completeness) - Reporting rate on time	0	0	0	0
	EPI: Child Event (For Completeness) - Reporting rate on time	0	0	0	0
	EPI: Woman Event (For Completeness) - Reporting rate on time	0	0	0	0
	MCH: Child Mortality Event (For Completeness) - Reporting rate on time	0	0	0	0
	MCH: Maternal mortality Event (For Completeness) - Reporting rate on time	0	0	0	0
06 PH Louangphabang	IPD Event (For Completeness) - Reporting rate on time	0	0	0	0
	EPI: Child Event (For Completeness) - Reporting rate on time	0	0	0	0

KEY FINDINGS

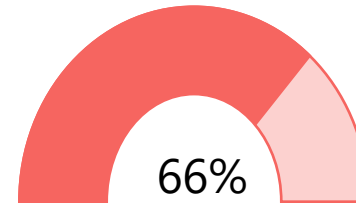
ANC
COVERAGE



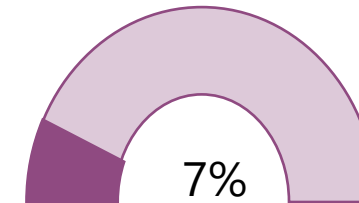
ANC EARLY
REGISTRATION



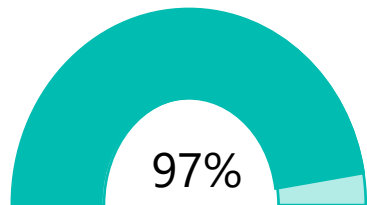
ANC 90 IFA
TABLETS



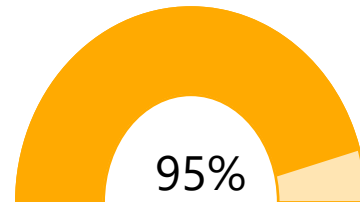
ANC
ANAEMIA



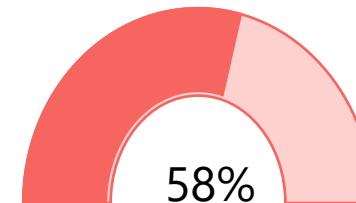
EARLY INITIATION OF
BREASTFEEDING



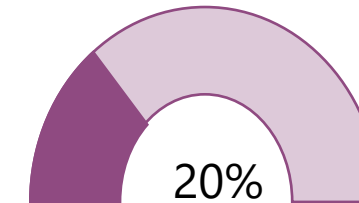
EXCLUSIVE BREASTFEEDING
UNTIL DISCHARGE



VITAMIN-A
SUPPLEMENTATION



DEWORMING



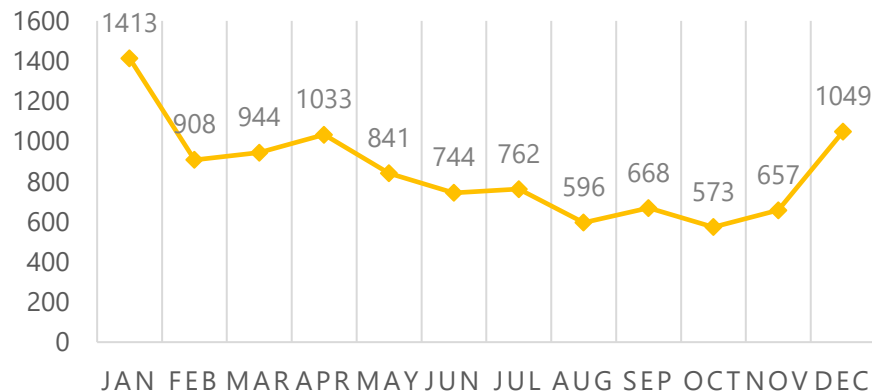
28%
STUNTING

6%
WASTING

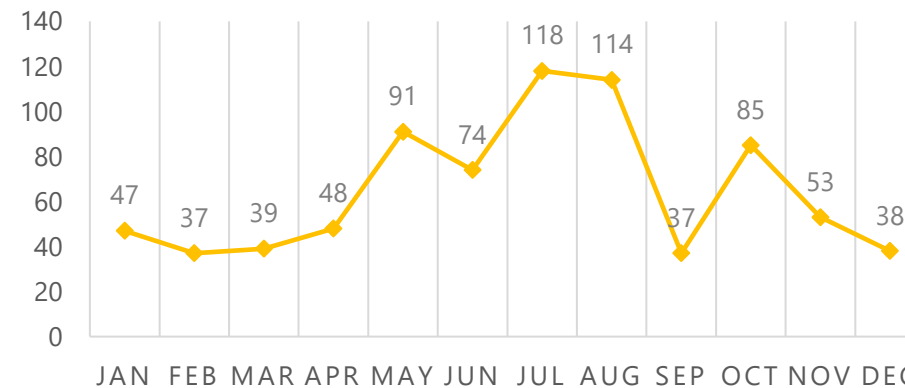
19%
UNDERWEIGHT

5%
OVERWEIGHT

DIARRHOEA CASES



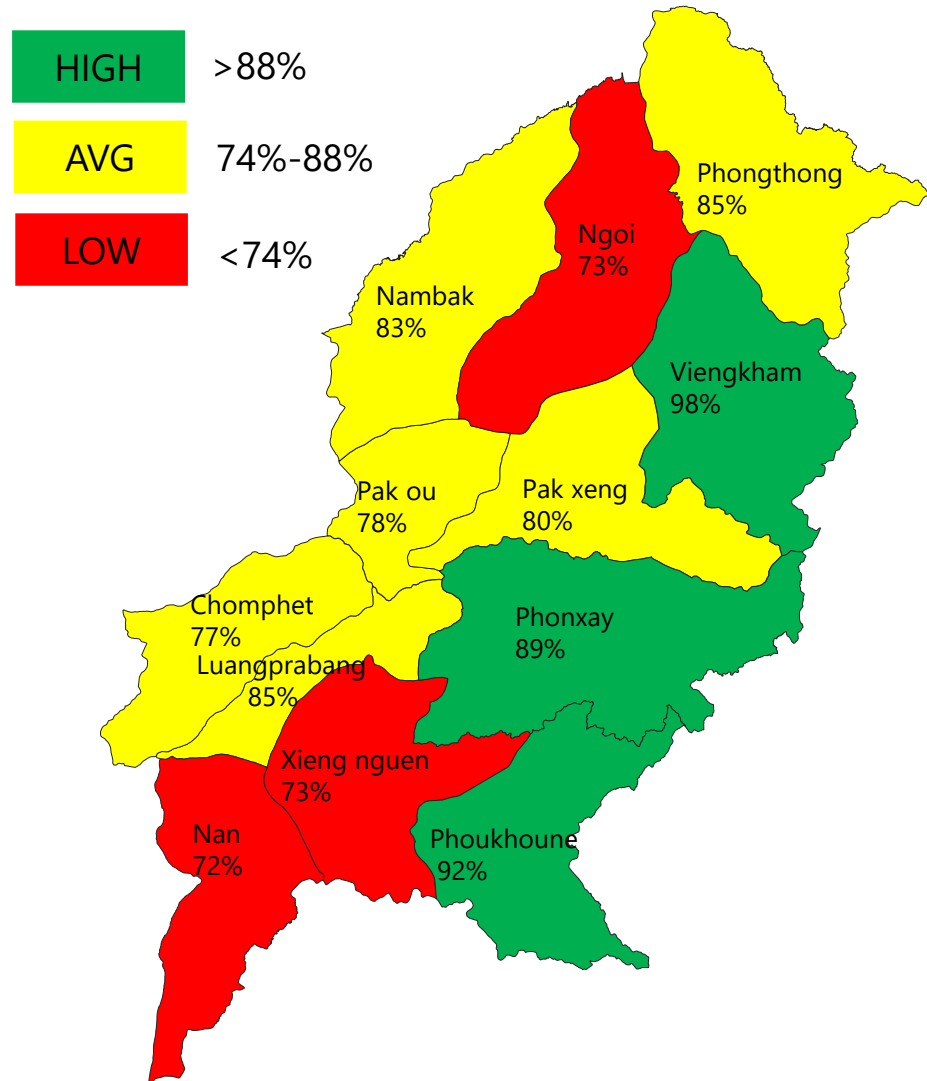
SAM CASES



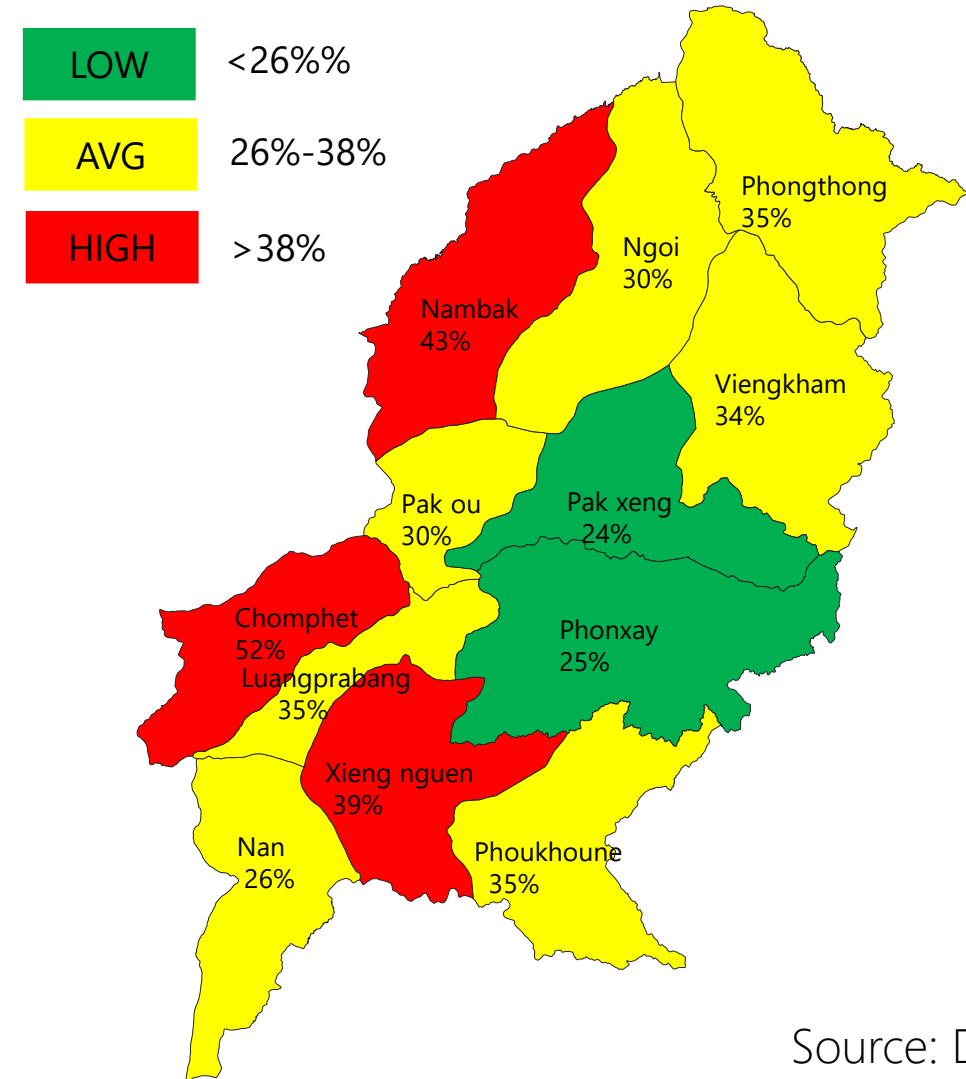
Source: DHIS2

ACCESS TO ANTE-NATAL CARE (ANC) SERVICES

ANC 1ST VISIT AGAINST ESTIMATED PREGNANCIES



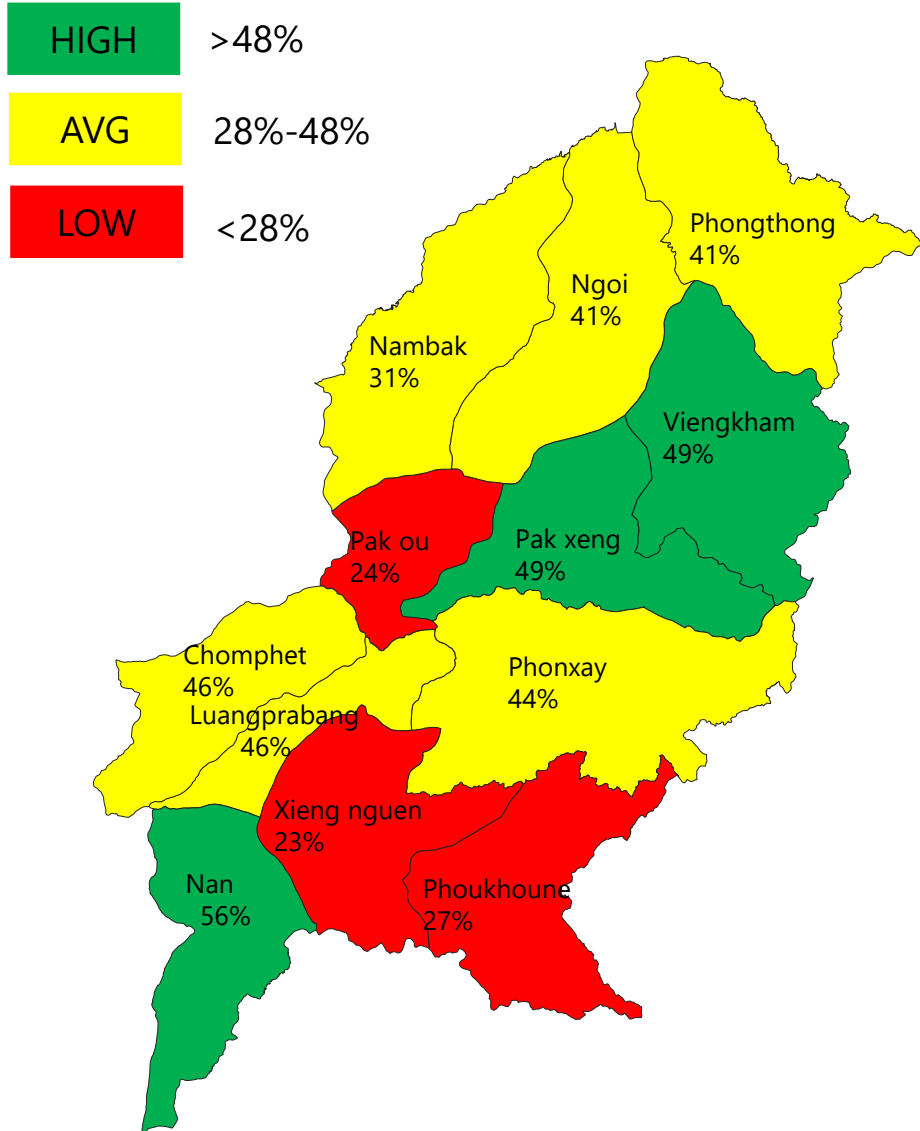
DROPOUT: ANC 1ST VISIT TO 3RD VISIT DROPOUT RATE



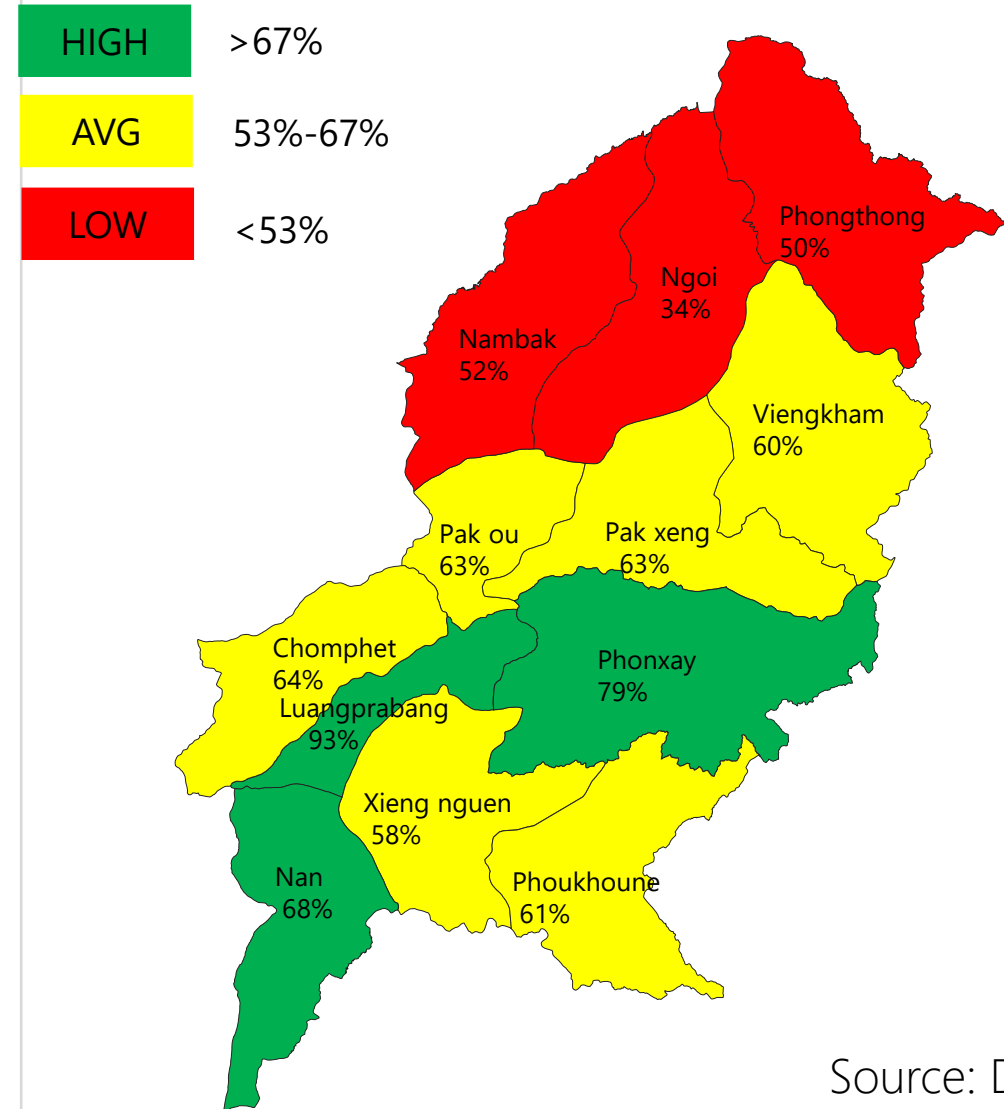
Source: DHIS2

QUALITY ANTE-NATAL CARE (ANC) SERVICES

ANC EARLY REGISTRATION



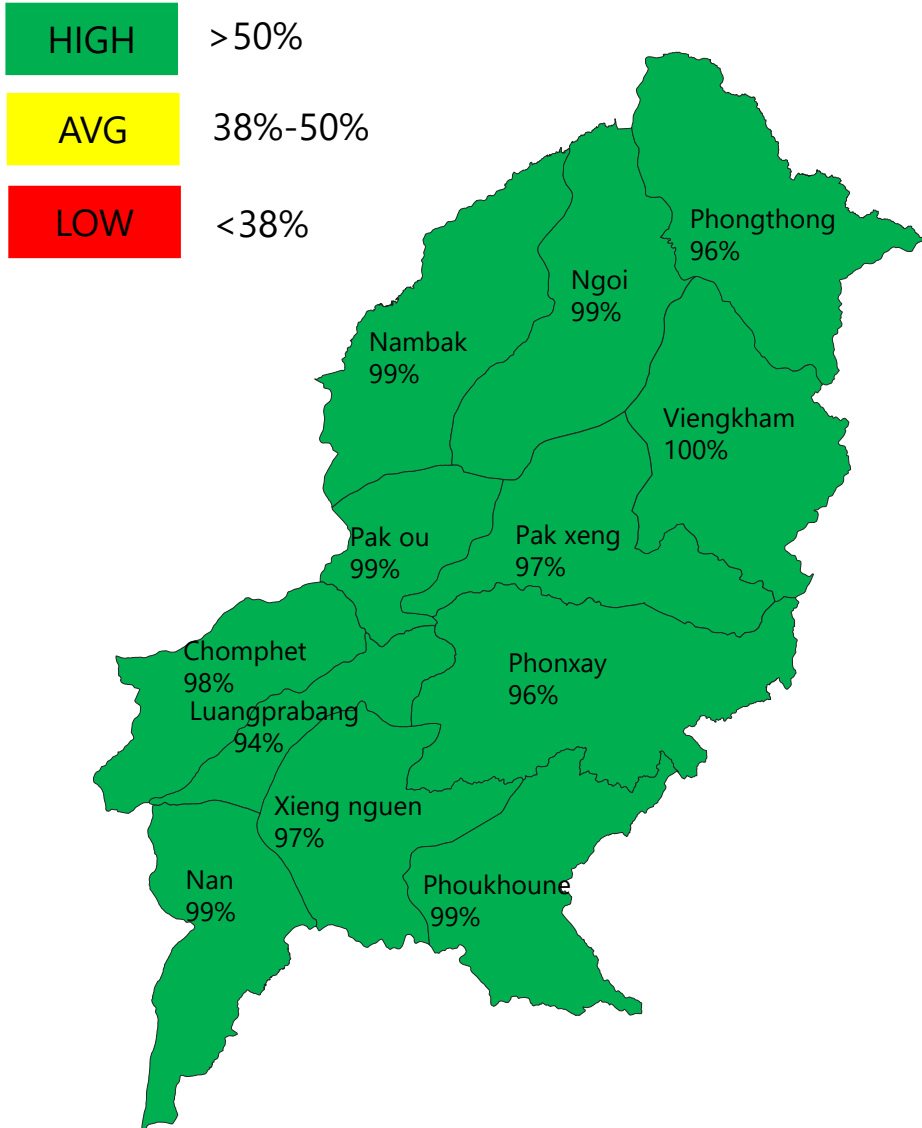
ANC 90 IFA TABLETS



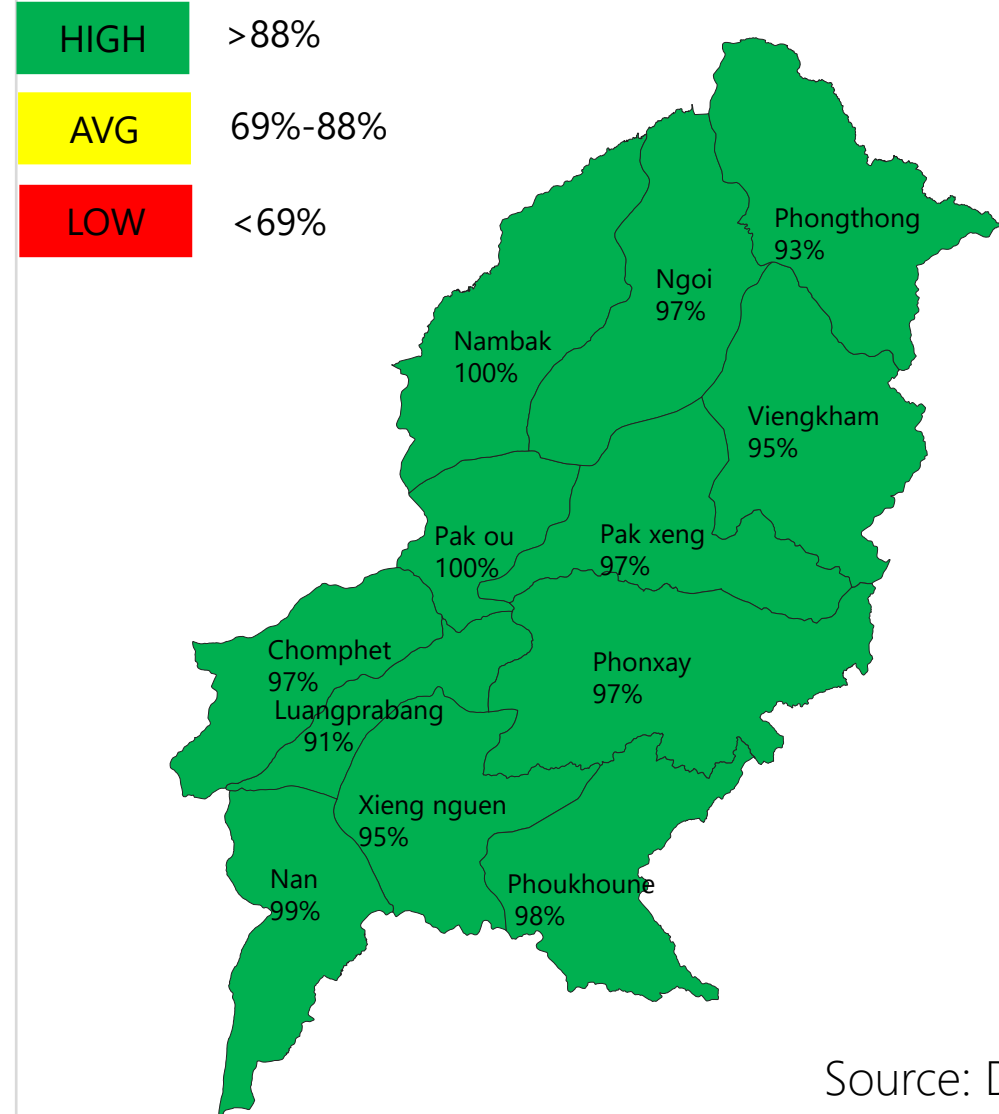
Source: DHIS2

COVERAGE OF BREASTFEEDING

EARLY INITIATION OF BREASTFEEDING



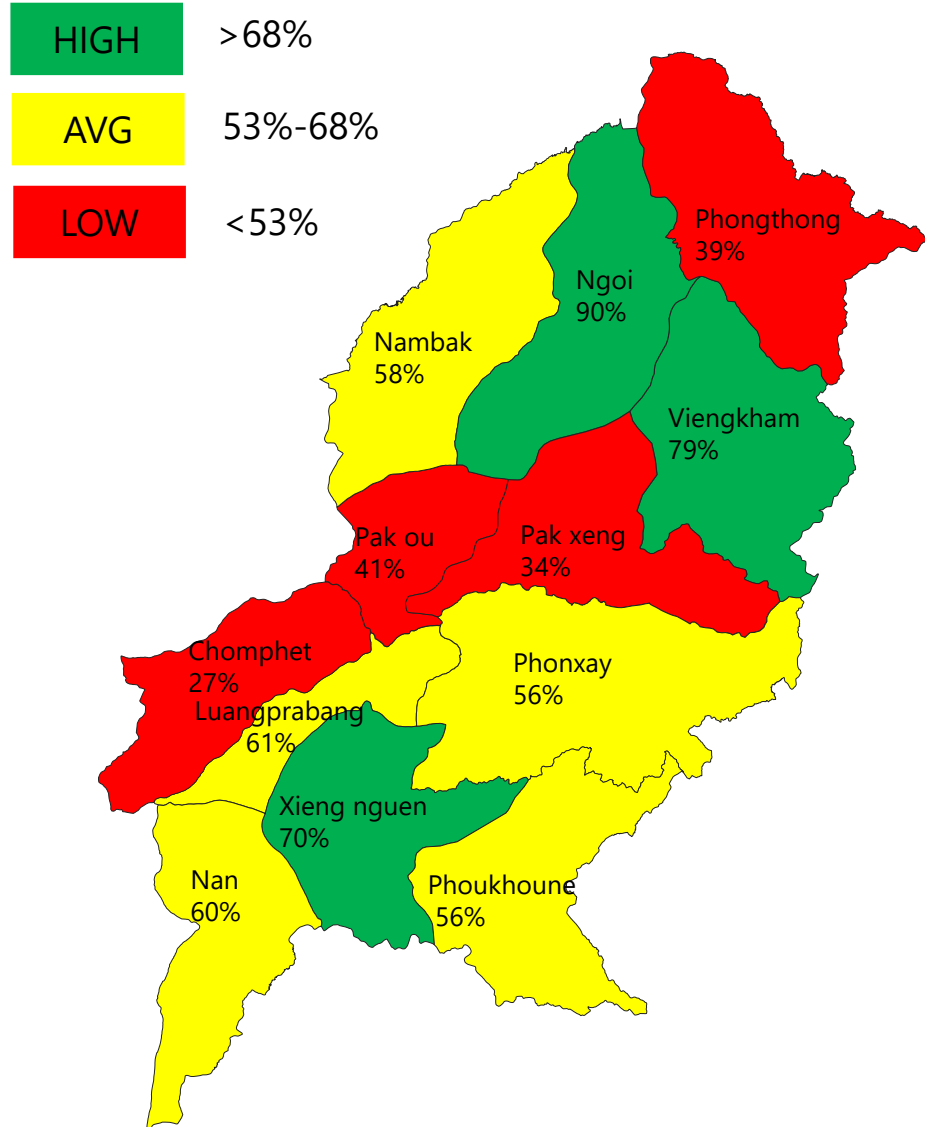
EXCLUSIVE BREASTFEEDING UNTIL DISCHARGE



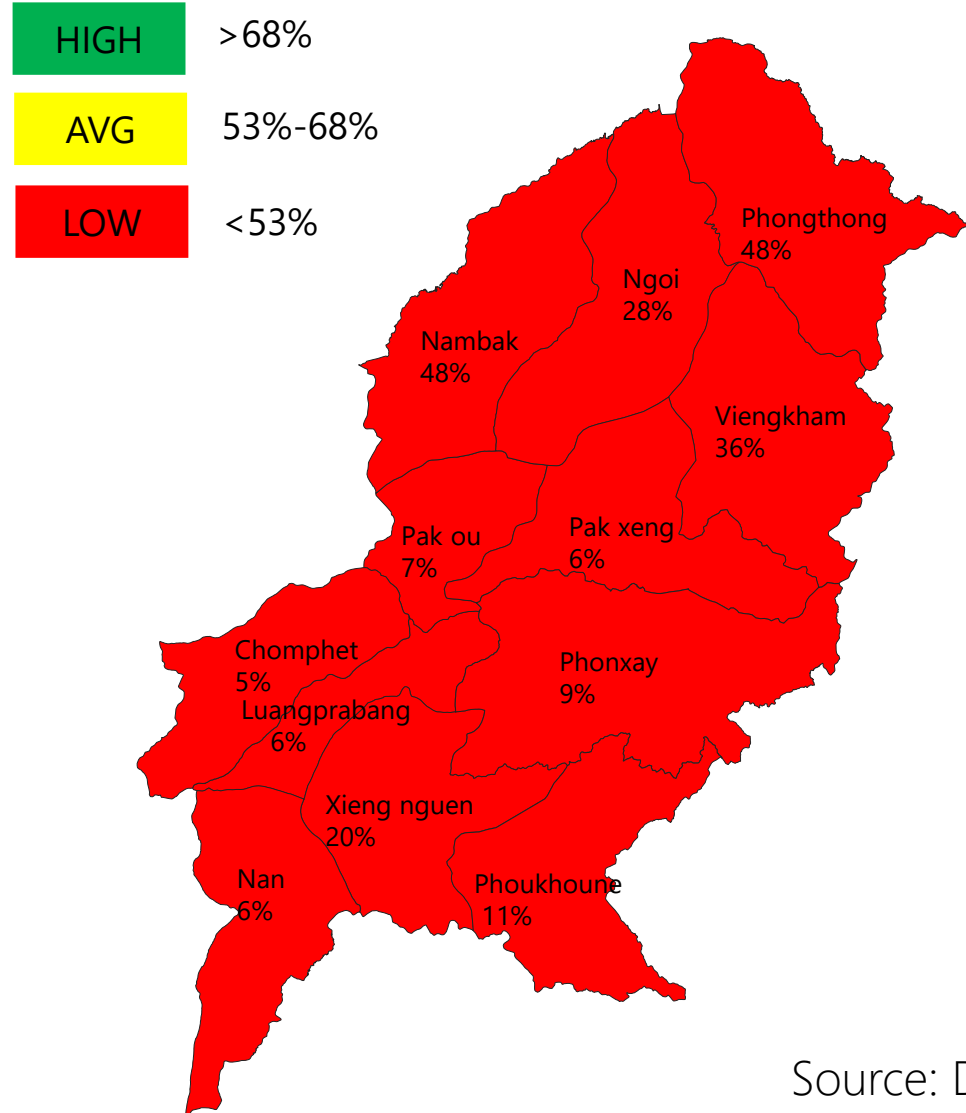
Source: DHIS2

COVERAGE OF VITAMIN-A & DEWORMING

VITAMIN-A SUPPLEMENTATION FOR CHILDREN 6-59M



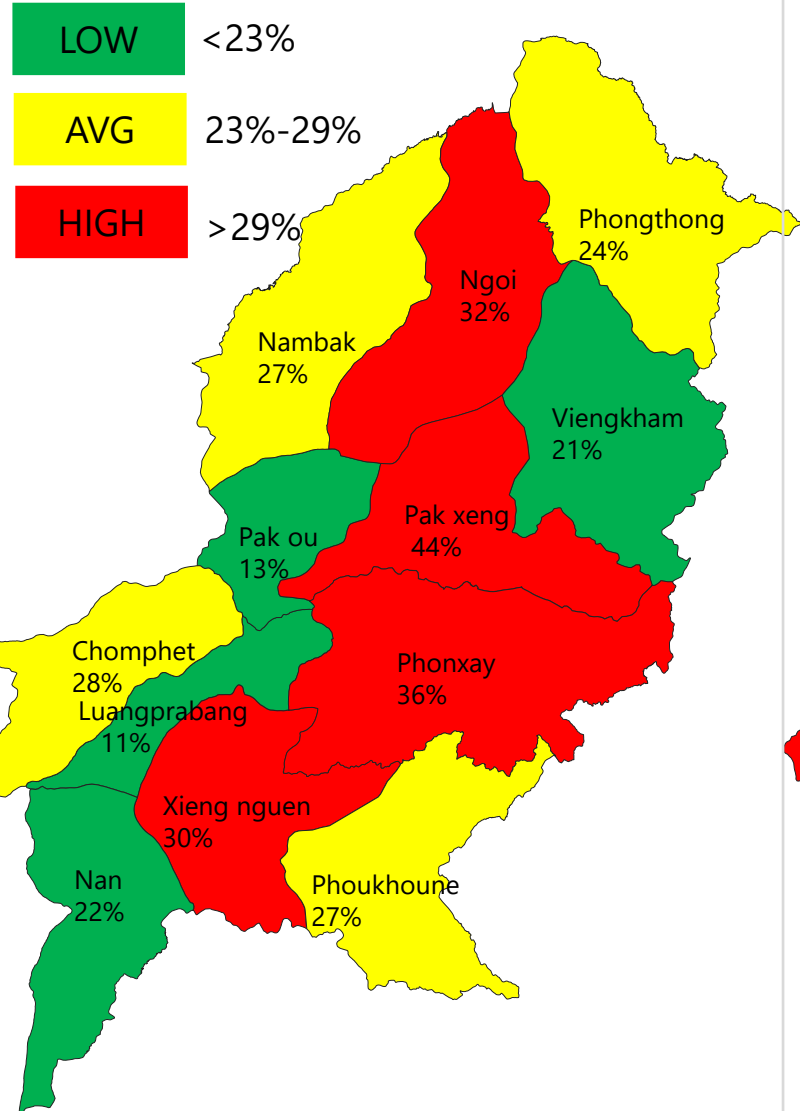
DEWORMING FOR CHILDREN 12-59M



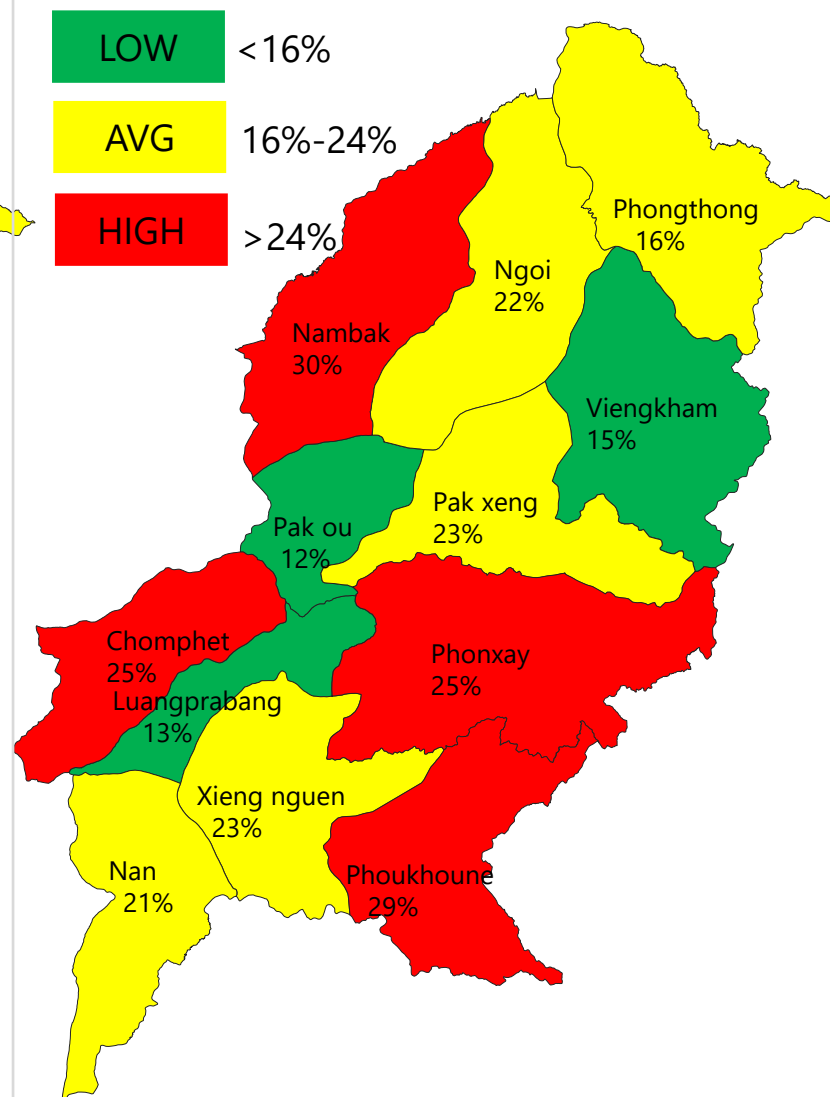
Source: DHIS2

NUTRITION OUTCOMES

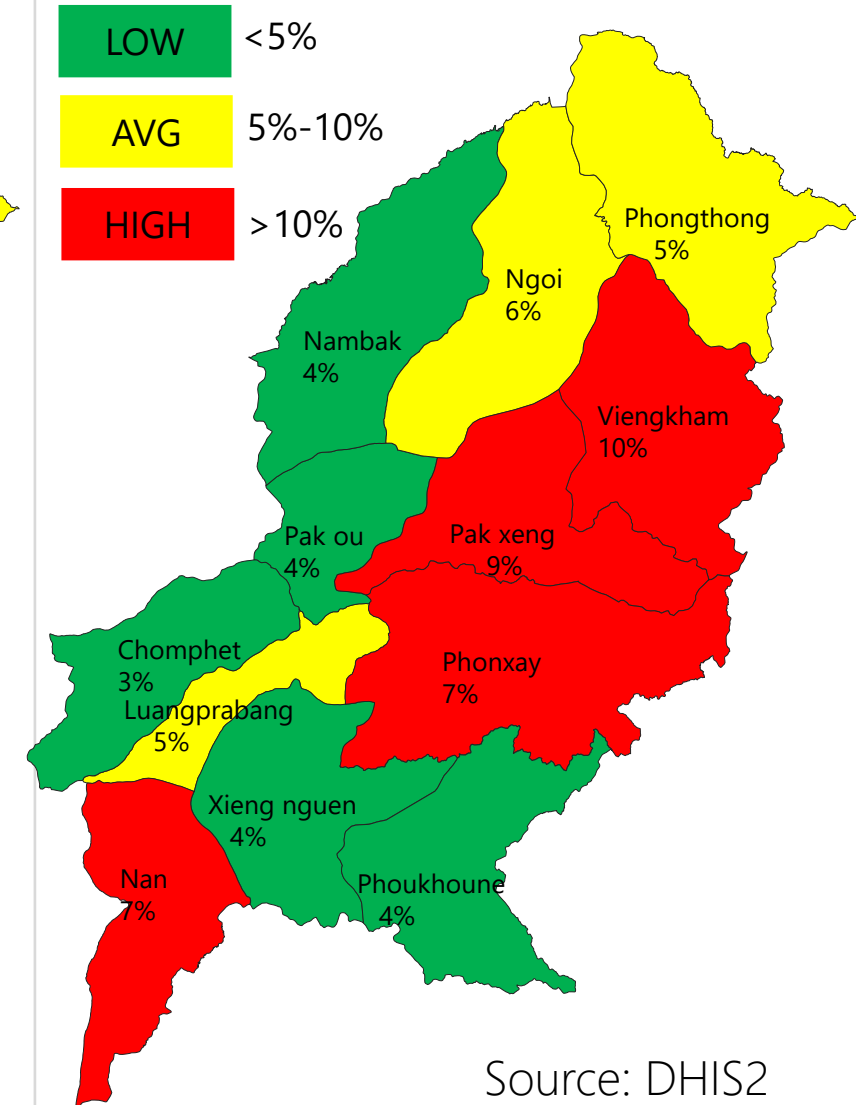
STUNTING



UNDERWEIGHT



WASTING



Source: DHIS2

GAPS IN INTEGRATED SERVICE DELIVERY

ANC caseloads: More than 50% pregnancy women received services from health centers

Delivery caseloads: More than 60% women delivered at PH (28%) and DHs (33%)

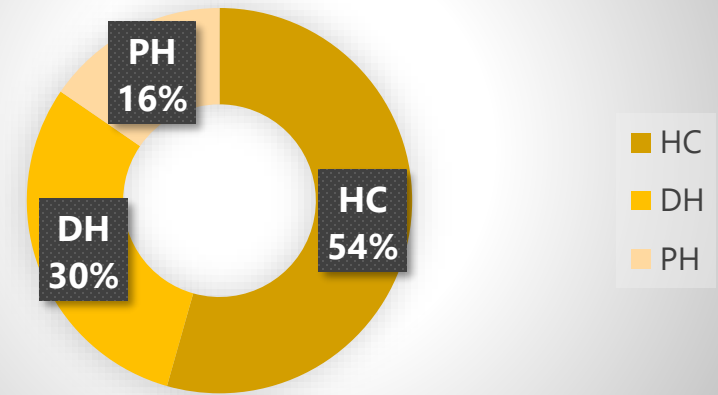
Poor outreach services: Out of 95 facilities, 14 did not report on outreach services for ANC and 6 did not report on Vitamin-A during Jan-Dec 2023.

Less caseloads: Out of 95 facilities, 2 reported that they have conducted only 1 delivery during Jan-Dec 2023. 1 facility reported that they provided ANC services to only 4 pregnant women during Jan-Dec 2023.

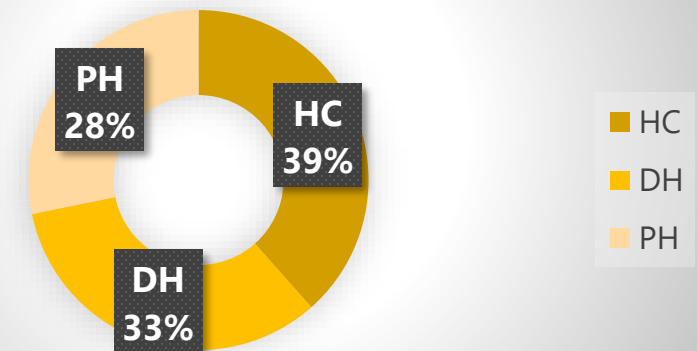
ANC Hb tested: 2 DHs did not report on Hb test for pregnant women during Jan-Dec 2023

SAM treatment: 4 DHs did not report on treatment of children with SAM during Jan-Dec 2023

ANC - Caseloads



Deliveries – Caseloads



DATA QUALITY - SCORECARD

Districts	Completeness	Correctness	Consistency	Timeliness	Overall
0601 Louangphabang	100%	100%	86%	100%	97%
0602 Xiangngeun	100%	99%	94%	100%	98%
0603 Nan	100%	100%	100%	96%	99%
0604 Pak-ou	100%	98%	100%	100%	100%
0605 Nambak	100%	100%	100%	83%	96%
0606 Ngoy	100%	100%	100%	100%	100%
0607 Pakxeng	100%	100%	100%	79%	95%
0608 Phonxai	100%	99%	100%	97%	99%
0609 Chomphet	90%	99%	94%	90%	93%
0610 Viangkham (Louangphabang)	100%	99%	100%	96%	99%
0611 Phoukhoun	100%	99%	100%	94%	98%
0612 Phonthong (Louangphabang)	100%	99%	100%	100%	100%
LUANG PRABANG (TOTAL)	99%	99%	98%	94%	98%

GOOD

AVG

POOR

NR

PERFORMANCE INDICATORS - SCORECARD

Districts	Stunted	Wasted	Under weight	ANC coverage	ANC early registration	ANC 90 IFA tablets	ANC anemia	Early initiation of breastfeeding	Exclusive breastfeeding until discharge	Vitamin-A 12-59M	Deworming	Children with SAM
0601 Louangphabang	11%	5%	13%	85%	46%	93%	6%	94%	91%	61%	6%	327
0602 Xiangngeun	30%	4%	23%	73%	23%	58%	3%	97%	95%	70%	20%	0
0603 Nan	22%	7%	21%	72%	56%	68%	0.3%	99%	99%	60%	6%	25
0604 Pak-ou	13%	4%	12%	78%	24%	63%	4%	99%	100%	41%	7%	33
0605 Nambak	27%	4%	30%	83%	31%	52%	1%	99%	100%	58%	48%	6
0606 Ngoy	32%	6%	22%	73%	41%	34%	2%	99%	97%	90%	28%	177
0607 Pakxeng	44%	9%	23%	80%	49%	63%	1%	97%	97%	34%	6%	91
0608 Phonxai	36%	7%	25%	89%	44%	79%	5%	96%	97%	56%	9%	26
0609 Chomphet	28%	3%	25%	77%	46%	64%	0%	98%	97%	27%	5%	19
0610 Viangkham (Louangphabang)	21%	10%	15%	98%	49%	60%	1%	100%	95%	79%	36%	16
0611 Phoukhoun	27%	4%	29%	92%	27%	61%	8%	99%	98%	56%	11%	35
0612 Phonthong (Louangphabang)	24%	5%	16%	85%	41%	50%	1%	96%	93%	39%	48%	26
LUANG PRABANG (TOTAL)	28%	6%	19%	83%	40%	66%	5%	97%	95%	58%	20%	781

GOOD

AVG

POOR

NR

CHALLENGES

- Changes in personnel such as: further studies, changing responsibilities, or relocating to another station
- There are some issues with internet connection and speed
- The changes in both paper and system forms have made it difficult for the person in charge of reporting to provide accurate information
- The workload is imbalanced with staff responsible for numerous tasks, including specialization task and reporting information in various forms, leading to a lack of accuracy checks
- The data use is still limited, especially Health center, district hospitals and data analysis, data inspection are not known yet.
- There are some drugs that are out of stock and cannot be provided to facilities in a timely manner

KEY RECOMMENDATIONS

Evidence-based decision making: Incorporate DHIS2 data into routine decision-making processes from facility level service delivery to national policy development. Establish targets for subnational level and track progress of key nutrition indicators and provide feedback regularly.

Data quality assurance, data review and feedback: Conduct regular data audit and review meetings at all levels to assess data quality and provide actionable feedback to health workers. Develop systematic methodologies for assessing data quality and analysing data.

Digitalization: Invest in development and use of technologies that enable health workers to collect, analyse and use data at the point of care.

Develop and disseminate knowledge management products: Create infographics, reports and briefs to disseminate key findings and insights from DHIS2 data targeting policy makers, programme managers and health workers

Capacity building: Provide training on data interpretation, analysis and visualization techniques, empowering decision-makers to derive meaningful insights. Promote a data-driven culture to inform programme planning, resource allocation and policy development

THANK YOU