

This MEASURE Evaluation PIMA *Activity Update* highlights lessons learned during a cross-county learning forum.

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Promoting Knowledge Exchange Through Cross-County Learning

Over the past four years, MEASURE Evaluation PIMA (MEval-PIMA), funded by the United States Agency for International Development (USAID), has provided support to county health management teams (CHMTs) in several Kenyan counties to strengthen their capacity to use data to inform decision making. The support is mainly delivered through specific individuals, especially those responsible for data generation and use. Our experiences over these years, however, have revealed a pressing need to create opportunities for counties to share experiences and explore strategies for mutual learning.

To encourage this joint learning, MEval-PIMA held a forum in September to promote sharing of experiences in implementing monitoring and evaluation (M&E) for various projects and programs. These included improving M&E capacity for the CHMTs, assisting reproductive health and malaria programs to identify and

respond to information needs, and strengthening referral and civil registration systems. Participants at this forum included county AIDS coordinators (CASCOs), county health records and information officers (CHRIOs), county malaria control coordinators (CMCCs), reproductive health coordinators, focal persons for community health strategies, and civil registrars—all from our five target counties (Kisumu, Migori, Homa Bay, Siaya, and Kakamega). Two participating nongovernmental organizations—PATH/APHIAPlus Western and Nyanza, and AMPATH—were also represented.

The two-day workshop was structured with plenary sessions organized around thematic topics and panel sessions that included discussants from each county. The highlights of presentations from the counties included talks on their strategies to improve reporting rates, resource mobilization, and a presentation by Siaya County focusing on improving community health data reporting.

Siaya County, with the support of MEval-PIMA, conducted a rapid assessment of the community health information system and then employed a tool for performance improvement planning that provides a structured approach to address identified gaps. The joint planning facilitated support from all stakeholders and effective implementation of the proposed activities. These included training in use of the revised reporting tools, provision of the revised tools, harmonization of the master health facility list and community listing in DHIS 2, monthly meetings with subcounty focal persons, and data reviews that incorporated triangulation of facility and community data.

As a result of the joint planning, the county's rate of completeness of reporting improved from 26 percent to 72 percent, while its rate on timeliness rose dramatically from 12 percent to 68 percent. In addition, the county health leaders secured a meeting with the members of the County Assembly to share these improved performance indicators. These impressive improvements resulted in the county government allocating additional resources to procure kits and supplies for community health volunteers.

Kisumu County also shared its achievements in adopting the national guidelines on maternal and perinatal deaths surveillance and review (MPDSR). The county increased the frequency of data review meetings from quarterly to monthly. These meetings are attended by the CHMT, public and private facility managers, health training institutions, the regional blood transfusion unit, implementing partners, and, in some instances, neighboring counties.



George Ogoye, Migori County head of monitoring and evaluation, delivers closing remarks during the county learning forum.



Participants at the county learning forum.

The county health team's leadership commitment and joint audits of maternal deaths at facilities have resulted in a reduction of ambulance charges at private health facilities from Kshs.6,500 to Kshs.1,500, which should provide more access for people to emergency obstetric services. Community health assistants have been sensitized on how to identify danger signs during pregnancy; and lower-level health facilities have been encouraged to provide care themselves before referring patients to a higher-level facility. As a result of these changes, the number of maternal deaths at the Jaramogi Oginga Odinga Referral and Teaching Hospital have been significantly reduced.

Other presentations included information on the operationalization of the M&E technical working groups at the county level; the use of a reproductive, maternal, newborn and child health (RMNCH) scorecard to guide improvements for maternal and newborn care in Migori County; and improved mortality reporting at St. Mary's hospital in Kakamega County and use of malaria data for accountability at the county level.

Participants said they appreciated the key lessons learned from the forum, specifically in addressing maternal mortality and hearing about data review meetings to interrogate data and use it for decision making at all levels. They also gained insights on the usefulness of strong partnerships and joint planning, the role of the county health leadership in strengthening M&E, and strategies for engaging political leadership and advocating for resource allocation.

The county representatives agreed it would be necessary to continue discussions on sustainability and to address notable M&E capacity gaps—such as documentation, linking inputs to outcomes and final impact, and articulating how the use of data translates to improved service delivery. Based on the presentations, it can be concluded that the forum had shown that counties with strong leadership involvement in M&E activities found themselves more able to coordinate and undertake M&E functions.

For more information on MEval-PIMA support to county health management teams: <https://www.measureevaluation.org/resources/publications/fs-14-118>

To read more about MEASURE Evaluation PIMA, <http://www.cpc.unc.edu/measure/pima/about-meval-pima>

Photos: Moses Njatha, MEASURE Evaluation PIMA



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