

MARCH 2024 METS WATCH

Development of National Electronic Medical Records (EMR) Implementation Guidelines

The Ministry of Health (MOH) is currently rolling out stakeholder workshop on 26th February to 1st March Electronic Medical Records (EMR) systems nationwide to optimize health service delivery in line with the Vision 2040 and the third National Development Plan (NDP III). The digitization of service delivery is recognized by the Government of Uganda as a key enabler for service optimization. It has the potential to improve decision quality by providing critical evidence to implementers at various levels.

To date, multiple Electronic Medical Records (EMR) systems have been rolled out to health facilities without implementation guidelines to inform the standard EMR process/clinical workflows within a typical health facility, minimum requirements for various EMRs to integrate and exchange patient information, insurance and billing workflows, human resources management, among others.

With this background, MoH in collaboration with Makerere University School of Public Health - METS Program and USAID/SITES organized a five-day

and validate **EMR** 2024. to develop the Implementation Guidelines for Uganda.

The workshop was held at Hotel Africana in Kampala and over 50 key stakeholders, that utilize the EMRs on a day-to-day basis at the health facilities and communities, participated in the documentation of the guidelines. Stakeholders that participated included representatives from regional referral hospitals (RRHs), district-based IT officers, health facility EMR focal persons, doctors, clinical officers, nursing officers, implementing partners (at facility and community level), academia, the private sector, private-not-for-profit organizations. departments, and agencies, among others.

Dissemination of the final and approved standards will guide the implementation of the EMRs in health facilities as per the Health Information and Digital Health Strategic Plan 2020/21 - 2024/25.



A team documenting the background and other governance structure and requirements in the EMR Implementation Guidelines



Team documenting the EMR functional and non-functional requirements, system process workflows

Improving the Quality of Voluntary Medical Male Circumcision

In February 2024, the Monitoring and Evaluation Technical Support (METS)program, in collaboration with the Ministry of Health (MoH), Centers for Disease Control and Prevention (CDC), and Implementing Partners (IMs), conducted targeted onsite mentorship across 56 safe male circumcision sites in CDC-supported regions of Uganda. These efforts aimed to bolster VMMC services and improve overall performance.

Through focused efforts and collaborative approaches, the mentorship initiative targeted both existing and new sites, including those supported by new Implementing Mechanisms such as IDI-Masaka-Wakiso, AIDS Information Centre (AIC) in Soroti, Baylor Fort Portal in Mubende, and Reach Out Mbuya (ROM) in Kampala. The evaluation involved assessments of VMMC service compliance with MoH quality standards, accuracy of reporting in national systems like DHIS2 and DATIM, and classification of adverse events (AEs).

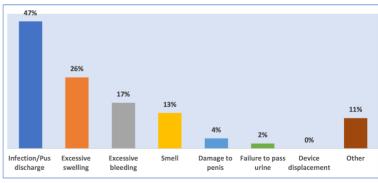
Field teams provided tailored technical support and coaching, emphasizing effective integration of mentorship recommendations. Special focus was given to adverse event identification, management,

tation, and reporting. Additionally, mentorship teams facilitated the implementation of root cause analysis (RCA) to understand barriers preventing men aged above 30 years from seeking VMMC services.

Key findings highlighted the overall facility performance score of 78%, with 5 out of 8 thematic areas scoring above 80%. Notably, 99% of circumcised males had received Tetanus vaccines. However, under-reporting of follow-ups within 14 days of circumcision and adverse events (AEs) was noted, signaling areas for improvement. A total of 51 AEs occurred during the review period, with 90% correctly classified, calling attention to prevalent issues such as infections and excessive swelling.

METS reaffirms its commitment to providing ongoing technical support to all CDC-supported VMMC facilities. Furthermore, the insights collected from the mentorship initiative will be disseminated to relevant stakeholders, ensuring a collaborative effort towards enhancing VMMC services across Uganda. Through collaborative efforts and strategic partnerships, we strive to promote male circumcision as a vital component of HIV prevention, safeguarding the health and well-being of communities in Uganda.





Innovation To Strengthen Quality Improvement: Insights from

The 10th National Health Care Quality Improvement (QI) conference brought together health service providers from various parts of the country to share experiences and what they are doing to improve service delivery to patients. These included innovations and best practices they employ at their respective health facilities.

The conference provided a platform for learning, reflection, and refinement of best practices especially under innovation in health in an attempt towards attaining quality in health care. During the opening ceremony, the minister of health, Hon. Dr. Jane Ruth Aceng, called for attention to the need for solutions that will provide answers especially in areas of governance and leadership, health workforce, information systems, service delivery, financing, special groups, and health products.

She pledged that the MoH would continue to make investments in the national health system and was happy that the guidelines to help implement various innovations were launched. The Harmonised Health Facility Assessment Report and the Quality-of-Care Implementation Guide for Reproductive, Maternal, New-born, Child and Adolescent Health and Nutrition Services were launched at the conference held on 12-14 March 2024 in Entebbe, Uganda. The report will provide indicators for health services delivery as well as information on readiness of health facilities to give quality care to patients.

The conference, themed, 'Innovations to strengthen health systems for delivery of quality health care in resource limited settings' was made up of three keynote speeches, poster presentations, breakout sessions, and panel discussions on key issues based on the World Health Organisation's health system building blocks.

METS made a presentation on improved service delivery models focusing on empowering young women to stay HIV-free with the help of the Determined Resilient Empowered AIDS-free Mentored and Safe (DREAMS) initiative. The risk of HIV infection is much higher in girls than boys in Uganda and majority of new HIV infections occur among young females.

The Ministry of Health, along with partners like PEPFAR, MakSPH, and UHA, created the National DREAMS collaborative with the aim of reducing HIV infections and their impact on AGYWs. The initiative also focuses on services for male partners of AGYWs like circumcision, ensures that all eligible AGYWs are screened for HIV and receive preventive medication (PrEP), family planning counselling and services, and more.

METS, along with the Ministry of Health, is providing crucial support to make these goals a reality. This is through training district coaches and regional partners, organizing coaching and mentorship visits to DREAMS sites, and coordinating national meetings to share progress and insights.

These efforts have resulted into plausible improvements including the percentage of male partners of AGYWs who are circumcised has risen from 84% to 91%, and nearly all eligible AGYWs are now receiving PrEP. More young women are also getting family planning counselling and finding the right method for them to stay healthy and HIV-free.

Mary Borgman, the PEPFAR Coordinator called for continued utilization of community centred approach and continuous quality improvement which is important in improving rapid diagnosis and treatment as a way of countering the spread of disease.

The conference was officially closed by Minister of State for Primary Healthcare, Margaret Muhanga who called on health workers to treat the community with kindness and called for integration of Quality Improvement (QI) in health care especially in treatment of TB, laboratory management, maternal, and new-born health care.



A group picture with the Minister of Health, Dr. Jane Ruth Aceng





Ten health facilities were recognised for their commendable performance in providing health care

- 1. Rushere Community hospital
- 2. Kisugu HCIII
- 3. Wentz Medical Centre
- 4. Abel Hospital
- 5. Mother Francisca Ntungamo
- 6. Kibaale HCIV
- 7. St. Mary's Lacor Hospital
- 8. Adjumani Hospital
- 9. Rugarama Hospital Kabale
- 10. Bussi HCIV Wakiso



Four individuals were recognised for their dedicated efforts towards QI in health care

- 1. Mr. Lawrence Ojom
- 2. Ms. Grace Latigi
- 3. Dr. Martin Ssendyona
- 4. Dr. Samuel Otooba

The focus remains on enhancing healthcare quality, ensuring access to essential services, and empowering communities to lead healthier lives. Through collaborative efforts and ongoing innovation, a healthier future for all is attainable.

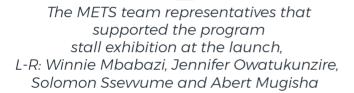
Gallery

The Makerere University School of Public Health launched its state-of-the-art auditorium on 15th March 2024. The launch was officiated by the Netherlands ambassador to Uganda, Karin Boven.

Moments from the ceremony are highlighted below.



Chairperson Makerere University Council,
Mrs. Lorna Magara (Blue jacket)
and Ambassador Boven
with the delegation that attended
the launch







Vice Chancellor Barnabas Nawangwe, Ambassador Karin Boven, Netherlands to Uganda, Professor Rhoda Wanyenze and Deputy Vice Chancellor Prof. Umar Kakumba discussing the UgandaEMR+ innovation deployed at health facilities.







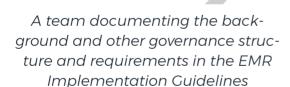
Dr. Sabrina Kitaka visiting the MakSPH-METS stallduring the launch of the School of Public Health state of the art auditorium at their new home located at the main university campus on 15th March 2024.



Representatives from MoH and METS paying a courtesy visit to the Hoima RRH director before deploying the latest Electronic Medical Records version to improve patient care



Dr. Simon Walusimbi, the TB Focal
Person at METS, giving opening
remarks during the training for KCCA
staff on use of Point of Care (POC) EMR.
He emphasized the need to adopt the
TB POC module and have it integrate
with electronic Case Based
Surveillance (eCBSS).







Nancy Karunganwa Dr. Alice Namale Winnie Mbabazi Jenkins Obbo Hajji. Ibrahim Lutalo Ausse Kalega