

IT Asset Management System (ITAMS)

Over the past year, METS had procured Information and Communication Technologies (ICT) support equipment on behalf of PEPFAR to support the Ministry of Health strategy on digitalization of the health sector.

The hardware is distributed by Implementing Partners to the selected health facilities. This includes equipment to support networking within and across facilities, data capture hardware computers, laptops, fingerprint readers, servers, TVs, speakers cameras, switches access points, routers and solar equipment to support activities during electric power outages. Over 800 facilities have benefited to date.

Following the purchase and distribution of this equipment, there was a need to track individual items through the IP to the health facility where they were delivered.

IT Asset Management System (ITAMS) is a tracking system built on top of DHIS2 data model that was designed and



Edward Bichetero giving and overview on the ICT procurement and distribution in PEPFER regions and a cross section of participants at the launch.

developed by METS in consultation with CDC and IPs to track and manage all the procured and distributed IT assets. The system captures data on

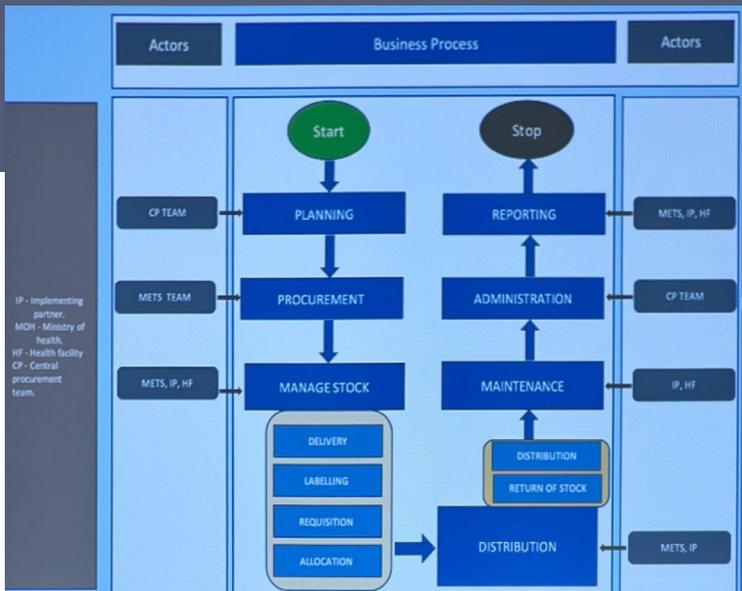
the hardware procured, allocated and distributed and tracks maintenance and custody status of the equipment up until the final consumer.

The system, which was launched on 20th March 2023 at Hotel Africana, brought together over 70 IP representatives to share knowledge and insights on how it operates.

Evelyn Akello, the Manager Programs at METS officially opened the training and appreciated the efforts made by IPs to pick and distribute the equipment. "It is a requirement that we trace this equipment and how much we have distributed. This meeting is going to

help us understand your needs and this will inform our distribution process," she said.

During the meeting, standard operating procedures on management, maintenance and requests were created. As he officially closed the meeting, Keneth Musenge from CDC uganda, applauded METS for the development of the system and encouraged the IPs to utilize it.



Jonathan Mpango introduces ITAMS and how it operates .



Evelyn Akello, Manager Programs at METS, during the official opening ceremony.



Kenneth Musenge making his remarks.

Moving forward, the trainees will be supported to roll out the system to all beneficiary facilities and end users. METS will continue to support the MOH digitalization strategy, working closely with PEPFAR, IPs, Regional Referral Hospitals (RRHs), and District health teams. The goal of ITAMS is to create an efficient tracking system for distributed health information system hardware.

Improving HIV surveillance in Uganda



Mentoring team on consenting process for recency at Bukuku HC IV.

Quality data is important for planning, implementation, monitoring and evaluation for HIV prevention, care, and treatment programs. Likewise, quality HIV Recency data is key for characterizing the HIV epidemic

for a targeted public health response. Findings from the HIV Recency surveillance Data Quality Assessment and Improvement (DQAI), conducted by METS in September 2022, revealed some gaps cutting across the recency

cascade starting from the number of newly identified HIV positive clients.

Consequently, METS in collaboration with Uganda Virus Research Institute



Feedback meeting at Yerya HC III.

(UVRI), University of San Francisco (UCSF) and implementing partners, conducted a joint HTS/ Recency onsite mentorship to check progress on implementation of the agreed upon action plans from the DQA.

Preliminary findings from the mentorship indicate delays in updating the electronic medical record with Recency data. There were persistent documentation gaps due to use of multiple data collection tools as well as challenges associated to utilization of the unique identifier across all Recency tools. There was limited or no internet access at facilities and this affected data transmission to the central database. A few facilities had quality improvement projects related to Recency and use of the data was very limited.

On a good note, staff who received training were knowledgeable on recency surveillance activities and the data collection tools were available (Recency addendum and logbook) and were being used. These staff were encouraged to continue sharing gained skills with other facility staff for sustainability of the program.

Overall, improvements are needed, and METS will work with Ministry of Health to address the gaps.



Mentorship on Completion of HTS register at Kyegegwa Hospital

METS will continue to provide mentorship and feedback to involved stakeholders.

METS will continue to provide technical assistance in capacity building through training, mentorship, and site supervision. In addition, METS will continue to develop, upgrade and maintain data management and reporting systems for HIV recency infection, surveillance and implementation.

Onsite Technical Support for Voluntary Medical Male Circumcision (VMMC)

METS supported the Ministry of Health (MoH) to conduct a service quality assessment for Voluntary Medical Male Circumcision (VMMC). A total of 48 facilities were selected to participate in the exercise. Sites were assessed for compliance with MoH VMMC service quality standards, accuracy of data reported in the national reporting system and DATIM for the period from July to December 2022, as well as the classification of reported adverse events (AE). In addition, the field teams provided technical support and coaching to sites to ensure that they effectively integrate recommendations of the mentors with a specific focus on AE identification, management, documentation, and reporting at the sites and collecting data on adverse events occurrence and reporting for the period under review.

Overall, an average percentage score of 83.1% was attained across 8 thematic areas. The thematic areas of

'completeness of SMC forms', 'management systems' and 'individual counselling' stood out as the best performed with average scores of 88.5%, 86.9% and 86.8% respectively (Figure 1). Similarly, the VMMC output was found to be accurately captured in the SMC registers and accurately reported in the monthly HMIS105 report, DHIS2 and DATIM with acceptable deviation range of -5%<5% (Figure 2). However, the VMMC output reported in the Nerve Centre (PIRS) in real-time was found to be grossly underreported (over 18%) as compared to the number of SMC client forms. Hence, there is a need to actively follow up and ensure that all SMC data is actively entered into the PIRS-Nerve Centre.

Going forward, METS will continue to provide technical support to all CDC-SMC providing facilities and disseminate the results from the mentorship.

Implementing Mechanism	Management Systems	Supplies, Equipment and Environment	Registration, Group Education, and IEC	Individual Counseling and HIV testing for SMC Clients	Surgical Procedure	Monitoring & Evaluation	Completeness of SMC forms	Infection Prevention	Over all
Over all	86.9	77.8	82.6	86.8	82.4	78.3	88.5	83.8	83.1
Baylor-Hoima	81.9	80.0	73.7	82.2	76.7	78.6	96.0	92.0	84.9
KCCA Strategy	66.7	56.3	50.0	70.0	81.8	69.6	26.7	57.6	57.9
MILD MAY-Mubende	96.3	72.9	83.3	100.0	88.9	92.9	98.7	79.8	91.5
RHSP-Masaka	88.9	77.5	85.4	79.2	83.8	60.0	91.3	67.7	77.7
TASO-Soroti	93.3	82.5	90.0	90.4	88.0	100.0	82.7	98.3	90.6
UCMB	91.7	90.6	79.2	84.5	82.9	88.4	100.0	97.7	91.0
UPS	59.3	62.5	75.0	75.0	52.6	59.9	60.0	74.2	59.6
IDI-West Nile	88.9	75.0	89.6	95.8	90.0	75.0	95.0	100.0	88.0
IDI-Kampala	88.9	82.1	91.7	100.0	90.0	85.7	80.0	93.3	87.3
UPMB	66.7	85.7	75.0	100.0		85.7	100.0	100.0	89.2
Baylor-Rwenzori	94.1	84.4	90.0	81.3	80.6	78.6		80.7	85.4

Average percentage score obtained by SMC IMs per thematic area in the MoH SMC Service Quality Tool.

Key:

<50%	50-74%	75-90%	>90%

Average percentage score obtained by SMC IMs per thematic area in the MoH SMC Service Quality Tool.

Implementing Mechanism	Td vaccination		SMC Client Forms	SMC Register		Monthly HMIS105 Report		DHIS2		DATIM		PIRS-Nerve Centre	
	No of MC	% MCs received Td dose	No of MCs (Gold standard)	No of MCs	VF (%)	No of MCs	VF (%)	No of MCs	VF (%)	No of MCs	VF (%)	No of MCs	VF (%)
Over all	49,015	99.9%	49,068	49,250	0.37	50,427	2.77	50,507	2.93	50,349	2.61	39,853	-18.78
Baylor-Hoima	10,736	100.1%	10,730	10,735	0.05	10,731	0.01	10,759	0.27	10,730	0.00	10,147	-5.43
KCCA Strategy	162	100.0%	162	162	0.00	152	-6.17	144	-11.11	154	-4.94	174	7.41
MILDMAY-Mubende	6,337	100.1%	6,330	6,337	0.11	6,316	-0.22	6,321	-0.14	6,359	0.46	5,662	-10.55
RHSP-Masaka	12,371	99.6%	12,424	12,309	-0.93	13,489	8.57	13,730	10.51	13,371	7.62	7,591	-38.90
TASO-Soroti	2,330	99.9%	2,333	2,323	-0.43	2,336	0.13	2,340	0.30	2,336	0.13	2,135	-8.49
UCMB	2,955	100.5%	2,941	2,955	0.48	2,956	0.51	2,960	0.65	2,955	0.48	1,653	-43.79
UPS	1,962	103.3%	1,899	1,967	3.58	1,903	0.21	1,897	-0.11	1,897	-0.11	964	-49.24
IDI-West Nile	5,954	105.0%	5,670	5,951	4.96	5,955	5.03	5,718	0.85	5,950	4.94	5,955	5.03
IDI-Kampala	5,903	94.1%	6,274	6,205	-1.10	6,283	0.14	6,332	0.92	6,284	0.16	5,572	-11.19
UPMB	305	100.0%	305	306	0.33	306	0.33	306	0.33	313	2.62	0	-100.00

Key:

<-10%, >10%	-10<-5%, 5%<10%	-5% <5%
-------------	-----------------	---------

Gallery



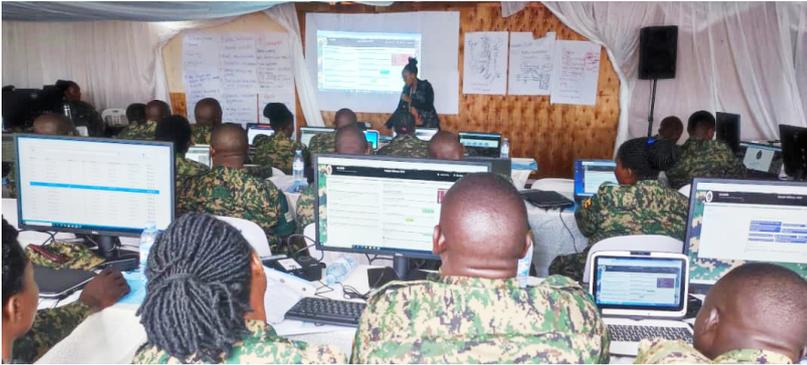
Evelyn Akello and Shamim Namale receiving the handover documents from Komusoft's Innocent Komurubuga (in Pink shirt) during the close out and handover meeting for the Module. Komusoft Solutions Ltd is the consultant that was engaged to develop the commodity module in UgandaEMR. Going forward, METS will take custody of the module.



Assistant Commissioner Health Systems for Health Information Management Division, Paul Mbaka, guiding the team on metadata adjustments during the Master Facility List (MFL) and electronic Health Management Information System updates and configuration to prepare for national facility registry. METS provided technical assistance to Ministry of Health to implement several national registries. The MFL registry has information on all health facilities in the country.



Musa Mwanje demonstrates how the patient transfer feature can be used across facilities during the PrisonEMR training at Uganda Prisons Luzira staff clinic



METS in collaboration with University Research Council (URC) and Department of Defense (DOD), conducted a Uganda People's Defense Force (UPDF) EMR training and mentorship on basic computer skills to equip the users with the current operations of the system. The participants were also trained on data entry and reporting using the electronic Health Management Information Systems (HMIS) tools.



Entry meeting with the Hospital Administrator at St Kizito Matany hospital during the HTS Recency mentorship in Napak district in the Karamoja district. The mentorships were aimed at evaluating and improving implementation of HIV testing services with a particular focus on recency testing at selected health facilities. This was an inter-agency activity between USAID CDC and DOD.



METS together with MOH, visited Masaka Regional Referral Hospital to monitor UgandaEMR Point of Care implementation towards the integration with eAFYA an electronic medical record currently being used in the Outpatients Department at the hospital. This will help to drive MOH agenda towards the digitization of the health sector.

METS WATCH EDITORIAL TEAM

Nancy Karunganwa

Dr. Alice Namale
Dr. Barbara Abindabyamu
Jonathan Mpango
Jacob Wasswa
Jenkins Obbo Tanga
Ibrahim Lutalo

FIND US  mets@musph.ac.ug  <https://www.facebook.com/MetsUg>  [@metsprogrammeug](https://twitter.com/metsprogrammeug)  <https://mets.or.ug/>