

Determinants of private health providers' compliance with health management information system guidelines in temeke municipality in dar-es-salaam, Tanzania

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A cross-sectional study to assess determinants of private health providers' compliance with HMIS guidelines in Temeke Municipality was conducted in June 2006. The study aimed at finding determinants of private Health providers' compliance with HMIS guidelines, because of inadequate compliance, which has been documented in various literatures. The study picked a random sample of 30 private owned health facilities, which represented 25% of all private Health facilities. Structured questionnaires, checklist and in-depth interviews were used to obtain the data. Findings revealed that 16.7% of all health facilities demonstrated a high level of compliance (i.e. they collected, used and reported accordingly) with HMIS guidelines. Another 16.7% had a low level of HMIS guidelines compliance (they collected HMIS data without using or reporting them). Reporting was shown to have improved from the last quarter of 2005 (46.7%) to the first quarter of 2006. (90%). But annual reporting rate dropped significantly from 73.4% in 2004 to 36.6% in 2005. In terms of completeness of reporting to Municipal Medical Officer of Health, only 16.7% of all private health facilities managed to submit reports accordingly. While 90% of all health facilities had outpatient data on diagnosis, only one third (33.3%) had data on reproductive and child health. Data use was generally very low (16.7%). It was also established that 86.7% of all the health facilities studied were able to retrieve data within half an hour. The study has looked at factors, which are known to influence HMIS compliance. Some of these factors included; Availability of HMIS tools, supervision, feedback, education of HMIS in-charges, cadre of HMIS in-charges and training in HMIS others, derived from in depth interview included: internal and external staff movement, poor clinicians/prescribers cooperation and request of data which are not in the routine HMIS tools. The study further

revealed lack of a positive relationship between HMIS compliance (in terms of data use and reporting), with training in HMIS and supervision. Similarly, no observed difference in terms of reporting among those with secondary education and those with primary education. Therefore it was concluded that, private Health providers' compliance with HMIS guidelines is still very low and thus, in order to enhance compliance all stakeholders should properly and seriously address all the mentioned factors. In order to enhance private health providers' compliance with HMIS guidelines, it was therefore suggested that; Municipal Health Management Team should improve the quality of supervision, giving feedback immediately to health facility after each supervisory visit, more emphasis on collecting and analyzing RCH data at the health facility level, continue conducting HMIS training for newly employed health workers and refresher training for those who had trained more than three years ago and Ministry of Health should introduce a special cadre, which will solely deal with HMIS.