



eMIS Initiative for MOHFW

Transforming service delivery process and promoting data-driven decision making through digital innovations

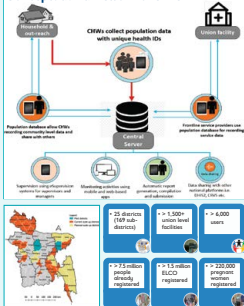
Background

Electronic Management Information System (eMIS), a collaborative initiative of USAID supported partners (MEASURE Evaluation, icddr, MaMoni MNCSP) is providing support to the Ministry of Health and Family Welfare, Bangladesh for digitizing the service delivery process of community health workers and first line service providers with an aim to make routine information is readily available and accessible for data-driven decision making.

Why eMIS Initiative: Gaps/Challenges

- **Duplication** in data collection and reporting between HA and FWA
- Data collection **overload**
- **No/poor linkage** between population level data with service data
- **Multiple counting** of individuals at different service delivery points
- **Unavailability of adequate timely data** for monitoring, supervision, and decision making

Conceptual framework of eMIS



Transforming registers into Apps

How eMIS Initiative evolved?



How eMIS addresses gaps/challenges?

- **Automation through Apps** on tablets which can run offline as well
- **Similar to existing paper registers** and follow existing service delivery process but integrated and modular
- **Three layers of applications** Population registration System (PRS), Service Modules for CHWs and first line service providers, Management modules includes e-supervision system and monitoring tools with data visualization
- **Unique Health ID to track** individuals at different service delivery points and eliminate chance of duplication
- **Share data to DHIS2** for report generation and visualizations

What are the benefits?

- **Comprehensive system** Covers the entire business process
- **No chance of duplication** Since community and facility modules are connected, there is no chance of duplication
- **Improved supervision and data use** Easy monitoring by the supervisors and managers as they are connected through supervisory and management tools
- **Report generation** All approved reports including those for DHIS2
- **Additional benefits** This system could benefit other systems i.e. enrich SHR, support CRVS activities (birth/death notification), support MPDSR activities

Utilization of MNH services from UH&FWCs in 5 districts (data as of 13 May 2019)

ANC (325,079)	Weight Measured 85.94%	BP Measured 90.96%	Urine Albumin 99.99%
DELIVERY (33,758)	AMTSL 95.76%	Live Birth 98.59%	Sail Birth 1.41%
NEWBORN (34,833)	7.1% Chlorhexidine 98.25%	Skin to Skin 98.69%	Breast Feeding (1H) 98.67%

For more information:

www.rhis.net.bd | [ISIRIHS](https://www.facebook.com/ISIRIHS) | [eMIS Initiative, Bangladesh](https://www.youtube.com/channel/UCMISInitiative)

