Surveillance Malaria Newsletter   MOZAMBIQUE

This newsletter provides an update on an initiative implemented by Malaria Consortium in partnership with the Ministry of Health, funded by the Bill and Melinda Gates Foundation, with the aim of **strengthening the malaria surveillance system** in Mozambique.

Data quality assessment in Magude district, Maputo province

Using data for decision making in Magude

Malaria Consortium has supported Maputo province since 2019 to strengthen the province's malaria surveillance system, providing technical support in Magude district to carry out activities including malaria data quality assessments (DQA), post data quality assessment supervisions, and monthly and quarterly data quality discussion meetings. Magude district is located in the northern region of Maputo province, 150 km from the country's capital city, Maputo.

In the first quarter of 2021, Magude district registered a significant increase in malaria cases. Noémia Manhiça, Malaria District Program Focal Point for Magude explains how the surveillance and data quality activities implemented through the project have helped Magude district tackle this head on.

"During the monthly and quarterly data quality discussion meetings carried out by the district with Malaria Consortium's support and DQA supervision, we noticed a significant increase of malaria cases in the district, especially in Chichuco health unit (HU). Despite the district and province having defined and undertaken priority activities to reduce malaria cases,

including the increase of communications in the health area, the number of malaria cases continued to grow.

In March 2021, Magude district registered an increase comparable with the same period the previous year- 531 cases (71 percent). In the most recent DQA that we carried out in May at the individual health unit level, with the participation of the province and partners Malaria Consortium and Manhica Health Research Centre (CISM), we evaluated the data from the last three months. It was noted that once again the number of malaria cases reported in those months at Chichuco HU increased, which is why the decision was made to carry out a deeper investigation into the origin of the cases.

To respond to situations such as this, the NMCP had developed a standardised approach to support provincial and district teams to respond quickly and investigate areas with increased incidence of malaria or other data anomalies. Following this approach, the district in partnership with the province, together with the central NMCP and Malaria Consortium, carried out an investigation in June 2021 in the health areas that contributed to the increase at the district level.

Importantly, we now have an opportunity to view health units' data behaviour in various dynamic ways through the online platform, iMISS, into which all HUs input the weekly epidemiological bulletin and summary of malaria activities. This means that both they and we can view this whenever it is needed, alongside other malaria activities being undertaken. This research means a lot to the district and in particular to the malaria programme more widely, because it is about data quality and reporting that can inform decision makers and enable them to design strategies and take action to reduce malaria in the district in a timely way.

Final results of the investigation are still pending, although preliminary results point to the lack of intra-household spraying (PIDOM) in communities in the health area of Chichuco as one of the reasons for the rise in malaria cases. The district is grateful for the quick response and decision-making of the Provincial Health Directorate (PHD) and the support of Malaria Consortium, who are working with us tirelessly and have been teaching and instilling the importance of reporting quality data in the district."

Tomas Augusto Castelo, Head of Mississi Health Unit, Niassa province

Mississi Health Unit shows zero discrepancy in all indicators

This story was captured in Niassa Province, Mandimba district at the Mississi Health Unit (HU).

The Mississi HU is located 90km from the headquarters of the district of Mandimba and serves a population of approximately 21,277 inhabitants from surrounding villages, including patients from neighbouring Malawi. Outpatient consultations typically reach a peak of 1,500 per month, with the greatest proportion of these being children- the most vulnerable age group, especially for malaria.

Prior to the Data Quality Assessment (DQA) training given by Malaria Consortium in March 2020, the Mississi HU had many difficulties, including a lack of register books, lockers for safely storing materials and no training in data quality assessment. The training carried out in March 2020 brought changes in the way of thinking and working.

"I had never realised that DQA training would be such a good thing to improve the data quality and all indicators of my health unit, especially those of malaria. I improved indicators at our health unit because I started doing my own regular assessments of the data quality. In doing this, it made it easier to compare with the DQA made by supervisors from the district, provincial and national team when they come to this health unit. I felt good to see that the DQA that I did had the same results as when the supervisors did theirs, with no data difference – zero percent discrepancy in April 2021.

Malaria Consortium always supported me, in carrying out DQA, monitoring action plans, providing registration tools, a locker for the conservation of my books and summaries that I previously had nowhere to keep and that has helped contribute to the improvement of data quality produced at the health unit.

I changed my way of doing things because I was previously reporting data at the district meetings that was not of the necessary quality and this would be highlighted as an issue. I am very happy now that I have reached the goal of data quality without discrepancies. I would like to share my satisfaction and achievements with other HUs as I think improving data quality is a challenge for everyone."

Tomás Augusto Castelo, Head of Mississi Health Unit.

Since the start of implementing this project to strengthen surveillance in Niassa in 2019, Mississi HU is the first health unit in the province to report 100 percent data with no discrepancies.

Ongoing technical support improves data at Gondola District Hospital

Malaria Consortium is a partner of the Provincial Health Directorate (PHD) of Manica and provides technical and financial support for the project, Strengthening malaria surveillance for data-driven decision making in Mozambique.

From the first data quality assessment (DQA) undertaken in December 2019, to the fourth DQA in December 2020, Gondola District Hospital (DH) had presented data with a level of deviation that constituted medium- or poor-quality data. The four indicators evaluated in the DQA are: i. external consultations, ii. tested for malaria, iii. confirmed cases and iv. treated with Artemether/ Lumefantrine (AL). In the first DQA, Gondola DH presented low quality data with medium deviation of 155 percent and, in the indicator of confirmed cases, it presented a deviation of 23 percent, classed as low data quality.

Action plans to improve the quality of data were created but did not seem to have the desired effects and results from the third DQA, conducted in September 2020, continued to show no improvement. Concerned with the recurring poor data quality at this hospital, Malaria Consortium created a space for reflection with the Provincial Health Directorate (PHD) and District Service for Health, Women and Social Action and directly supported Gondola DH and the hospital management team. They investigated the possible causes and found that there was poor management of registration processes, a lack of a functional filing system and limited capacity of the technician who prepared the monthly summaries.

In response, Malaria Consortium, in coordination with the PHD, carried out a technical support visit in February 2021 to help create a functional and sustainable archiving system, carrying out an exhaustive survey of all recording instruments, identifying all registration books and increasing capacity with the appointment of a nurse to follow up the data collection.

"Malaria Consortium helped us realise that we didn't have a consistent filing system, nor did we know how many books we have in use at our hospital. And, after a data collection exercise, we also realised that the technician who performed this data collection activity did not have expertise in recording instruments, so whenever we received supervision or even a data quality assessment (DQA) our hospital presented terrible data with many discrepancies."

Ms Elisa, Clinical Director of Gondola District Hospital

With the filing system working and personnel trained and responsible for recording instruments and data collection, the situation in the fifth DQA, held in March 2021, showed a significant improvement in data quality at Gondola DH, with deviations averaging 11 percent, with the main indicator (confirmed cases) with a deviation of only one percent.

Data Quality Assessment in Gondola district, Manica province

Fifth Data Quality Assessment at Nhamatanda Rural Hospital, Sofala province

Workshop between districts improves data quality in Nhamatanda Rural Hospital

Nhamatanda Rural Hospital (RH) is the largest hospital unit in Nhamatanda district, serving around 9,000 patients each month. Clinical management at hospital-level units is characteristically complex with a greater flow of care, provision of diverse services and a complex data system. Following the Data Quality Assessment (DQA) in the district as part of phase one of the Strengthening malaria surveillance for data-driven decision making in Mozambique project, the Nhamatanda RH presented difficulties in the management and

reporting of malaria data, in particular, with the assessment demonstrating low data quality between the log book and the monthly summary, difficulties in management and conservation of record books and poor record quality.

In May 2021, during the DQA in Gondola district, Manica province, Nhamatanda RH was invited to exchange experiences of data management with the Gondola District Hospital (DH). Rabia Issufo, the Malaria Focal Point for Nhamatanda RH attended and learned lessons on data handling and logbook management that would assist with the improvement of data quality.

After learning about the practices of Gondola DH, Rabia Issufo implemented

the same strategies- mapping the log books in use by each service door, preparing monthly summaries by door, collecting and archiving log books used by the Malaria Focal Point. This culminated in a centralised system with easy tracking of sources of discrepancies and data quality control and positive results from these efforts were quick to appear. In the fifth DQA held in June 2021, Nhamatanda RH showed only seven percent deviation in data quality, a significant improvement on results from the previous DQA, which had a deviation of 33 percent. This is the best data quality phase since the beginning of the DQAs in 2019.

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