Immunisation data & DHIS2

DHIS2 Annual Conference
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Immunisation data & DHIS2

Landscape of immunisation data
Gavi’s role
Routine aggregate immunisation
Surveillance (agg & case-based)
Recent development areas
Immunisation data landscape

Population

1. Surveillance
- Case based: AFP (polio), Measles, Yellow fever, Rotavirus, PBM, Meningitis
- Laboratory: Weekly (Tuesday), Monthly (7th)

2. Immunization
- RIM*: Monthly (7th)
- DVDMT*: Monthly (7th)
- SMT*: Monthly (1st)
- National HMIS: Monthly (1st)
- JRF: Annual (10th April)
- WUENIC: Annual (By July)

EPI data

IDSR

Supply

SIAs
- Admin data: 10 days after the SIAs ends
- Independent Monitoring: 7 days after the SIAs ends
- LQAs: 10 days after the SIAs ends
- Corrective actions: 10 days after the SIAs ends

Aggregate or Individual level

+ supervision (quality of immunisation services and data)
+ all HS pillars (HR, Financial, Funding...)

Immunisation programme activities implementation:
(microplan, immunisation sessions, cold chain, stocks + HR + transport availability)
DHIS2: Gavi response to country needs and demands

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
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<tbody>
<tr>
<td>2015</td>
<td>References to DHIS2, but no formal requests for support</td>
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<tr>
<td>2016</td>
<td>&lt;5 countries asking for Gavi support</td>
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<tr>
<td>2017</td>
<td>&gt;25 countries asking for Gavi support</td>
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<tr>
<td>2018</td>
<td>Launch of TCA grants for 25/37 countries + 1st global grant</td>
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<tr>
<td>2019</td>
<td>Additional countries TA request on agg and e-tracker + 2nd global grant including surveillance</td>
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- Gavi role to put immunisation on the agenda of DHIS2 development and in global coordination (WHO, UNICEF, CDC, UiOslo - HISP, USAID, GF, BMGF, WB, GFF), within the HDC framework
- Support countries who wish DHIS2 (no “Gavi push for preferred system”)
- Development of standards – Immunisation WHO & Data quality Apps, AEFI & surveillance (no “Gavi indicators”)
- Enhance data use with dashboard, analysis and triangulation Apps
- Advancing discussions on interoperability DHIS2-eLMIS
- Maximising use of DHIS2 for challenging environments (offline capabilities), community health, immunisation campaigns monitoring
- Enhance integrated surveillance system (aggregate and cased based)
- Explore DHIS2 shift from aggregate-level to individual/patient level data, deployment of Android technology to serve immunisation

Gavi, and Alliance partners: UNICEF, WHO & CDC are software platform agnostic, however we acknowledge the adoption of DHIS2 in over 60 LMICs, and the leadership of UiO and HISP-network in providing guidance and technical support to countries.
Routine aggregate immunisation

Transition to integrated information system
Eg of WHO Afro support roll out
Gavi-GF collaboration
Top top priorities
Integrated versus parallel information system
EPI’s complicated relationship with HMIS

EPI’s history with HMIS
- EPI in most countries still relies on EPI systems, often predating HMIS
- However, change is happening
- When issues of quality and sustainability were raised around DVDMT, it was decided to invest in integration, not parallel systems

Some barriers to integration

Governance:
- Not all EPI indicators / elements included (stock elements, imm sessions)
- Need process to agree on “frequent” changes (e.g. new vaccine introduction) – Affects both IT systems and forms
- Lack of access for EPI staff and lack of collaboration

Technical:
- Outputs not always useful for EPI
- Online versus offline systems
- Review points at intermediate levels
Is immunisation data integrated into DHIS2/HMIS?

- No - 2
- Yes, but not main data source (transitioning) - 24
Example of actions undertaken in the African Region in the area of DHIS2 and Immunization data

- Agreed on 5 requirements for Immunization data inclusion within integrated systems during the stakeholders meeting in Kampala, Nov 2016
- Development of training materials and immunization Apps for DHIS2 in collaboration with UIO, GAVI and EIR
- Testing of the Apps in Uganda and DR Congo
- Developed guidance and curriculum materials
- Training for Immunization and DHIS2 experts on EPI metrics and DHIS2 - May 2018
- DHIS2 training for countries in IST central and West Africa; Sep 2018
- DHIS2 training for countries in IST ESA planned for March 2019
- Launched country deployment
- TA rollout started in more than 10 countries
- Working on Regional Instance of DHIS2
TCA grant: Results June-Dec 2018

Angola  Bangladesh  Benin  Burkina Faso  Burundi  Cameroon  Congo  Rep  Cote d’Ivoire  DRC  Ethiopia  Gambia  Ghana  Guinea  Kenya  Lao  Lesotho  Liberia

Malawi  Mali  Mauritania  Mozambique  Myanmar  Nigeria  Rwanda  Senegal  Sierra Leone  Solomon Islands  Somalia  South Sudan  Sudan  Timor  Togo  Uganda  Zimbabwe

Additional countries

DPR Korea  India  Comoros  Djibouti  Guinea-Bissau  Haiti  Indonesia  Kyrgyzstan  Nepal  Afghanistan  Sudan  Tajikistan  Uzbekistan
GAVI Alliance
PEF coordination

Global Grant
- WHO
- UNICEF
- CDC
- UiO

Countries TA grant
- WHO
- UiO-HISP

Global development

Regional coordination

Countries implementation

Global Fund collaboration

Synergy for global goods development

TA optimisation

Grants’ Investment coordination

Gavi-GF joint 2019 M&E workplan
**Top priorities:** Consolidate the work .... considering challenging context of Gavi supported countries

- **Full off-line capabilities**
- **WHO DQ & Imm App**
- **Data Analysis Tools**
- **Capacity program**

Accelerated support for countries who wish to transition to integrated system & enhanced data use for increasing immunisation coverage.
Disease surveillance

Aggregated Cased based
Platform for disease surveillance – a WHO (WHE/IVB) 2 years project

• Collection and management of aggregated (IDSR) and case-based surveillance (CBS) data for epidemic-prone and other vaccine preventable diseases

• Scope
  • Global: information system design and DHIS2 developments
  • Africa: implementation at regional and country level
    • Aggregated: 26 countries
    • Case Based Surveillance: 3 countries
  • Meningitis as a pathfinder
Platform for disease surveillance – a WHO (WHE/IVB) 2 years project

• Connection of African countries to a Regional platform
  • countries can use DHIS2 or the information system they prefer
  • inclusive in terms of diseases - allow countries to select the diseases they want
    • Aggregated data will include surveillance data for epidemic prone diseases starting with meningitis, cholera and yellow fever
    • Case based data will include VPDs

• Uganda and Mali experience for guidance

• Collaborative proposal (WHO/UoO/HISP/CDC) funded by Gavi SFA 2019-2020 & Gavi-UiO global contract
Platform for disease surveillance – a WHO (WHE/IVB) 2 years project

Contact ronveauxo@who.int
Recent development areas

Immunisation Campaigns
AEFI
Birth Notification
Bottleneck analysis
EIR – Immunisation tracker
Research areas
Immunisation e-Campaign

Gavi/2016/Kate Holt
Basic Concepts of AEFI and its application to generate AEFI Data

Obtaining & handling AEFI data from surveillance systems

Using the basic tools of AEFI surveillance to extract and process data

Analysis of Vaccine Safety Data
Birth Notification – Vital Events Data

Acknowledging mutual benefits for Health and CRVS systems, UNICEF supports linking birth and immunization registries

With partners, UNICEF is developing an operational guidance for Health Programme Managers and Policy Makers and on Vital Events data, to:

- Help them design and operationalize collaboration between health and CRVS for mutual benefits
- Help ensure active notification of births to the Civil Registry while improving immunization outcomes.
- Establish longitudinal linkages between births and immunization registries
- Establish a follow up mechanisms for defaulters
Improving Immunization coverage and equity through strengthened data quality + use in DHIS2

Strengthen quality of EPI routine data and use through DASHBOARDS Scorecard, Bottleneck Analysis and Action Tracker Apps

- The scorecard app is now available
- The bottleneck analysis app will be ready in March 2019
- The action tracker app is expected in July 2019

App development supported through Gavi
Deployment in 4 countries (Kenya, Uganda, Tanzania and Malawi) in ESA Region through BMGF
EIR – Immunisation tracker
Research area

Evaluation of some implementation including WHO App Supervision? Microplanning supportive tool?

Proposition?

Discussion
THANK YOU!