

OBJECTIVE

To understand, examine and analyse the role of HMIS in MP, triangulating data, RMNCH+A and study the decision making process for immunization in 3 different years.

MISSION AND VISION

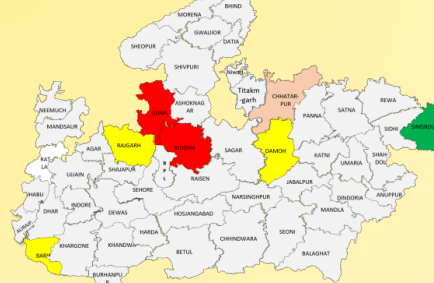
The NHM envisages achievement of universal access to equitable, affordable & quality health care services that are accountable and responsive to people's needs.

METHODOLOGY

- The data from HMIS and NFHS survey of the year 2015-2016, 2019-2020 and 2021 was taken for the aspirational districts of Madhya Pradesh.
- For the year 2015-2016 and 2019-2020 the indicators taken for the study were of child immunization which includes –
% of children received BCG vaccine, 2 doses of Penta vaccine, first and second dose of MR, and Hepatitis.
- And for the year 2021, 16 indicators of RMNCH+A were taken.
- Composite index of all the indicators for different districts were calculated with their quartile.
- For calculating composite index the formula used is = $\text{district data} - \text{minimum value} / \text{maximum value} - \text{minimum value}$.
- For quartile the formula used is = $\text{QUARTILE}(\text{composite index of a indicator for all districts}, Q1)$
- And the overall composite index was then calculated showing the performances of districts at different levels

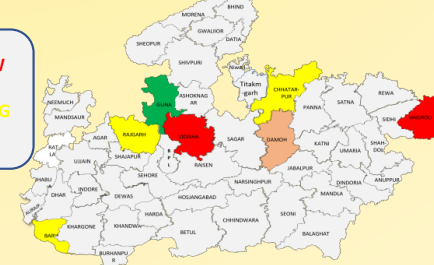
FINDINGS

2015-2016 (IMMUNIZATION)



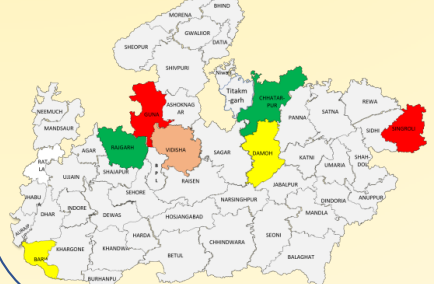
- For the year 2015-2016 Vidisha and Guna were seen the least performing districts. In these districts low percentage of immunization were observed. Whereas on the other hand Singrauli monitored with high percentage of immunization comparatively.

2019-2020 (IMMUNIZATION)



- For the year 2019-2020 Singrauli and Vidisha have shown very low percentage of immunization whereas Guna has shown great percentage and Barwani, Chhatarpur and Rajgarh have shown potential of improvement. Damoh on the other hand needs to improve.

2021 (RMNCH+A)



- In the year 2021 the RMNCH+A data has shown Singrauli and Guna as the least performing district in comparison to Rajgarh and Chhatarpur which has shown good percentage. Damoh has shown signs of improvement whereas Vidisha needs monitoring.

STRENGTH

- Locational advantage of all healthcare buildings in the government sector.
- Very large workforce of volunteers (ASHAs).

WEAKNESS

- Acute shortage of manpower at most of the levels in healthcare delivery.
- Skewed distribution of manpower.

SWOT

OPPORTUNITY

- Commitment of the government to improve the present situation.
- Large population engenders massive domestic demand for healthcare services.

THREAT

- The government has not been able to maintain its buildings.
- Private sector, lucrative in terms of salary and work environment, is very inviting for the medical and allied health workers to shift out of government healthcare set-ups.

GAPS

- Data filling on different portals.
- HR (managerial skills)
- Data Duplication

SUGGESTIONS

- Managerial skills should be implemented.
- Data filling portals should be introduced.

CONCLUSION

The research has shown that HMIS department of NHM, MP has played an important role in providing basic healthcare facilities to the aspirational districts of Madhya Pradesh although some areas still need proper monitoring.

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