



**RHU LEVEL DATA QUALITY CHECK (DQC) FOR FAMILY PLANNING (FP) AND
SELECTED MATERNAL, NEWBORN, AND CHILD HEALTH AND NUTRITION (MNCHN)
INDICATORS BASED ON FHSIS VER. 2012**

I. RATIONALE AND BACKGROUND:

The Department of Health commits to support the implementation of Data Quality Check in the entire local health system nationwide. The DOH together with Visayas Health Project supports DOH's initiatives in strengthening local health systems, particularly in enriching the current local health information system through the implementation of technical assistance on Data Quality Check (DQC). Having an efficient health information system contributes to improving delivery of family planning, maternal care, and child care services that results in achieving the FP/MNCHN performance indicators. It is necessary to enrich the local information system to allow the LGUs to establish quality of locally-generated data for better information management and utilization.

Through data quality check, LGUs would be able to generate valid and reliable data in accordance with the operational definition of FP/MNCHN indicators, formulae, recording and reporting procedures based on the Department of Health's Field Health Service Information System (FHSIS) guidelines. It would allow the LGUs to capture accurate data and generate useful information that could serve as basis in crafting local policies, planning, identifying appropriate interventions and allocating resources for FP/MNCHN program implementation.

With accurate, valid and reliable FP/MNCHN indicators, we will become more responsive and effective health managers in moving the health sector forward for better health outcomes especially among our women, adolescents and children. Since data is turned over from one level to the next, it is therefore necessary that a DQC is implemented at all levels to ensure that reports generated from each level is reliable.

Regular DQC is vital to ensure the validity of data being reported monthly/quarterly/semi-annually/annually in the FHSIS. It is recommended that all RHUs conduct the DQC activity routinely every month with the midwives and PHNs. The DQC should be adopted as a routine activity to validate reports at the RHU level on a monthly basis and quarterly or semi-annually for the provincial and CHD Program Coordinators, depending on the availability of reports. For selected indications which are reported annually, DQC should be done at the RHU level on a monthly basis using the TCL and Summary Tables.

The following important data sets are generated by the FHSIS: FP CU data and other selected MNCHN indicators such as the proportion of pregnant women who had four antenatal care checkups or prenatal visits (4ANC/4PNV), the proportion of live births attended by skilled professionals (SBA), the proportion of live births delivered in health facilities (FBD), the proportion of fully immunized children (FIC), and the proportion of infants exclusively breastfed until 6th month (EBF). These serve as important bases for implementing FP, CSR and MNCHN (maternal, neonatal and child health and nutrition) interventions, and have far reaching implications on resource allocation, policy formulation and ultimately to the quality of life enjoyed by Filipinos.

II. OBJECTIVES

A. GENERAL

The major objective of this activity would be to achieve quality data on FP and other MNCHN indicators for each component LGUs of every province with the trainers providing the roll out training and fully understand their roles as implementers.

B. SPECIFIC:

By the end of the training the participants shall be able to:

- a. Correctly monitoring LGU performance with respect to CPR, 4ANC/4PNV, SBA, FBD, FIC, EBF and Vitamin A supplementation;
- b. Empowering PHNs and midwives to generate timely and reliable data on the specified indicators, and drive improvements in the provision of FP/MNCHN services;
- c. Strengthening the evidence base for effective FP/CSR/MNCHN interventions and policies;
- d. Improving governance and mobilize new resources, as needed, and
- e. Ensuring reliability and accountability in the way data are collected, recorded, maintained and used.

III. CONTENTS

The following are the quality assurance and review contents specific to the objectives identified:

- a. Reviewed the FHSIS processes of generating, recording, maintaining and reporting data for FP and other MNCHN indicators;
- b. Review of the technical definitions of the indicators and related data as detailed in the FHSIS Users’ Gudie and in its data dictionary;
- c. Trained on the revised DQC self-assessment tools and understood the technical definitions and computations relevant to the FHSIS
- d. Identified next steps, point persons, time frames and resources to sustain the DQC efforts and strengthen the integrity of the data sets for component LGUs

IV. METHODOLOGY

- a. Lecture/Presentation
- b. Small Group Exercises
- c. Workshop proper
- d. Facilitated Plenary Discussion

V. OPERATIONAL DETAILS

Venue	Eastern Samar	
Date	October 17-18, 2017 (1 st Batch) Borongan CHU I October 19-20, 2017 (2 nd Batch) Borongan CHU II	
Category of Participants	Provincial/City Health Officer – 1 Provincial FHSIS Coordinator - 1 Provincial MNCHN, EPI & FP Coordinator- 3 RHU Nurses - 2 RHU Midwives - 31 Support Staff - 2	
No. of Pax per Batch	Number of Participants: 40/40	
No. of Resource Persons and Facilitators	Number of Resource Speakers - 1 Number of Facilitators - 5 Number of Secretariat and Support Staff - 1	
Total No. of Pax	Total Number of Participants + Resource Persons – 40per batch	
Proposed Budget	Php 180,000	
Food and Accommodation	Participants:	
	Live In:	Php 1,500 x 2 days x No. of 40 pax=Php 120,000.00/1 st Batch Php 1,500 x 2 days x No. of 40 pax=Php 120,000.00/2 nd Batch
Training Supplies	None (DOH-RO8 will provide the training supplies)	
Grand Total	Php 240,000.00	
Fund Source	Family Health Unit – Major Program	

VI. COURSE REQUIREMENTS/EXPECTED OUTPUT

The training is expected for:

- a. Capacitated the participants with the skills, knowledge and attitudes required to provide technical assistance in the updating and correction of data reflected in TCLs, STs, MCTs of all midwives and nurses for all indicators tackled;
- b. Ability to demonstrate the process of the provision of technical assistance for Data Quality Check activities, forecasting requirements for FP commodities and action planning for the LGUs; and
- c. Provision of action plans for the sustained initiative towards participating in the conduct of a quality driven health information system

VII. TRAINING EVALUATION

The participants will be given post training evaluation in order to determine the outcome of the activity as well as to elicit details on how the activity can be further improved.

Name: Office: Date:

Instructions: We are interested in your assessment of the training provided and would like to ask you to complete the form. For each statement, check (/) the column that corresponds to your answer using a rating scale of 1 to 4. A rating of "1" indicates that you Strongly Disagree (SD), "2" Disagree (D), "3" Agree (A), and "4" Strongly Agree (SA).

CATEGORIES	RATING			
I. PREPARATION FOR THE ACTIVITY	1 SD	2 D	3 A	4 SA
1. The DPO/invitation/letter was provided on time.				
2. I was given enough information on administrative matters pertaining to the training e.g. advisory, transportation, accommodation etc.				
II. DURING THE ACTIVITY				
A. Content and Delivery				
1. The objectives of the training were clearly defined and met.				
2. The topics covered were relevant and useful.				
3. The training methodologies used were appropriate.				
4. There was sufficient opportunity for interactive participation.				
5. The schedule for the training provided sufficient time to cover all of the proposed activities.				
6. The resource materials were available, adequate and appropriate.				
B. Resource Person/s and Facilitator/s				
1. He/She is well-prepared and knowledgeable on the topic.				
2. He/She was able to draw and sustain interest of the participants.				
3. He/She was able to address questions/issues correctly and appropriately.				
4. He/She adequately utilized variety of training methods.				
5. He/She is appropriately dressed.				
C. Training Venue (refer to the standard requirement for venue)				
1. Function Room				
2. Food				
3. Accommodation				
4. The staff provided quality service (responsive to the needs of the clients)				
5. Equipment/facilities				
D. Hands-on Activity				
1. Difficulty of Using the system				
2. Acquisition of Knowledge and/or skill				
3. Application of knowledge and/or skill				
4. Improvement in the use of system				

III. Overall, I consider this training to be (Check the box that corresponds to your answer)

POOR SATISFACTORY VERY SATISFACTORY EXCELLLENT

Suggestions/ Recommendations to improve future trainings:

VII. SCHEDULE OF ACTIVITY

DATA QUALITY CHECK (Dqc) FOR FAMILY PLANNING AND SELECTED MATERNAL, NEWBORN
AND CHILD HEALTH AND NUTRITION INDICATORS BASED ON FHSIS VER. 2012
Eastern Samar
October 17-18; October 19-20, 2017

TIME	PARTICULARS	RESOURCE PERSONS
Day 1 October 17, 2017		
8:00 – 8:30a.m.	Registration	Secretariat
8:30 - 9:00 am	Opening Ceremony Invocation National Anthem	Secretariat
9:00 - 9:20am	Introduction of Participants, Guests and Speakers	Secretariat
9:20 -9:40 am	Welcome Remarks Message	Dr. MARIAN EPIFANIA ISIDERIO Provincial Health Officer
9:40-10:00am	Levelling of Expectations & Overview Pre-Examination Groupings	Mr. Ruel Cadiz Provincial FHSIS Coordinator
10:00-10:30a.m.	Presentation of Training Rationale and Objectives	Mr. Ruel Cadiz Provincial FHSIS Coordinator
10:30:-11:00am.	Session 1: The Health Information Systems (HIOS) Framework and the importance of valid and reliable data	Dr. MARIAN EPIFANIA ISIDERIO Provincial Health Officer
11:00-11:30a.m.	Session 2 A Review of the FHSIS ver.2012 recording tools, reporting forms and process flow of reporting	Mr. Ruel Cadiz Provincial FHSIS Coordinator
11:30-12:00	Session 3: Detailed Presentation of the Self – Assessment Tool for FP CU DQC	FP Coordinator
12:00 – 1:00	LUNCHBREAK	
1:00 – 2:00p.m.	Session 4: FP Data Quality Check and Updating Sample Exercise	FP Coordinator
2:00 – 2:30p.m.	Open Forum	Mr. Ruel Cadiz Provincial FHSIS Coordinator
Day 2 October 18, 2017		
8:00 – 8:30am	Morning Prayer Energizer Recapitulation	Assigned Group
8:30 –9:30a.m.	Session II: A Review of the roles and responsibilities and facilitator's Checklist and Review of the Output of LGU Level DQC Activities	Mr. Ruel Cadiz Provincial FHSIS Coordinator
9:30-10:30a.m.	Session 12: Action Planning	FP Coordinator
10:30 -10:45	BREAK	
10:45-12:00 noon	Presentation of Action Plans	Participants of LGUs
12:00 – 1:30p.m.	LUNCHBREAK	
1:30-2:30p.m.	Post Test	Mr. Ruel Cadiz Provincial FHSIS Coordinator
2:30 – 3:30p.m.	Session 9: Synthesis, Highlights of Discussion and Agreements made	Mr. Ruel Cadiz Provincial FHSIS Coordinator
4:30 -5:00p.m.	Closing Ceremony	Dr. MARIAN EPIFANIA ISIDERIO PHO
DEPARTURE.		

Prepared by:	Noted by:	Concurred by:
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Approved by:
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