Tools for Data Demand and Use in the Health Sector

QUICK GUIDE • Version 2







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Contents

This manual serves as a cursory reference to the tools used to improve the demand for and use of information in health decision making.

Each of the tools presented in this tool kit can be modified and adapted to fit the needs, timeline, and budget of the context in which they are being used. There may be circumstances where a need arises to facilitate data use but the existing tools are not an exact match for the specific situation. In this case, the tools can be modified to fit the need. It should also be noted, that every context is different and may require a different type of intervention, beyond the application of a tool, or combination of interventions to facilitate data use. Oftentimes, capacity building efforts along with other strategies may need to be applied as well. The combination of capacity building, data demand and use tools and other approaches ensures that health professionals have a broader menu of interventions to choose from to improve data use in the contexts in which they work. http://www.cpc.unc.edu/measure/publications/fs-11-43

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Assessment of Data Use Constraints

Why is this tool important?

In many areas of the world, decision makers do not have access to the required data, do not realize how data can be used to improve decisions, or the information they need does not exist or is not trusted.

What does this tool do?

It identifies the barriers and constraints to data use, and leads to effective approaches to address them. Two sets of interviewing guides have been developed:

- 1. <u>Version 1</u>: provides a broad view of constraints at the national and sub-national levels by collecting information from decision makers and data producers on their current data use and on their perceptions of data use constraints.
- 2. <u>Version 2</u>: provides an understanding of constraints when generating and using data at lower levels of the health system, requiring separate interviewing guides for data users and data producers

Checklist for Implementation

- Perform pre-assessment planning
- Engage a senior national consultant to perform the assessment
- □ Meet with project stakeholders and partners
- □ Conduct and document the interviews
- Analyze and report the findings
- □ Share the findings with stakeholders

Key Informant Interview Questionnaire: Decision-Maker Perceptions

Version 1: National and Sub-national

Interview logistics			
Date			
Time Start/End	Start:	End:	
Interviewer Name			
Title of Respondent			
Number of Years in this Position			
Specialization (check all that apply)	 Population, Health and Nutrition Child Survival HIV/AIDS 		
Level	NationalDistrict		
Responsibilities (check all that apply)	PolicyProgram		
Sector (check one)	PrivatePublic		

About this interview—and why your participation is so important

In health information systems, the ultimate purpose of collecting and analyzing data is to improve programs by enabling more informed decisions based on facts. However, information is not always available to make decisions—or if it is available, it is not always used. This study is designed to find out what barriers and constraints are causing these conditions, and how to resolve them.

Your participation is requested to provide your insights about constraints and barriers to data use. Your participation is very important to this research, but it is entirely voluntary. Your responses will be treated as confidential, and we will ensure that any statements or comments you make cannot be linked either to you as an individual or to your organization. We will be producing a report that is intended mainly to help MEASURE Evaluation staff and our collaborating organizations design effective monitoring and evaluation activities.

Are you willing to participate? Yes No (stop interview)

Introdu	actory questions
RA1	What was the last major decision related to policies or programs that you made?
RA2	What information did you use to make this decision?
RA3	How did you use information to make this decision?
RA4	Was there any information you needed but did not have in order to make this decision?
RA5	Who are the primary stakeholders in the use of information?
RA6	Whose interests are most served by health information systems?
RA7	How do health information systems meet your needs for information?

al constraints
constraints are related to the ability to generate high-quality data and analyses.
Have you ever had an experience while making a policy- or program-related decision when you were concerned about the quality of the information being used?
Are there multiple sources of information or statistics for issues of importance to you, and have you experienced any problems caused by having different estimates?
I am interested in knowing about technical capacity for collecting and using information. Does your agency have the technical capacity to produce reliable information without a lot of external technical assistance?
Does your agency have the technical capacity to ensure access to and availability of reliable data?
Has there been an occasion when data quality or local technical capacity made it difficult for you to use information in making a decision?
How would you have gone about preventing this situation?

ding out about challenges in using information that are due to how your organization functions. s your organization support having the necessary information to make decisions? s your organization support the prioritization and use of information in decision making? s your organization support training of staff in skills for using information in decision making?
s your organization support the prioritization and use of information in decision making?
s your organization support training of staff in skills for using information in decision making?
describe the mechanism or process within your organization/agency for approving research or survey data for
s this process affect your ability to use information to make decisions?
the challenges your organization/agency experiences in sharing survey and research data?
the challenges you experience in sharing research and survey data across organizations and agencies?

RA22 Are there risks associated with sharing information? If so what are they? Record the response and the respondent's openness or reluctance to answering this question.

Closing	ı thoughts
RA23	 How does the political, social and economic environment affect your use of information in decision making? Probe respondent for various influences including the following: international priorities NGO funding and donors
RA24	To what extent do these factors outweigh the importance of data itself in making decisions?
RA25	Have you experienced any other challenges in using information to make decisions?

Data Users Interview Questionnaire

Version 2: Facility

Note: Data users include staff who have decision-making responsibilities including senior managers, clinicians, laboratory and pharmacy staff, and counsellors.

Interview Logistics			
Name of facility			
Facility type (check one)	 Referral hospital District Hospital Health centre (hospital affiliated and other health centers Health post/dispensary Other (specify): 	s)	
Ownership (check one)	Public Private Mix		
Date of interview			
Time Start/End	Start:	End:	
Name of interviewer			

Introduction

In health information systems, the ultimate purpose of collecting and analyzing data is to improve programs by enabling more informed decisions based on facts. However, information is not always available to make decisions—or if it is available, it is not always used. This study is designed to find out what barriers and constraints are causing these conditions, and how to resolve them.

Your participation is requested to provide insights about constraints and barriers to data use. Your participation is very important to this research, but it is entirely voluntary. Your responses will be treated as confidential, and we will ensure that any statements or comments you make cannot be linked either to you as an individual or to your organization. We will be producing a report that is intended mainly to help MEASURE Evaluation staff and our collaborating organizations design effective monitoring and evaluation activities.

The interview will last about 20 minutes. I will be using a questionnaire which includes questions about the type of decisions you make, what information you use for this purpose, and barriers to information use. I will also ask questions about and some other organizational issues.

Are you willing to participate? Yes No (stop interview)

I would like to tape record this session so that I will be able to make an accurate and complete transcription of my notes. Again, this information will not be shared with anyone outside of the research team—that is MEASURE Evaluation.

Respondent Background Information			
Before we start the interview, I would like to record some background information.			
BI1	What is your job title?		
BI2	How long have you been in your current position?		
BI3	Do you supervise any staff at this facility?	The Yes	D No

Tes Ves	D No
Tes Yes	D No
Tes Ves	D No
Tes Ves	D No
) 🗖 Yes	D No
)	Ves Ves Ves Ves

f. Other

2. What type of data or information do you use for [read list]?	List response(s)
a. Budget preparation/allocation	
b. Staffing decisions	
c. Medical supply and drug management	
d. Planning clinical services	
e. Service improvement (counseling practices, outreach, adding services)	
f. Other	

3. Thinking about the two most recent decisions in which you were involved, please describe how you used data in the decision-making process. Please do not include individual patient records.

a.

b.

Section 2: Technical barriers to information use

4. In general, do you face any challenges when trying to use facility data for decision making? Please explain.

5. Over the past 6 months, have you encountered any of the following barriers when trying to use health data or information?			
a. Incomplete data	🗖 Yes	D No	
b. Poor quality data	🗖 Yes	D No	
c. Data was produced late or not at all	🖵 Yes	D No	
d. Data/information was not well presented	🖵 Yes	D No	

e. Other:

lf "no" to Q5a–e, skip to Q7.			
6. Have you provided feedback about these barriers to the management information systems/records management team?	Tes Yes	D No	
a. If yes, was the feedback addressed?	🖵 Yes	🗖 No	
7. Do you feel you have the skills necessary to use data to make the kinds of decisions in which you are involved?	Tes Yes	D No	
8. Would you like training in [read list]?			
a. data collection	🖵 Yes	D No	
b. data analysis	🖵 Yes	D No	
c. data presentation	Tes Yes	D No	
d. data use (planning, quality improvement)	Tes Yes	D No	

Section 3: Organizational barriers to information	on use		
9. Does your facility conduct regular staff meetings?	🗖 Yes	🗖 No (skip	o to Q12)
10. What type of staff meetings are held?			11. How often are meetings held [read list]?
a. Senior management	The second secon	No	 Once a week Once a month Once a quarter (three months) Less than every 3 months Not applicable
b. Departmental/clinic	Tes Yes	No No	 Once a week Once a month Once a quarter (three months) Less than every 3 months Not applicable
c. All-staff	The second secon	No No	 Once a week Once a month Once a quarter (three months) Less than every 3 months Not applicable
If "no" to meeting type in Q11, mark "not applic	cable″ in Q12	2.	
12. Were data and information presented at the last meeting you attended?	Tes Yes	D No	□ Not Applicable
a. If yes, how was it used (Probe: types of decision mak	king)?		
13. Does your facility receive feedback from management, MOH, or others about the facility's performance?	Tes Ves	No No	
a. If yes, please describe how feedback is provided?			

Section 4: Other barriers to information use

I would like to know your opinion about how strongly you agree with certain statements. There are no right or wrong answers, only expressions of your opinion on a scale from 1 (strongly disagree) to 5 (strongly agree). You have to determine first whether you agree or disagree with the statement.

Second, decide about the intensity of agreement or disagreement. This information will remain confidential and will not be shared with anyone, except presented as an aggregated data report. Please be frank and choose your answer honestly.

At this facility, decisions are based on	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
14. Personal liking	1	2	3	4	5
15. Superiors' directives	1	2	3	4	5
16. Evidence/facts	1	2	3	4	5
17. Political interference	1	2	3	4	5
18. Cost considerations	1	2	3	4	5
In your organization, superiors					
19. Seek feedback from staff	1	2	3	4	5
20. Emphasize data quality in regular reports	1	2	3	4	5
21. Promote a culture of data use	1	2	3	4	5
22. Explain what they expect from staff	1	2	3	4	5
23. Share data with other facilities	1	2	3	4	5
In your organization, staff					
24. Are aware of their responsibilities	1	2	3	4	5
25. Are appropriately trained to use data	1	2	3	4	5
26. Rely on data for planning and monitoring set targets	1	2	3	4	5
Personal					
27. Collecting data makes me feel bored	1	2	3	4	5
28. Collecting data is meaningful to me	1	2	3	4	5
29. Collecting data gives me the feeling that it is needed for monitoring and facility performance	1	2	3	4	5

30. We've discussed a variety of different barriers to data use. Are there any that I have not mentioned that you would like to discuss?

31. Do you have any suggestions about how to improve information use at your facility?

Data Producers Interview Questionnaire

Version 2: Facility

Note: Data producers include staff responsible for generating routine health information, such as health information officers, data analysts, clerks and managers. It is useful to interview data producers before data users, if possible, in order to understand the context in which information is produced and used at the facility.

Interview Logistics		
Name of facility		
Facility type (check one)	 Referral hospital District Hospital Health centre (hospital affiliated and other heal Health post/dispensary Other (specify): 	lth centers)
Ownership (check one)	 Public Private Mix 	
Date of interview		
Time Start/End	Start:	End:
Name of interviewer		·

Introduction

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I would like to tape record this session so that I will be able to make an accurate and complete transcription of my notes. Again, this information will not be shared with anyone outside of the research team—that is MEASURE Evaluation.

Are you willing to participate? Yes No (stop interview)

Respond	ent Background Information		
Before we	start the interview, I would like to record some backg	round information.	
BI1	What is your job title?		
BI2	How long have you been in your current position?		
BI3	Do you supervise any staff at this facility?	The Yes	No

Section 1: Data and information flow

1. Please describe the data management team's role in the flow of information on the project? (Probe: Preparation of reports to donor/ MOH, generating HMIS reports)

2. What data do you make available to staff?	3. In what format is it reported?	4. How frequently is the data reported?
a.	a.	a.
b.	b.	b.
С.	С.	С.

Section 2: Data utilization

5. Are data and information used at this facility to inform managerial, administrative or clinical issues? If yes, please specify how it is used and by whom?

6. Does the data management team receive feedback from staff about data/reports (probe: requests for additional analyses, feedback about the information being helpful or not clear)? Please describe.

Section 3: Barriers to data use		
7. What types of barriers do you think exist to staff using data at this facility [read list]?	Check respor	ise
a. Staff lack of data analysis and interpretation skills	🗖 Yes	🗖 No
b. Perceived problems with completeness, quality, timeliness, and presentation of information	🗖 Yes	🗖 No
c. Data entry backlogs	🗖 Yes	🗖 No
d. Other:		

Section 4: Other barriers to information use

I would like to know your opinion about how strongly you agree with certain statements. There are no right or wrong answers, only expressions of your opinion on a scale from 1 (strongly disagree) to 5 (strongly agree). You have to determine first whether you agree or disagree with the statement.

Second, decide about the intensity of agreement or disagreement. This information will remain confidential and will not be shared with anyone, except presented as an aggregated data report. Please be frank and choose your answer honestly.

At this facility, decisions are based on	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
8. Personal liking	1	2	3	4	5
9. Superiors' directives	1	2	3	4	5
10. Evidence/facts	1	2	3	4	5
11. Political interference	1	2	3	4	5
12. Cost considerations	1	2	3	4	5
In your organization, superiors					
13. Seek feedback from staff	1	2	3	4	5
14. Emphasize data quality in regular reports	1	2	3	4	5
15. Promote a culture of data use	1	2	3	4	5
16. Explain what they expect from staff	1	2	3	4	5
17. Share data with other facilities	1	2	3	4	5
In your organization, staff					
18. Are aware of their responsibilities	1	2	3	4	5
19. Are appropriately trained to use data	1	2	3	4	5
20. Rely on data for planning and monitoring set targets	1	2	3	4	5
Personal					
21. Collecting data makes me feel bored	1	2	3	4	5
22. Collecting data is meaningful to me	1	2	3	4	5
23. Collecting data gives me the feeling that it is needed for monitoring and facility performance	1	2	3	4	5

24. We've discussed a variety of different barriers to data use. Are there any that I have not mentioned that you would like to discuss?

25. Do you have any suggestions about how to improve information use at your facility?

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Decision-maker perceptions

Assessment:

Country:

Consultant:

Title of respondent Level of government Type of position (program or policy) Specialization (PHN, HIV/AIDS, CH/N/M) Consent Given 2 2 2 2 2 2 2 3 3 3 3 3 3 3	Level of government	Type of position (program or policy)	Specialization (PHN, HIV/AIDS, CH/N/M)	Consent Given

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Framework for Linking Data with Action

Why is this tool important?

Even when a wealth of information is available, important program and policy decisions are often made based on insufficient data.

What does this tool do?

It supports evidence-based decision-making by creating and strengthening links between the data and decision-making processes. Two versions of the tool have been developed:

- 1. <u>Data</u>: should be used when a new data collection or analysis activity has been completed. This version provides a framework for identifying and documenting key findings, recommendations linked to those findings, and specific actions that can be taken based on the recommendations.
- 2. <u>Decisions and questions</u>: should be used when there is a specific decision to be made, or stakeholders have specific questions around program or policy issues. It facilitates evidence-based decision making by providing a clear, systematic process for identifying and documenting:
 - Actions and/or decisions
 - Questions that decision makers need to answer in order to take action or make a decision
 - Data required to answer the question and sources for these data

Checklist for Implementation

- □ Identify the need
- Create an internal plan for responding to the need
- Engage project stakeholders
- □ Plan the approach and identify major milestones for implementation
- □ Facilitate the creation of the tool and the Expanded Timeline
- □ Build capacity to use the tool
- □ Monitor and document results of using the tool

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Title: Objective: Time Period:					
Research Question	Findings	Recommendations for Action/ Decision	Decision-Maker (DM) and Other Stakeholders (OS)	Communication Channel to Reach DM & OS	Timeline

		1	1	1	
	Communication Channel				
	Timeline (Analysis) (Decision)				
	Data Source				
	Indicator/Data Required				
	Decision-Maker (DM) and Other Stakeholders (OS)				
	Policy or Programmatic Question				
Title: Objectives: Time Period [.]	u				

Template—Version 2: Decisions and Questions

Expanded Timeline Template

Title: Objectives: Facilitator: Time Period:									
	Decision-Maker	Other Stakeholders	htmoM	dtnoM dtnoM	dînoM	dtnoM	dînoM	hree	ИзпоМ
Research question									
Finding:									
Recommendations									
2									
Finding:									
Recommendations									
2									
Research question:	•								
Finding:									
Recommendations									
2									
3									
Finding:									
Recommendations									
-									
2									

Information Use Map

Why is this tool important?

Existing M&E systems typically focus on data collection and reporting to higher levels, while little attention is paid to how the data can be used locally for program improvements. As a result, there are many missed opportunities for feedback mechanisms and the identification of specific ways in which the data can be analyzed to make mid-course programmatic corrections.

What does this tool do?

- 1. It identifies how data flows from the point of collection through to storage, analysis, reporting and use. Opportunities to improve the flow of information to benefit programs and people are also identified.
- 2. It uses a flowchart framework that identifies existing data reporting channels and opportunities to increase use of information to benefit programs and people.
- 3. Its visual nature makes it uniquely effective in capturing a highly conceptual process in a clear and concrete way.

Checklist for Implementation

- Perform pre-assessment planning
- Define details of the activity
- Engage stakeholders
- Gather information for the baseline Information Use Map
- Conduct a validation workshop with key stakeholders and complete the Planning Matrix
- Document and share the results of the validation workshop
- □ Monitor and document results of using the Information Use Map

–Template
Use Map-
In ation
ated Info
and Annota
Baseline ar

	Data Collection	Compilation	Storage	Analysis	Reporting	Use
Private Clinic						
NGO						
Government Facility						
District						
Regional						
National						

General timeline			
General			
Other stakeholders			
Other st			
a			
Person(s) responsible			
Person(s)			
lved			
Steps involved			
tervention			
Proposed intervention			
oblem ider on Use Map			
Barrier or problem identified in Information Use Map			

Planning Matrix Template—Strengthening Data Demand and Use by Addressing Problems in the Flow of Data and Information

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PRISM Tools

Why are these tools important?

Routine health information systems (RHIS) generate potentially useful data, but it is often of low quality and not trusted for decision-making.

What do these tools do?

The PRISM (Performance of Routine Information System Management) Tools support RHIS improvements by objectively measuring and identifying the factors that hinder performance. PRISM contains four separate tools, each containing multiple pages:

- 1. RHIS Performance Diagnostic Tool
- 2. RHIS Overview and Facility/Office Checklist
- 3. Organizational and Behavioral Questionnaire
- 4. RHIS Management Assessment Tool

For the PRISM user guide, PRISM Data Entry and Analysis Tool, and RHIS course, visit the MEASURE Evaluation website: <u>http://www.measureevaluation.org/ddu</u>.

PRISM Tool templates are comprehensive and extensive. These templates can be accessed at: <u>http://www.cpc.unc.edu/measure/publications/ms-11-46-d</u>.

Checklist for Implementation

□ Identify the need

- □ Perform pre-assessment planning
- Assess and analyze current RHIS performance
- Define a plan for reaching the desired level of RHIS performance
- □ Implement the plan and monitor progress

Stakeholder Engagement

Why is this tool important?

Data is only valuable if it is seen as relevant and will be more useful if it is felt to be 'owned' by prospective users. These realities call for engaging an appropriate set of stakeholders when proposing, designing, implementing, and reporting on research and M&E initiatives.

What does this tool do?

It provides a structured way to identify and engage stakeholders to improve data initiatives by using guiding principles, suggested practices, and a matrix for recording information.

Checklist for Implementation

- Identify stakeholders
- Define their potential roles in the activity
- □ Identify the resources they can bring to bear
- □ Identify dynamics among stakeholders
- □ Set the optimum stakeholder group
- Create an engagement plan
- Track stakeholder engagement throughout the project

Stakeholder Analysis Matrix¹

Program issue:__

Proposed activity:						
Date:						
Name of stakeholder organization, group, or individual National, regional, or local?	Stakeholder description Primary purpose, affiliation, funding	Potential role in the issue or activity Vested interest in the activity	Level of knowledge of the issue Specific areas of expertise	Level of commitment Available resources Support or oppose the activity, Staff, volunteers, money, to what extent, and why? technology, information, influence	Available resources Staff, volunteers, money, technology, information, influence	Constraints Limitations: need funds to participate, lack of personnel, political or other barriers
Government sector		_				
Political sector						
Commercial sector						

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Name of stakeholder organization, group, or individual National, regional, or local?	Stakeholder description Primary purpose, affiliation, funding	Potential role in the issue or activity Vested interest in the activity	Level of knowledge of the issue Specific areas of expertise	Level of commitment Support or oppose the activity, to what extent, and why?	Available resources Staff, volunteers, money, technology, information, influence	Constraints Limitations: need funds to participate, lack of personnel, political or other barriers
Non-governmental sector		_	_	-		
Other civil society target audiences	Ces	_		-		_
International donors						
				•		

¹ Adapted from Brinkerhoff, D. and B. Crosby, Managing Policy Reform: Concepts and Tools for Decision-makers in Developing and Transitioning Countries, Kumarian Press, CT, 2002 and POLICY, Networking for Policy Change: An Advocacy Training Manual, 1999.

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Proposed activity: ____

Program issue: ____

Date:			
Stakeholder organization, group, or individual	Potential role in the activity	Engagement strategy How will you engage this stakeholder in the activity?	Follow-up strategy Plans for feedback or continued involvement
Government sector			
Political sector			
Commercial sector			

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Stakeholder organization, group, or individual Potential role in the activity	Potential role in the activity	Engagement strategy How will you engage this stakeholder in the activity?	Follow-up strategy Plans for feedback or continued involvement
Non-governmental sector			
Other civil society target audiences			
International donors			

² Adapted from Brinkerhoff, D. and B. Crosby, Managing Policy Reform: Concepts and Tools for Decision-makers in Developing and Transitioning Countries, Kumarian Press, CT, 2002 and POLICY, Networking for Policy Change: An Advocacy Training Manual, 1999.

Data Demand and Use Coaching Guide

Why is this tool important?

Health professionals often require continuous support and positive reinforcement to effectively apply data demand and use approaches to their specific context.

What does this tool do?

The coaching guide provides structure and guidance to the process of continued technical support to individuals or teams of health professionals implementing a DDU intervention. It is intended to advance the implementation of action plans that have been developed to facilitate data use.

Checklist for Implementation

- □ Establish effective communication method with trainees and a regular schedule for coaching sessions.
- □ Assess all data management processes at the facility, state, and/or organization that will receive coaching support.
- □ Review workshop content before initiating the first coaching session in order to be familiar with the health professional's knowledge of DDU tools.
- □ Review team DDU action plans and any available data sources to verify whether activities are clearly linked to an existing data set, or there are plans to collect new data to inform an upcoming decision.
- □ Bring supporting materials to each coaching visit such as tools and action plans completed during training workshops, notes taken during previous coaching visits, or useful data/ information concerning the health sector of interest.
- During the coaching visit, one of the first activities should be to review the team's action plan.
 - Create an action plan that is feasible given the context.
 - Ensure activities and responsibilities are clearly stated within the action plan.
 - Ensure that there is a clear link between a review of data sources and an upcoming program or service related decision.
 - Identify a specific data set or indicator to monitor for tracking progress on their action plans.

Document each visit in the Coaching Log and take notes using the Coaching Visit Form.

□ Write up a brief Post-Visit Coaching Report to act as a reference for future coaching sessions and document changes in data use.

General Follow-up with requested feedback, supplemental materials, or additional coaching sessions.

Coaching Log

nication					
Method of Communication					
Metho					
-					
Purpose of Visit					
PL					
hing Visit					
Date of Coaching Visit					
Position					
fessional					
Name of Health Professional					
Name of					
zation					
Organization		5	r.	4	5.

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Coaching Visit Form¹

Date of Report:

to ____: ___ (am/pm) Time of Coaching Session: from ____:

Name of Coach:

Name of Health Professional(s):

Contact Information for the Health Professional(s):

Coaching Purpose:

It is helpful, especially if this is a follow-up coaching session, to indicate what your intensions are for this coaching session. Examples of a coaching purpose could be to describe what you hoped to achieve in this coaching session or identify specific information you hoped to learn. It is best to keep this purpose general and brief (no more than three lines of text).

Questions and Themes	Health Professional Statements	Reflections and Interpretations
Dialogue during a coaching session can be sporadic and subject matter is determined by the health professional(s). This table suggests some common questions or themes that may arise and can be used to organize your notes from the session into a report. These questions can also be used to initiate a dialogue. Only use those subject areas that are relevant to the coaching session.	This column is for direct quotes that the health professional(s) provided during the coaching session that best summarize what was discussed, new insights, or possible solutions.	This column is for the coach to record principle ideas expressed, interesting information, and analysis. It is what the coach thinks happened during the session and can be subjective in nature.
 Data Management Process² What methods of data collection are used in your organization? [Examples include hand-written registers, electronic forms, face-to-face interviews, self-administered questionnaires, focus groups, observations, etc.] How often is data reported to the organization? How often is data collected by the organization? Who is responsible for data entry? Who is responsible for compiling, summarizing, and/or reporting the data? What types of reports or other information products does the organization produce? How often are these reports or information products disseminated? Who is the intended audience? How does the information products disseminated? Who is the intended audience? 		

¹ This Coaching Visit Form is designed to initiate coaching sessions. Depending on the priority activities and challenges of the health provider team, the subjects of discussion will most likely change for subsequent coaching

sessions. Coaches are encouraged to adapt this Coaching Visit Form. Questions for follow-up coaching should be based on the action points developed during previous sessions. ² The *Performance of Routine Information System Management (PRISM)* tool is a useful reference for additional questions about the data collection process for routine health data collection systems. The 'Assessment of Data Use Constraints' tool is also a source for additional questions about and organizational constraints to regular data collection and use. These tools are available at: http://www.measureevaluation.org/ddu

Questions and Themes Heal	Health Professional Statements	Reflections and Interpretations
 Action Plan to Address Barriers to Data Use Can you tell me what happened when your team returned to the job site with your Action Plan to Address Barriers to Data Use? Have any of the barriers changed? If activities have changed, what motivated your team to make those changes? What would you consider a success in regards to your Action Plan? What kinds of support do feel you feel your team still needs? 		
 Framework for Linking Data with Action Can you tell me what happened when your team returned to the job site with your 'Framework for Linking Data with Action'? Which decision-makers or other stakeholders were you able to meet with to discuss programmatic changes? How influential have the decision-makers or other stakeholders you have met been in promoting your team's goal(s)? Have any of the activities in the 'Framework' changed? If activities have changed, what motivated your team to make those changes? What would you consider a success in regards to your action plan so far? What kinds of support do you feel your team still needs? 		
 Data Use Skills What has been your experience using any of the skills or tools that were reviewed on at the training workshop? (It is helpful to remind them of these skill or tools and probe for specific applications) Are there any aspects of the skill or tools that I can help you to understand better? Are there other skills you feel you still need? What do you think about how your team has been able to address commitments made during the training workshop? 		

Questions and Themes	Health Professional Statements	Reflections and Interpretations
 Data Use Environment How do you think data is being used at this facility? Can you give examples? In what ways is data being used to inform decisions about programs or health services? Can you give examples? What do you think may be either helping or inhibiting the use of data to make decisions? What approaches have you tried to encourage the use of information by others? What kind of additional data would be useful for your organization's operations? Do you or a member of your organization participate in any Technical Working Groups? If yes, what are some of the topics discussed? 		
 Leadership and the Data Use Environment (MSH, 2005) Could you please describe the challenges you are facing? (Find out in detail what the team is going through, who is involved, what political, social, environmental, or other issues are involved.) What difference will overcoming this challenge make in achieving your planned results? (It helps to repeat a specific challenge identified by the health provider team) What are your next steps? What do you need in order to take them? When do you anticipate completing these steps? 		
Data Demand and Use Results Does your team have any documentary evidence of changes to policies, strategic plans, operational protocols, budgets, or work plans that reflect what you have been able to achieve in your management plans? 		

A Way Forward

It is helpful to note in the Coaching Visit Form any actions and/or solutions that were generated during the coaching session. This can be used to guide the purpose of the next coaching session as well as document capacity building progress towards data use goals. It is important that the coach helps the health professional to plan actions that are within their control, are specific to their context (i.e., where, when, and with whom they want to take action), and whether they are supported with the necessary resources.

Post-Visit Coaching Report

Date of Report:

Data & Time of Coaching Session: ___ / ___ / ___ from ___: ___ to ___: ___ (am/pm)

Name of Coach:

Name of Primary Health Professional Contact:

Contact Information:

Organizations Visited:

Background on DDU Support:

A brief paragraph about when and where the DDU workshop took place, who attended from which organizations, and the topics reviewed. Describe the coaching schedule that was developed. If there were any changes to the schedule, explain why. Indicate how many coaching visits have taken place, and how many more are planned.

Coaching Purpose

A brief paragraph about what the coach aimed to discuss, review, and/or learn about during the visit.

Coaching Participants and Organizations Contacted

Include a list of organizations and representatives who attended the coaching visit other than the primary health professional contact.

Activities/Deliverables

Provide a one-sentence statement of each of the planned DDU activities that have been agreed on to date. Indicate any changes from the original DDU action plan and why.

Background on Activities/Deliverables

Describe in greater detail each activity or deliverable. Provide history, context, and any stakeholders identified as well as their intended involvement. Explain why this activity or deliverable is needed, the implementation strategy, and what kind of impact the health provider team aims to achieve.

Key Challenges

Provide a one-sentence statement of each of the challenges described by those participating in the coaching session. It is helpful to also include any challenges discussed during the DDU workshop or from other sources such as a survey or key informant interview.

Solutions and Successes

Describe any solutions and/or successes discussed during the coaching sessions.

NEXT STEPS—Team's Management Plan Moving Forward:

List the activities that the team committed to achieve by the end of the coaching visit. Include dates as appropriate. Compare these activities to the team's previous DDU action plan and/or commitments. If there were changes, provide details as to why they were necessary.

NEXT STEPS—Coaching Activities for Next Visit or Other Ongoing Support:

List any follow-up activities that the coach and/or participants purposed as helpful to the team in reaching their goals described in their DDU action plan. Provide dates of activities as appropriate. This could include data research and dissemination, review of DDU materials or tools, or facilitating contacts with key decision-makers or other experts.

NEXT STEPS—DDU Results to Investigate

It is important to identify documentary evidence of when data was successfully used to inform a decision. Highlighting these instances demonstrates to those working in the health sector the benefits of data collection, review, dissemination, and use, which generates greater demand for quality data and supports an organizational culture of data use. Also the evidence can be used to report the impact of DDU coaching activities. Examples of DDU evidence includes:

- Citations and/or references to M&E information in approved program documents such as:
 - » Policies, strategic plans, or prog ram Request For Proposals;
 - » Advocacy or policy briefs;
 - » Budgets or finance documents;
 - » Policy maker public statements; or
 - » Recommendations from an evaluation reflected in a work plan or baseline indicator;
- Correspondence with key informants who report considering M&E findings in reaching their decision, such as meeting minutes or action items that reflect data review;
- Study, memo, or report of DDU tool use in a specific context;
- DDU operational protocols;
- Cover letter of proposals for a DDU intervention;
- New line items in a budget or proof of additional funds for DDU activities;
- Approval of funding received or an executed budget for DDU activities.

MEASURE Evaluation

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www.measureevalation.org