

## **RHINO Workshop**

### **Issues and Innovations in Routine Health Information Systems in Developing Countries**

#### **Working Group 8**

#### **Integration of private sector (for profit and not-for-profit) into the public sector HIS...**

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#### **What is the private sector?**

- INGOs / PVOs / LNGOs
- For-profit providers:
  - clinical providers
  - traditional healers
- TBAs
- Pharmacies
- Drug sellers
- Volunteer health workers
- Community based organizations (CBOs)
- Faith based organizations
- Professional hospitals
- Social marketing outlets
- Counseling centers (VCT)
- Insurance programs
- Microfinance / micro-credit financing schemes

#### **What routine (regular or periodic) data can/might the private sector provide?**

- Diseases
- Vital events
- Treatment
- Community Knowledge
- Community Practices
- Community Coverage
- Logistics
- Human resources
- Facility characteristics

#### **What is the Public Sector?**

- Ministry of Health (also Population) at local, district, provincial and national level

#### **BUT ALSO**

- Ministries of Defense, Education, Interior, Statistics, Planning have HIS needs

#### **What questions should we ask?**

- How can the private sector supplement public sector information?
- How can the public and private sectors coordinate their information systems?

## **Private Sectors Lessons Learned or Guessed**

- a) There is little information we know of about public / private relationships.
- b) The private sector is a mosaic of multiple types of organizations and individuals.
- c) NGOs collect population-based data which can supplement routinely collected public sector service data.
- d) No single strategy would be effective to build a public / private linkage.
- e) Not all "parts" of the private sector will want to participate or can be expected to participate in the HIS.
- f) Solicit private sector data that is already used for managing their affairs.
- g) Collect only essential data.
- h) Choose type of data source (regular & periodic) based on costs & benefits. (We assert there is a role for routine periodic data collection efforts in routine HIS.)
- i) Phase in public/private linkages.
- j) Government must have stewardship responsibility for the linkage of public and private sectors.

## **Private Sector Recommendations**

- 1) Donors should fund a review of instances of private / public relations to identify lessons or potential models that are generalizable. (NGOs, insurance organizations, private hospitals, etc.)
- 2) Government should establish an NGO/private sector coordinating office, and develop its capacity with donor assistance.
- 3) Donors should support development of a private sector coordinating association, and develop its capacity to work with government and the diverse elements of the private sector.
- 4) Donors should support research on "Who are the stakeholders and what are their respective stakes?" in order to identify strategies.
- 5) The two coordinating offices should define very clearly the essential data to be collected / transmitted in the RHIS and why the information is necessary. (e.g., case definitions, indicator definitions.)
- 6) Donors should support public sector to enhance its data management capacity and integrate and use private sector data in the RHIS.
- 7) Donors should support linkage of the public sector coordinating office and the private sector coordinating association.
- 8) Donors should support the two coordinating bodies to use collected data to improve the quality of services.