

OXFAM IN ACTION

Improving Maternal Health in Six States of India

Real Time Data Availability (Online HMIS System)



ऑक्सफैम इंडिया
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INTRODUCTION

Oxfam India (OIN) initiated project on 'Improving Maternal Health', towards fulfilling its commitment to provide 'right to life with dignity for all' with the support from Global Poverty Action Fund (GPAF) of the Department for International Development (DFID) for the period of three years (2012-15). Through this project, OIN attempts to bring long term changes in community perception regarding women's reproductive health and enhance women's access to essential maternal health services in six states of India.

The project aims to contribute to improving access to complete package of maternal healthcare through social determinant approach. It intends to work at multiple levels on women's access to intra household nutrition, healthcare awareness, demand generation for health

services, empowerment of women and delayed marriage; building community capacity for planning and demanding accountability of health services with specific emphasis on women's health services.

In order to track progress on a real-time basis, the programme team along with the Monitoring, Evaluation and Learning (MEL) team contemplated an online Management Information System (MIS) for the project that could be used by the programme team and by the implementing partners. The online MIS has two components, first includes the data on regular tracking of project beneficiaries and second component includes the village wise score cards generated through the community based monitoring.

IMPROVING MATERNAL HEALTH

IMPACT

ENSURING UNIVERSAL ACCESS TO MATERNAL HEALTH TO ACHIEVE MDG-5 BY THE YEAR 2015 IN SIX STATES OF INDIA

OUTCOME

IMPROVED WOMEN'S HEALTH STATUS IN THE SIX POOR STATES OF INDIA.

OUTPUT 1

COMMUNITY CAPACITY TO ADVOCATE FOR WOMEN'S ACCESS TO A WHOLESOME BALANCED DIET.

OUTPUT 2

WOMEN HAVE IMPROVED AND INCREASED ACCESS TO OBSTETRIC CARE INCLUDING REFERRAL SERVICES IN PROJECT INTERVENTION AREAS.

OUTPUT 3

WOMEN WITH INCREASED AWARENESS AND KNOWLEDGE ON LEGAL AGE OF MARRIAGE AND CONTRACEPTION METHODS.

OUTPUT 4

INCREASED ENGAGEMENT OF CIVIL SOCIETY ORGANISATIONS (CSOS) IN MONITORING AND PLANNING OF THE GOVERNMENT HEALTH DELIVERY SERVICES THROUGH IDENTIFICATION OF POLICY GAPS AT ALL LEVELS

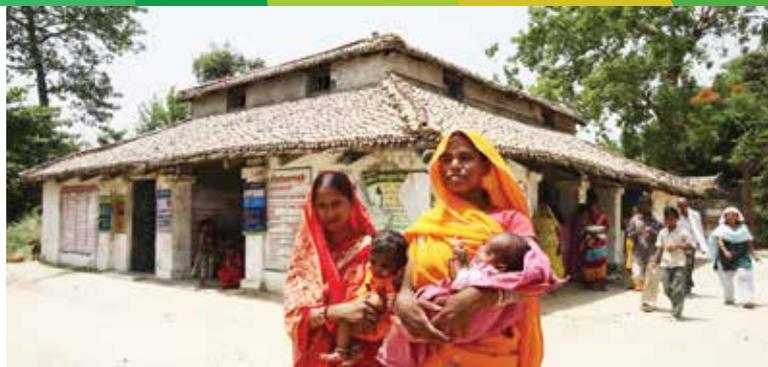
OXFAM'S STRATEGIC PLAN 2013-19 'POWER OF PEOPLE AGAINST POVERTY', UNDER ITS OPERATIONAL GOAL ON PROGRAMME QUALITY, MONITORING, EVALUATION AND LEARNING (MEL), SETS THE OBJECTIVE OF INCREASING THE QUALITY AND IMPACT OF OXFAM'S AND ITS PARTNERS' PROGRAMME WORK THROUGH INNOVATION, LEARNING AND KNOWLEDGE MANAGEMENT. IT ALSO CALLS FOR BUILDING CAPACITIES OF STAFF AND PARTNERS AND ENCOURAGE EVIDENCE-BASED LEARNING WITHIN OXFAM AND FOR PARTNERS THROUGH SYSTEMATIC MEL AND ACCOUNTABILITY.

PROCESS

The online MIS framework was built up on the structure of data collection and collation that was contoured on manual excel template porting. Thereafter Oxfam India Programme and MEL team discussed and felt need for introducing digitalized MIS onboard. Core structure of the online MIS, process of data management by users, partners' capacity for reporting etc. were key pointers of discussion.

The programme log-frame was used as the primer document to conceptualize the statistical (non-narrative) indicators that could inform progress on results. Project baseline survey findings were also considered for setting up indicators specific reporting matrix.

Following this, a technical agency was hired to develop the online component. Both MEL and programme team members



worked closely with the technical agency in finalizing the features and formats of the MIS. After finalization, a 3 days demonstration cum training workshop was organized for all concerned staff and NGO partners on the MIS, which ended by signing off the MIS. Oxfam India (Programme and MEL team jointly) facilitated the training programme and also provided inputs regarding analysis of data later during mid-term review of the programme.

KEY FINDINGS

- ▶ The application is centrally placed and can be easily accessed across the geographic locations
- ▶ It offers a stringent workflow designed on "Role" hierarchy and ensuring all stakeholders follow their activities on real time basis. This assists Oxfam senior management to monitor the project progress on different periodicity (monthly, quarterly, yearly) through array of qualitative and quantitative reports produced by the system
- ▶ Approval system for validation of data at every level (partner's secretariat and Oxfam India) and regulatory mechanisms for usage of data by system users
- ▶ Import facility from excel & graphical representation of captured data is the unique feature of the MIS, thereby making the application user friendly

OPERATIONALISATION OF ONLINE MIS

Outlined below is the process followed towards the implementation of Project Monitoring System application. The application is designed based on the existing laid out roles and responsibilities (refer Table 1) at various levels.

The steps involved in operationalization of the MIS are as following:

TABLE 1: ROLES AND RESPONSIBILITIES IN OPERATING THE MIS

Role	Responsibilities
Field Animators	Manually collect data from the field in the MIS registers used for individual tracking of beneficiaries and compile the village wise data and share with the DEO
Documentation and Evaluation Officer (DEO)	<ul style="list-style-type: none"> • To enter the data in the online MIS system, • To forward the data and submit it into system for District Coordinator's approval
District Coordinator (DC) (each partner could have multiple DCs)	<ul style="list-style-type: none"> • S/he can enter the data for their working geographical area(villages), • To validate and approve the data and submit into system
Project Coordinator(PC)	<ul style="list-style-type: none"> • S/he can enter the data for any geographical area assigned to them • To validate and approve the data
Regional Office (OIN)	<ul style="list-style-type: none"> • Ensuring correctness in data alteration (if required) • Validate the data of multiple partners of a state(s).
National Secretariat / National Coordinator	<ul style="list-style-type: none"> • Responsible for final data validation and conduct amendments for all project partner/s • Keep tracking all partners filling data on time and share feedback to Oxfam India
Master	<ul style="list-style-type: none"> • Master role is to build the capacities and support the system users in data entry and analysis • Analysis of the data at the national level with support from Secretariat • Define the users of the system • Rectify the errors in system, if any • Ensure that the data entry is done regularly by all the partners

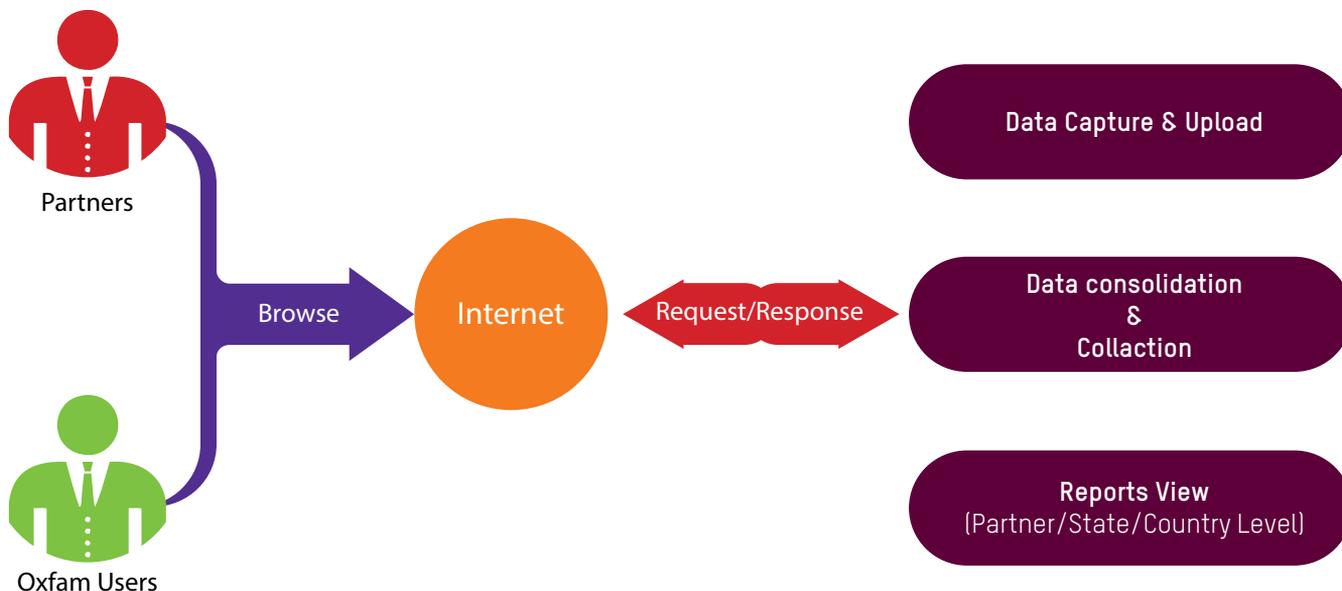


IMAGE 1: ACTORS & APPLICATION VIEWS OF MIS IMPLEMENTATION

Step 1 (Data Punching): The DEO enters the data for the villages falling in their respective block and forwards the sheet for approval to the DC. Data entry can also be done by importing data from excel sheet through data import feature

Step 2 (Initial Validation): The DC reviews the data and makes necessary modifications (if any) before providing approval for the data entered by DEO

Step 3 (Approval): The data on approval by the DC becomes visible to the PC who is assigned with the responsibility of providing approval of the data already reviewed and approved by the DC

Step 4 (Submission): On approval of the data by the PC the data becomes visible to the Regional Office (OIN) coordinator. S/he has the responsibility to approve the data and submit the same to the

National Coordinator/Secretariat. In this case, Oxfam’s partner agency ‘Prayas’ represents the Secretariat. At this level the data received is collated and used for various report generation and analysis as desired

Step 5 (Administration): the Master role has all the system administration responsibility.

While conceptualizing the MIS, the advocacy component of the programme was one of the key considerations. OIN intends to strengthen community based monitoring of health services and encourage community-based organisations to undertake evidence-based advocacy. One of the output of the project’s logical framework is ‘Increased engagement of CSOs in monitoring and planning of the Government health delivery services through identification of policy gaps at all levels’. One of the key milestone towards achieving this output is that the community institutions prepare report cards with help from partner NGOs on performance of health institutions every quarter (using three month recall period) and also plan expenditure of the untied fund.

The advantage of digitalizing the monitoring system is the ease in analyzing the data on a real time basis. The online MIS enables partners and OIN to generate updated analytical reports as and when required. Apart from tracking progress on indicators, it also helps in correlating data with factors such as social group, geographic location etc that are likely to give differential results on a give indicator.

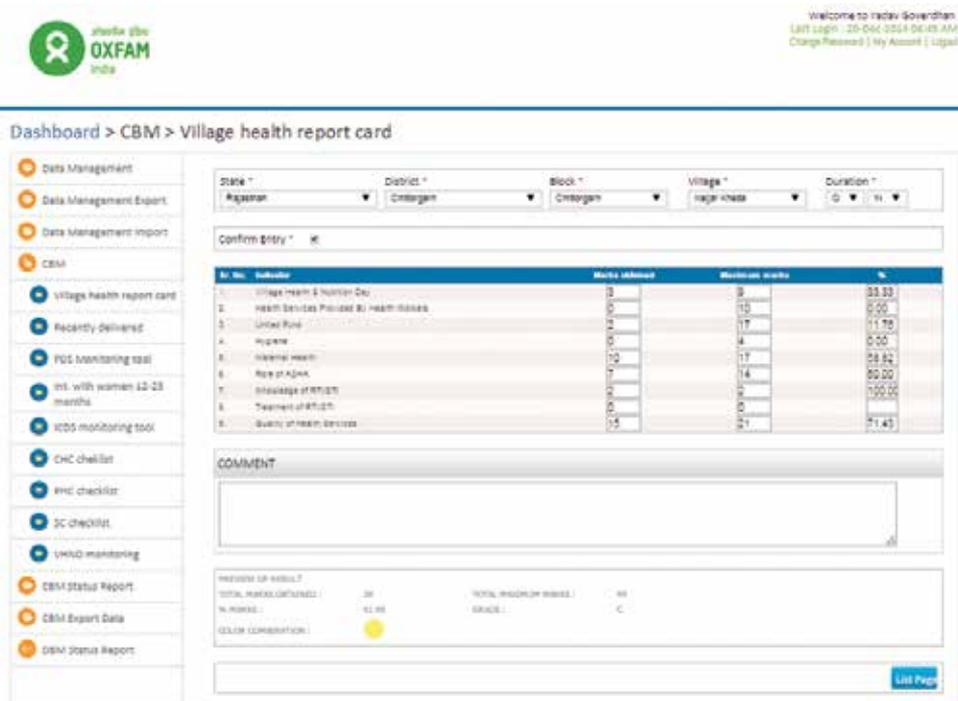


IMAGE 2: SNAPSHOT OF ONLINE HMIS SOFTWARE



LESSONS

- ▶ Clarity on results framework and indicators among all stakeholders is critical for effective MIS
- ▶ Setting up online MIS needs consensus of partners who are the primary source of data to be uploaded
- ▶ Partners' capacity building in understanding and operating the online format needs to be inherent part of operationalizing online digital monitoring systems.
- ▶ Close working relationship among MEL, programme team and technical agency results into setting up online monitoring process in effective and timely manner to capture field level operation which has documented shared learning.

This learning note is prepared based on a 'Online HMIS system adopted for the project Improving Maternal Health in Six States of India supported by DfID under GPAF' for wider sharing. We would like to thank the entire Essential Services team for their inputs given during the process of developing online HMIS system.

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