

Abstract

The evaluation of the existing Maternal and Child Health and Family Planning (MCH/FP) information system was carried out in the district of Polonnaruwa and Matale from January 2004 to March 2005 with the aim of designing an intervention to improve the system. The existing information system at the level of the Public Health Midwife (PHM) was evaluated in the district of Polonnaruwa while the information system at the Medical Officer of Health level (MOH office) was evaluated in both Polonnaruwa and Matale districts.

The record keeping practices of the PHMM showed moderate level of “satisfactoriness” in terms of completeness and accuracy. The record keeping practices of the PHMM were not show any significantly associated with the selected basic characteristics of the PHMM such as age and years of experience. The consistency of record keeping at the office of the PHM were 65.3% and 61.3% for the Pregnancy Record and the Child Health Development Record respectively. Updating and reporting of information does not happen in a regular manner in most of the PHM and MOH offices.

The existing Maternal and Child Health, and Family Planning information system consists of a large number of recording and reporting formats causing duplication of recording but provides comprehensive information about the MCH/FP programme. Data analysis and use of information for decision making at local level does not occur in a regular manner. The information system is mainly functioning as a process of data transfer to higher levels. Data compilation using Master Sheets is a cumbersome procedure and is prone to errors.

The Maternal and Child Health Return (H 509) compiled at the MOH offices of the districts of Polonnaruwa (Intervention) and Matale (Non Intervention) for the pre-intervention period showed a mean difference of 38.1 and 35.8 from the Gold Standard H 509 return. Out of the four steps in data processing using the manual method the highest number of mean errors occurred in data tallying in Master sheets (Polonnaruwa 19.2, Matale 17.0). With the

introduction of the Public Health Information System (PHIS) software to the Polonnaruwa district, the difference between the Gold Standard H 509 and the H 509 of the MOH offices decreased significantly from 38.1 to 6.4. ($p < 0.001$). The staff of the offices of the MOH in the Polonnaruwa district were able to use the computerized system without any major problems after the training.

The PHIS software introduced proved to be effective in reducing the errors associated with data processing. A finalized version of the PHIS software should be introduced to all the MOH offices in Sri Lanka for better information management.

Regular feedback should be provided to data providers by the relevant higher authorities about the data submitted to them. Providing in-service training to the PHM on record keeping would help to improve the quality of the data they report.

The PHIS software provides facilities to monitor the performance of individual PHMM and to compare the performance of all PHMM in the MOH area. Therefore, a performance based appraisal system can be implemented for PHMM to appraise PHMM with better performance as well as to increase the supervision and monitor PHMM with poor progress.